# SUCCESS OF THE IMPLEMENTATION OF ELDERLY WELFARE SYSTEM POLICY UNDER SUSTAINABILITY PRINCIPLES IN THE NORTHEAST OF THAILAND

SARATSANUN UNNOPPORN

A Dissertation Submitted in Partial
Fulfillment of the Requirements for the Degree of
Doctor of Philosophy (Development Administration)
School of Public Administration
National Institute of Development Administration
2023

# SUCCESS OF THE IMPLEMENTATION OF ELDERLY WELFARE SYSTEM POLICY UNDER SUSTAINABILITY PRINCIPLES IN THE NORTHEAST OF THAILAND SARATSANUN UNNOPPORN

**School of Public Administration** 

| Fulfilln | The Examining Committee Approved This Dissertation Submitted in Partial nent of Requirements for the Degree of Doctor of Philosophy (Developmen stration). |
|----------|--|
|          | Committee Chairperson (Associate Professor Tatchalerm Sudhipongpracha, Ph.D.)  |
|          | (Associate Professor Pairote Pathranarakul, Ph.D.)   |
|          | Committee  |
|          | (Associate Professor Achakorn Wongpreedee, Ph.D.)  |

#### **ABSTRACT**

**Title of Dissertation** SUCCESS OF THE IMPLEMENTATION OF

ELDERLY WELFARE SYSTEM POLICY UNDER

SUSTAINABILITY PRINCIPLES IN THE

NORTHEAST OF THAILAND

**Author** Miss SARATSANUN UNNOPPORN

**Degree** Doctor of Philosophy (Development Administration)

**Year** 2023

This dissertation is the study of research and development aimed at 1) examining the success factors of implementing policies for the elderly welfare system in the northeast region of Thailand; 2) comparing the success of implementing policies for elderly welfare under the sustainable development principles in the northeast region of Thailand classified by the characteristics of the sample population; 3) explaining the relationship among the factors that affect the success of implementing policies for elderly welfare under the sustainable development principles in the northeastern region of Thailand; 4) evaluating the success of the implementing policies for elderly welfare under the sustainable development principles in the northeastern region of Thailand; and 5) proposing a model for the success of implementing policies for elderly welfare under the sustainable development principle in the northeastern region of Thailand. The population of this research is 3,386,357 elderly people on welfare in 20 provinces in the northeast of Thailand using statistics on the elderly in 2021. The researcher has determined the sample group used in the study at the confidence level of 95 percent using the table of Krejcie and Morgan table (1970). A total of 400 samples was used in this study using stratified random sampling and purposive sampling methods. The key informants were fifteen government agencies involved in policy implementation requirements (with at least seven years of policy-driving experience) by using the purposive sampling method and focus groups.

Regarding the data analysis according to objective one, according to the basic data from the questionnaire respondents, it was found that the majority of the respondents were female aged between 71 to 75 years with an education below the bachelor's degree and with work experience between five and 10 years, staying with

their family, working as a hired worker or salesperson, had a family income of 10,000 to 30,000 baht, and the main sources of income were from self-employment.

The data analysis on the elderly welfare system's needs revealed that, in general, the demand for the elderly welfare system was high (mean=3.64, SD=0.43). The analysis of the data regarding the needs of the elderly welfare system revealed that the implementation of elderly welfare policies, in general, was at high level (=3.95, S.D.=0.51). According to the management structure that emphasizes work according to function and top-down command, management was carried out in the form of "covering the ground" and overlooked the potential and diversity of the area. This has led to problems and obstacles in development, both at the policy and operational levels: 1. separation between social service and health service work leads to a lack of continuity and strength in service delivery; 2. changes in politics have resulted in a lack of continuity for various policy projects; 3. there is still a lack of budget and personnel with expertise and abilities in the field of elderly care, particularly within local organizations; and 4. the social welfare provided by the state to elderly people is still insufficient and does not fully meet the real needs of the elderly, including those that are entitled to receive such benefits.

The development guidelines from this study are as follows. One, in terms of social network development, management has a responsibility to participate in planning and budget allocation, which will lead to successful achievement of goals. Further, public sector organizations must comply with development plans and social welfare, with budget evaluations that are transparent and secure. Moreover, there should be a system in place for equitable services, including local government agencies, private sector organizations, and the public. Two, in terms of the sustainable development plan, the sustainability and stability of the plan can be analyzed through evaluation and testing in order to ensure that resources are managed and provided sustainably in the future.

#### **ACKNOWLEDGEMENTS**

Eight years in the making, this doctoral dissertation stands as a testament to the culmination of my Ph.D. journey, one that shaped by the generosity, guidance, and unwavering support of numerous individuals and institutions.

First and foremost, I extend my deepest gratitude to my advisor, Associate Professor Achakorn Wongpreedee, whose encouragement have been the cornerstone of my academic growth. Your mentorship has not only shaped this dissertation but has also inspired me to strive for excellence in all aspects of my scholarly pursuits.

I am immensely grateful to the members of my doctoral committee, Associate Professor Tatchalerm Sudhipongpracha and Associate Professor Pairote Pathranarakul for their invaluable scholarly insights that have enriched the quality of this work. Your constructive criticism and thoughtful guidance have been a source of inspiration and motivation throughout this journey.

To NIDA, thank you for your understanding and flexibility in granting me the opportunity to extend my study period until I could complete all the requirements. Their support during this challenging time has been invaluable, allowing me the time needed to navigate unforeseen circumstances and continue my academic journey to the finish line.

I extend my heartfelt appreciation to my family and loved ones for their unwavering love. Their support had sustained me through the challenges of pursuing a doctoral degree.

As I embarked on, I carry with me the lessons learned during my time as a doctoral student. This dissertation is not a reflection of my individual efforts but also a testament to a collective support and encouragement that have shaped me into the scholar I am today.

SARATSANUN UNNOPPORN

April 2024

## TABLE OF CONTENTS

|  | Page |
|--|------|
| ABSTRACT   | iii  |
| ACKNOWLEDGEMENTS   | V    |
| TABLE OF CONTENTS  |      |
| LIST OF TABLES   | viii |
| LIST OF FIGURES  | X    |
| CHAPTER 1 INTRODUCTION   |      |
| 1.1 Background and Significance of the Problem                     | 1    |
| 1.2 Research Questions   | 4    |
| 1.3 Research Objectives  | 4    |
| 1.4 Scope of the Research  | 5    |
| 1.5 Demographic Scope and Sample of the Study                      | 5    |
| 1.6 Conceptual Framework of the Study                              | 6    |
| 1.7 Expected Benefits  | 8    |
| CHAPTER 2 LITERATURE REVIEW  | 9    |
| 2.1 Current Situation of the Elderly in Thailand and Future Trends | 10   |
| 2.1.1 Evolution of Welfare Policy                                  |      |
| 2.1.2 Concept of Welfare Policy                                    | 15   |
| 2.1.3 The Situation of the Elderly in Thailand                     | 21   |
| 2.2 Concept of the Elderly   |      |
| 2.2.1 Definition of Elderly  | 26   |
| 2.2.2 Theory of the Elderly  | 27   |
| 2.2.3 The Needs of the Elderly                                     | 28   |
| 2.2.4 Determination and Planning of Public Welfare for the Elderly | 29   |
| 2.2.5 Concepts of Welfare for the Elderly Abroad                   | 31   |
| 2.2.6 Concept of Policy Implementation                             | 34   |

| 2.2.7 Welfare State and Democratic Society                          | 39  |
|---|-----|
| 2.2.8 Exploring New Innovations to Support Elderly Welfare Policies | 40  |
| 2.3 Expend the Context of Sustainable Development Goals (SDGs)      | 45  |
| 2.4 Financial System/Budget Management Process                      | 47  |
| 2.5 The Essence of Public Policy Evaluation                         | 55  |
| 2.6 Characteristics of Public Policy Evaluation                     | 56  |
| CHAPTER 3 RESEARCH METHODOLOGY                                      |     |
| CHAPTER 4 DATA ANALYSIS AND FINDINGS                                | 68  |
| 4.1 Establishment of Welfare and Political Systems                  | 101 |
| 4.2 Promoting Community-Centric Policies                            | 102 |
| 4.3 Utilizing the Framework of Sustainable Development Goals        | 104 |
| 4.4 Management of Financial and Budget Systems                      | 107 |
| CHAPTER 5 SUMMARY OF THE FINDINGS AND RECOMMENDATIONS.              | 118 |
| 5.1 Research Summary  | 118 |
| 5.2 Discussion  | 127 |
| 5.2.1 Pharmaceutical Benefits Scheme (PBS) Initiative               | 132 |
| 5.2.2 Benefits of the Pharmaceutical Benefits Scheme Program        | 132 |
| 5.2.3 Mutual Health Care Agreements                                 |     |
| 5.2.4 Public Healthcare in Australia                                |     |
| 5.3 Recommendations   | 134 |
| 5.4 Future Research Recommendations                                 |     |
| BIBLIOGRAPHY  |     |
| APPENDICES  | 139 |
| Appendix A Questionnaire  | 140 |
| Appendix B Interviewee Information                                  | 149 |
| BIOGRAPHY   | 152 |

## LIST OF TABLES

|            |   | Page |
|------------|---|------|
|            |   |      |
| Table 2.1  | Variable Synthesis (Overview)                                       | 33   |
| Table 2.2  | Summary of Conceptual Variables (Policy Implementation)             | 52   |
|            | Variable Synthesis (Policy Assessment)                              |      |
| Table 3.1  | Number of Elderly in the Northeast of Thailand                      | 62   |
| Table 3.2  | Stratified Random Sampling Method                                   | 63   |
| Table 4.1  | Fundamental Data of the Respondents                                 | 69   |
| Table 4.2  | Results of Mean and Standard Deviation of the Elderly Welfare       |      |
|            | System's Needs (Overall)  | 72   |
| Table 4.3  | Analysis of Mean and Standard Deviation Results in the Needs of     |      |
|            | Elderly Welfare System (Health Aspect)                              | 73   |
| Table 4.4  | Analysis of Mean and Standard Deviation Results of Needs of Elderly |      |
|            | Welfare System (Education Aspect)                                   | 74   |
| Table 4.5  | Analysis of Mean and Standard Deviation Results of the Needs of     |      |
|            | Elderly Welfare System (Housing Aspect)                             | 75   |
| Table 4.6  | Analysis on Mean and Standard Deviation Results of the Needs of     |      |
|            | Elderly Welfare System (Security Aspect)                            | 76   |
| Table 4.7  | Analysis of Mean and Standard Deviation Results of Implementation   |      |
|            | of Elderly Welfare Policy (Overall)                                 | 77   |
| Table 4.8  | Analysis of Mean and Standard Deviation Results of                  |      |
|            | the Implementation of Elderly Welfare Policy (Determination of the  |      |
|            | Welfare System)   | 78   |
| Table 4.9  | Analysis of Mean and Standard Deviation Results of Implementation   |      |
|            | of Elderly Welfare Policy (Promotion of Community Public Policies)  | 80   |
| Table 4.10 | O Analysis of Mean and Standard Deviation Results of Implementation |      |
|            | of Elderly Welfare Policy (Implementation of Sustainability)        | 81   |

| Table 4.11 Analysis of Mean and Standard Deviation Results of Implementation |  | of  |
|--|--|---|
|  | Elderly Welfare Policy (Financial/ Budget Management)                | 83  |
| Table 4.12   | Assessment Items and Number of Indicators for Evaluating the         |   |
|  | Implementation Policy of Welfare System for Elderly Under            |   |
|  | Sustainability Principles in the Northeast of Thailand (Dimension 1: |   |
|  | Effectiveness)   | 86  |
| Table 4.13   | Assessment Items and Number of Indicators for Evaluating             |   |
|  | Implementation Policy of Welfare System for the Elderly Under        |   |
|  | Sustainability Principles in the Northeast of Thailand (Dimension 2: |   |
|  | Service Quality)   | 90  |
| Table 4.14   | Assessment Items and Number of Indicators for Evaluating             |   |
|  | Implementation Policy of Welfare System for the Elderly Under        |   |
|  | Sustainability Principles in the Northeast of Thailand (Dimension 3: |   |
|  | Efficiency)  | 92  |
| Table 4.15   | Assessment Items and Number of Indicators for Evaluating             |   |
|  | Implementation Policy of Welfare System for the Elderly Under        |   |
|  | Sustainability Principles in the Northeast of Thailand (Dimension 4: |   |
|  | Organization Development)  | 95  |
|  | Table 4.12  Table 4.13  Table 4.14                                   | Table 4.12 Assessment Items and Number of Indicators for Evaluating the Implementation Policy of Welfare System for Elderly Under Sustainability Principles in the Northeast of Thailand (Dimension 1: Effectiveness) |

# LIST OF FIGURES

|   | Page |
|---|------|
| Figure 1.1 Conceptual Framework of the Research                       | 7    |
| Figure 4.1 New Welfare System Model                                   | 113  |
| Figure 4.2 Picture of the New Model of the Welfare System             | 114  |
| Figure 4.3 Political System Model Policy Assessment to Mechanisms and |      |
| Methods for Public and Non-Governmental Participation                 | 115  |
|   |      |

#### **CHAPTER 1**

#### INTRODUCTION

#### 1.1 Background and Significance of the Problem

Thailand is poised to fully transition into an aging society by 2022, with an anticipated 20 to 30 percent of the population falling into the elderly category. Looking ahead to 2031, the nation is projected to evolve into a super aging society, akin to Japan, with 28 percent of the population aged 60 and above. Globally, around one billion people are classified as elderly, constituting approximately 10 percent of the world's population.

Within the ASEAN region, 11 percent of the population is aged 60 and over, with seven countries already crossing the threshold into an aging society. Singapore leads the way as the country to fully embrace an aging society with over 20 percent of its population aged 60 and above.

Addressing the challenges posed by the aging population, extending the retirement age emerges as a viable short-term solution, offering economic relief. Singapore, for instance, has raised the retirement age from 65 to 67 years, while South Korea plans to increase it from 55 to 60 years. Japan, having previously allowed the elderly to work until the age of 62, aims to extend this limit to 65 years by 2025. Thailand is also contemplating an increase in the retirement age for workers, considering a shift from 55 to 60 years.

The changes underway have profound implications at the individual level, particularly within the working-age group, as the responsibility of caring for elderly intensifies. In Thailand, the current labor force ratio stands at 4:1:1 (labor force: elderly: children), and it is anticipated to adjust to 2:1:1 by 2036. The increasing number of elderly individuals poses challenges to maintaining a good quality of life for all stakeholders, especially with poverty emerging as a significant issue during retirement.

As the number of elderly individuals rises annually, the working-age labor pool diminishes, resulting in a labor shortage. This may necessitate increased reliance on machinery, tools, or foreign workers. With such a challenging scenario, elderly families are expected to tighten their budgets. Consequently, Thailand's domestic consumption is likely to decrease as a majority of the population becomes old and financially strained. The decline in purchasing power will lead to reduced savings, placing a burden on the working-age population. The Thai government may need to boost welfare expenditure for social services and health for the elderly, contributing to a decrease in national saving and investments. The higher proportion of the elderly also impacts the reduction of the Gross National Product (GNP) or national income, leading to a decrease in average income per person and production quality.

When the government increases expenditure on health, medical expenses, and social services for the elderly, there is a need for an expanded budget to assist impoverished elderly individuals. Additionally, tax income collection may decrease, given that a larger proportion of the elderly may have no income. The working-age population faces increased workload and the added responsibility of caring for the elderly. Mental health threats are a significant concern for policymakers, as many elderly individuals experience mental insecurity, loneliness, and feelings of being a burden to their children. Simultaneous, physical health issues are inevitable, necessitating preparation through savings or investment planning for expected future expenses, or utilizing accumulated saving towards the end of life (Department of Elderly Affairs, 2022).

Moreover, Thailand's elderly operations are governed by crucial legal frameworks, namely the Elderly Act of 2003, Amendments in 2010, and the second National Elderly Plan (2002-2021), initiated in 2002 and revised in 2009. This plan aims to enhance the quality of life for the elderly, promoting a valuable and self-reliant existence with stable security, thus ensuring they qualify as senior citizens. Currently, there are three pension systems in Thailand: the government budget-funded pension system, the government pension, and the pension fund for civil servants and local staff. In this system, pension recipients are not required to contribute to the payment of any contributions. The funds are sourced from the budget, with the pension amount governed by clear rules and regulations.

The pension system based on social security principles is the Social Security Fund. In this system, the pension recipient is required to contribute to the fund under specified conditions, and the amount of the pension is governed by clear rules and regulations. On the other hand, pension systems based on the principle of savings include the Government Pension Fund, the Provident Fund, the Social Security Section 40, and the National Savings Fund. In these systems, the pension recipient contributes to the fund at a defined rate or amount and receives a pension based on the accumulated amount and/or the period of their savings, including returns from fund management.

Regarding government-related issues, the researcher can shed light on problems, obstacles, limitations in operations such as social welfare for the elderly. A systemic problem arises due to the involvement of multiple agencies, with various pension systems managed separately according to the laws governing each system. This lack of integration hinders a cohesive approach, resulting in a fragmented pension system in Thailand.

Furthermore, the integrated work plan to promote equality and support elderly society faces challenges. Since 2017, the expenditure budget for the integrated plan accounted for less than one percent of the government's annual welfare budget for the elderly. The majority of the welfare budget, representing 99 percent, is allocated to pension and pension for the elderly but is not part of the integrated plan. This lack of integration leads to a discontinuity in policy and practice at different levels.

The current elderly pension, a universal payment ranging from 600 to 1,000 baht per person per month, falls short of meeting minimum living expenses. Relying solely on the basic pension system for income presents challenges for sustenance in old age. The government pension's expenses continue to increase significantly compared to the number of people granted rights; the existing pension system does not cover all groups, particularly informal workers. Although the government has established a National Saving Fund to encourage savings, the rules for payment upon reaching old age lack motivation for participation.

Elderly individuals and their families often lack awareness and understanding of the rights granted by the Elderly Act of 2003 (B.E. 2546). Challenges include difficulties in accessing funds, borrowing rules that are not conducive to the elderly, and the absence of a law supporting long-term care for those with dependencies. The

current focus on hospitalization rather than continuous family or community care exacerbates the shortage of personnel for elderly care. Employment initiatives primarily encourage the private sector to hire elderly workers through tax incentives, but informal workers, who form the majority of elderly workers, lack adequate support and protection under the Labor Protection Act of 1998. Additionally, law and regulations currently prohibit local government organizations from supporting and organizing activities to promote and improve the quality of life for the elderly (Budget Office of the Parliament, 2010).

Given such importance, the researcher recognizes the significance of studying policy mechanisms driving elderly welfare within the framework of sustainability principles in Northeast Thailand to ensure successful implementation and practice. The northeastern region boasts the highest concentration of elderly individuals in Thailand. The researcher conducted an analysis across 20 provinces, examining elderly welfare initiatives in each province to facilitate comparison and evaluate the impact of policy implementation on sustainability. This endeavor aims to serve as a model for the development of more effective policy plans in the future.

#### 1.2 Research Questions

- 1) How has the welfare policy for the elderly in Thailand evolved in the past 20 years (2002-2022)?
- 2) How does the Thai government apple budget allocation to its elderly policy and is it carried out with success or failure (policy evaluation)?

#### 1.3 Research Objectives

- 1) To study the success factors of the implementation of the elderly welfare system policy in the northeast of Thailand
- 2) To compare the success of the implementation of the elderly welfare system policy in practice under the sustainability principles in the northeast of Thailand classified by the population characteristics of the sample

- 3) To describe the relationship among the factors affecting the success of the implementation of the elderly welfare system policy in practice under the sustainability principles in the northeast of Thailand
- 4) To assess the successful implementation of the elderly welfare system policy under the sustainability principles in the northeast of Thailand
- 5) To propose a model for the success of the implementation of the elderly welfare system policy in practice under the sustainability principles in the northeast of Thailand

#### 1.4 Scope of the Research

The researcher studied documents, textbooks, and related research including concepts and theories from domestic and foreign academics, including:

- 1) Elderly welfare policy in Thailand
- 2) Evolution of welfare policies
- 3) Public policy and its implementation
- 4) Sustainability context of the development plan
- 5) Community based programs and the social support system
- 6) Promotion of the community policy
- 7) Principles of balanced scorecard (BSC) assessment
- 8) The context of the northeast region regarding elderly welfare in each

province

#### 1.5 Demographic Scope and Sample of the Study

Population and Sample

The study population comprises 3,386,357 elderly individuals receiving welfare assistance across 20 provinces in the northeast region of Thailand, as reported in the Statistics of the Elderly in Thailand for the year 2021. The researcher established the sample group, utilizing the Krejcie and Morgan table (1970), with a confidence level of 95 percent. In total, 400 samples were selected through a combination of stratified random sampling and purposive sampling methodologies.

Fifteen key informants from government agencies, possessing a minimum of seven years of experience in policy implementation, were identified using the purposive sampling method and focus group approach to contribute to the study's depth and understanding of policy-driving factors.

#### 1.6 Conceptual Framework of the Study

In this current study, the researcher has conducted an extensive review of both domestic and foreign documents and research pertinent to the implementation of policies, aiming to enhance the conceptual framework for the development of greater potential.



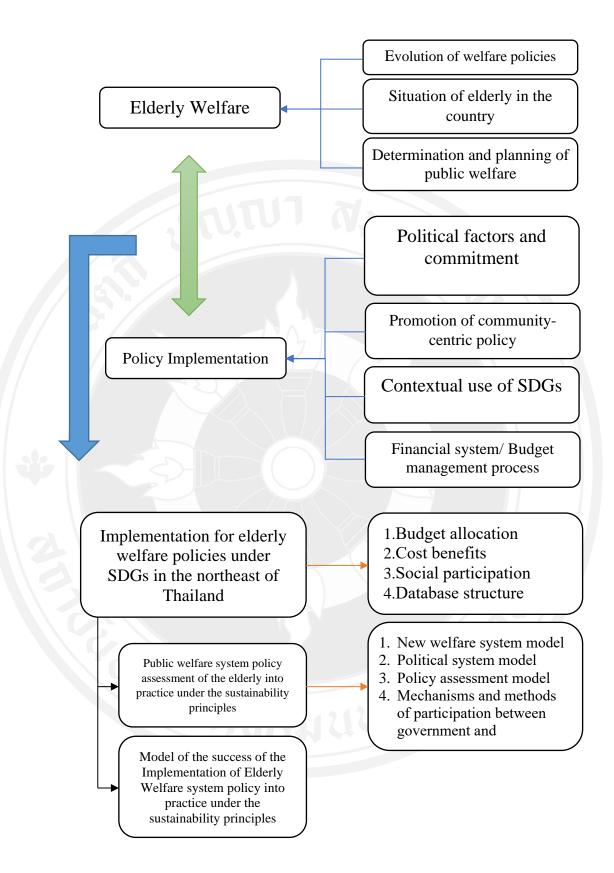


Figure 1.1 Conceptual Framework of the Research

#### 1.7 Expected Benefits

- 1) The synthesis of a development model can be derived from the analysis of data on the success factors influencing the implementation of the elderly welfare policy in the northeastern region of Thailand.
- 2) The outcomes of the analysis and comparison of the practical implementation of the elderly welfare policy, guided by sustainability principles in the northeast of Thailand, can serve as a foundation for constructing development projects aimed at enhancing the efficiency of relevant agencies.
- 3) Evaluation results of the elderly welfare system policy, when implemented in the northeast of Thailand, can facilitate the creation of sustainable policies and action plans. This, in turn, can contribute to the formulation of development models which enhances potential for practical application.
- 4) A model designed for the successful implementation of the elderly welfare system policy, aligning with sustainability principles in the northeast of Thailand, can be developed. This model is intended to facilitate better integration for the benefit of the entire country.

#### **CHAPTER 2**

#### LITERATURE REVIEW

This research endeavors to investigate the efficacy of implementing the elderly welfare system policy in the northeastern region of Thailand, particularly under the guiding principles of sustainability. The primary objective is to discern the success factors contributing to policy development in this context. The research will specifically concentrate on crafting guidelines for the implementation of elderly welfare policies aligned with sustainability principles. Secondary information sources will predominantly include documents, books, and relevant research, and the researcher will organize and present these material as outlined below.

- 2.1 Current Situation of the Elderly in Thailand and Future Trends
  - 2.1.1 Evolution of Welfare Policy
  - 2.1.2 Concept of Welfare Policy
  - 2.1.3 The Situation of the Elderly in Thailand
- 2.2 The Concept of the Elderly
  - 2.2.1 Definition of the Elderly
  - 2.2.2 Theories about the Elderly
  - 2.2.3 The Needs of the Elderly
  - 2.2.4 Determination and Planning of Public Welfare for the Elderly
- 2.3 Policy Implementation Concept
  - 2.3.1 Promotion of Community Policy by the People as the Center
  - 2.3.2 Utilizing the Context of Sustainability Principles
  - 2.3.3 Financial System and Budget Management Process
- 2.4 Consideration of the Elderly Welfare System Policy under Sustainability Principles
- 2.4.1 Examination of the Context of the Northeastern Region in Terms of Elderly Welfare
  - 2.4.2 Related Research

#### 2.4.3 National Research

#### 2.4.4 International Research

#### 2.1 Current Situation of the Elderly in Thailand and Future Trends

Based on research studies including statistical data from institutions, organizations, and academics responsible for improving the quality of life of the elderly, the following can be summarized.

#### 2.1.1 Evolution of Welfare Policy

The concept of a welfare state, in its collective sense, denotes a state or nation that institutes an inclusive social welfare system for its populace. As articulated by Asa Briggs (1966, pp. 221-258), the welfare state embodies three overarching characteristics:

- 1) The state pledges to ensure a minimum income for all members of society, irrespective of their identities, occupations, or wealth.
- 2) Assurance of life security for individuals and households is guaranteed through the accumulation of sufficient savings to withstand various crises.
- 3) Equitable provision of social services to all citizens, maintaining optimal and uniform standards, regardless of class, status, or origin.

The post-World War II establishment of the welfare state in England, Sweden, Norway, Denmark, the Netherlands, and Germany was primarily driven by the social policies of the Labor Party, the Social Democrat Party, and the socialist ideologies in Europe. These politician entities, representing the majority of the industrial society comprised of wage earners and the middle class, advocate for progressive taxation policies. In this context, government collection of property and inheritance taxes was emphasized to generate substantial funds dedicated to social welfare. The overarching goals were to enhance the quality of life and foster wealth creation for the entire societal populace. It is essential to note that while these tax policies contributed to social welfare objectives, they also impacted the security of the elite and bourgeoisie.

The emergence of the welfare state was contingent upon political power residing with parties that championed the interests of the working and middle classes, rather

than those aligned with capitalist or nobility- affiliated ideologies. A notable example is Sweden, which initiated social welfare assistance for the economically disadvantaged as early as 1847. The advent of socialism, coupled with the establishment of the Social Democratic Party in 1889, precipitated a gradual shift in the social welfare system toward greater inclusivity. A pivotal moment occurred in 1930 when Sweden underwent a major reform of its social welfare system.

Debates over the years have centered on the nature of reforms that states should pursue. Two majors issues have been perennially debated: whether welfare policies should be universal, offering the same benefits to the poor and the rich alike, or if they should be targeted toward specific vulnerable groups; and where the state should derive funds for social welfare spending-whether from tax revenue or contributions from beneficiaries, as seen in the current Thai social security system.

In 1945, a public referendum survey in Sweden revealed a prevailing preference for universal social welfare. The turning point occurred in 1946, marking Sweden's official transition into a welfare state. Subsequently, all Swedish citizens began receiving social welfare benefits equally, without individual contributions, as the state relied on income generated from high-rate taxation. During this transformative period, the Swedish Social Democratic Party governed without interference from 1936 to 1976.

In the case of England, discussions on social welfare fervently debated, particularly leading up to World War II. The discourse involved considerations of implementing social welfare policies-debating whether they should be universal, whether contributions should be mandatory, or whether a model similar to Germany's, involving contributions, should be adopted. During World War II, questions arose regarding the appropriateness of employing social welfare approaches in such challenging times. Ultimately, after a prolonged debate, a consensus emerged that both state and the people should bear responsibility for the enactment of social welfare. This involved the state managing a unified minimum welfare rate, while individuals could participate in a competitive environment for rates above minimum. Those desiring more than the minimum were expected to take personal initiatives. It is notable that a hesitant conservative-led government eventually announced its decision not to pursue this approach, leading to a 47 percent dissatisfaction rate, as per a public poll. The turning point occurred in the 1945 election when the Labor Party secured victory and

subsequently enacted eight social welfare laws, establishing a comprehensive welfare system in England from birth to death.

The trajectory of the United States toward becoming a "welfare state" differs from that of European countries. In response to the economic downturn between 1929 and 1935, President Franklin D. Roosevelt implemented the "New Deal", a state-funded welfare program aimed at addressing economic challenges and unemployment. Despite this, welfare in the United States is not as widespread or common as in European welfare states.

In the context of Thailand, the concept of social welfare often faces dissent, with some asserting that welfare provision may foster dependency and reduce productivity, ultimately weakening the economy. Presently, Thailand falls short of being classified as a welfare state. The existing social security system exclusively covers employees, omitting education and medical benefits from various groups, particularly those comprising people with disabilities, minorities, and marginalized individuals. Political factors further complicate Thailand's path toward achieving a welfare state, as different leaders with varying perspectives and agendas regarding welfare policy assume the prime minister seat every four years.

Political preferences, often leaning toward capitalism and business interests, hinder the endorsement of tax laws aimed at collecting higher state revenue from the affluent. Failures such Asset Act, Inheritance Tax Act, and Progressive Tax Act designed for welfare policies underscore these challenges. Notably, the majority of tax collection in Thailand is from indirect taxes, predominantly paid by lower- and middle-class consumers through Value Added Tax (VAT), which alone proves insufficient to sustain universal social welfare as observed in European countries.

Statistics reveal that the majority of Thailand's population, approximately 15.4 million people, is engaged in the agricultural sector, while 20.8 million people work in non-agricultural roles, often as informal workers reliant on employer-provided welfare, labor protection rights, and social security benefits. The welfare system in rural communities tends to be the welfare of the minority, with many rural residents depending on income from family members working outside of agriculture. While the Employee Welfare Savings, a social security fund, holds around 340,000 million baht, covering about 8.8 million people, it is not synonymous with Thailand being a welfare

state. Numerous groups still lack income guarantees, social safety nets, and life security.

The extensive social security system, despite covering a significant portion of the population, does not fulfill the criteria of a welfare state, which necessitates universal coverage accessible to all members of the society. Furthermore, a welfare society, distinct from social welfare and welfare state, encompasses a broad range of welfare initiatives organized by various independent institutions based on their competence and suitability.

In the United States and England during the 1980-1990s, neoliberals criticized welfare state policies, contending that such policies hundred economic growth and failed to unlock the potential of individuals. Instead, they advocated for a shift in government spending towards initiatives that encourage economic productivity and foster self-reliance. Efforts were made to receive a more localized and communityoriented approach reminiscent of the 18th-19th centuries, with the aim of reducing the government's burden, promoting individual and community potential, and emphasizing self-management (Wann, 1998, pp. 154-165). A notable example of this approach was the establishment of credit unions as community saving institutions, using savings for pension and welfare benefits for members. The attempt was to create a welfare society rather than a full-fledged welfare state, largely due to the absence of a mass party akin to the Labor Party. The social democratic party has limited opportunities to govern, leading the U.S. welfare approach towards a society focused on providing only what is deemed necessary for those unable to help themselves. This form of welfare is often referred to as the social safety net, with privatization placing more responsibility on the private and community sector.

The distinction between a welfare state and welfare society, according to neoliberals, lies in the foundation and collaborating among diverse professional groups. The stronger the integration of civil society, encompassing groups such as workers, consumers, and professionals, the greater the bargaining power with the state, facilitating the creation of a collective welfare system. However, in Thai society, uniting people to create such bargaining power remains challenging, with weak civil movements and powerful capitalists, particularly in influencing political decision-

makers. The balance of power in Thai society concerning social welfare policies is still lacking.

Prime Minister Abhisit Vejjajiva expressed the vision of Thailand becoming a welfare society, but the specifics of how and what that entails remained unclear. A study by the Thailand Development Research Institute (TDRI) revealed conflicting opinions among different segments of society regarding social welfare issues. The roots of Thailand's current welfare foundation can be traced back to the implementation of three social welfare programs in 1993, including the Poverty Alleviation Project (distribution of 280,000 baht to each village for the purpose of micro finance without interest or at a low-rate interest), Senior Pension Welfare Program (provision of 200 baht per month to the elderly that earns less than poverty line, at three to five people per village), and Public Health Welfare Project (initiated by the government of Kukrit Pramoj in 1975, to help low-income people to get access to medical care). Despite the intended assistance to target groups, complications and challenges, such as loan mismanagement and effectiveness issues, have persisted. Notably, the Poverty Alleviation Project faced difficulties with loans not reaching those in need, resulting in ongoing disputes.

In 2001, the Thai Rak Thai government, led by Thaksin's administration, entered the political landscape with a determined effort to reshape the welfare landscape through various populist policies. Notable initiatives included the introduction of village funds, providing one million baht for every village across the country. While every citizen had the right to borrow money from the village fund, challenges persisted, with borrowers not necessarily being truly impoverished individuals. The government also implemented the 30-baht universal health care policy, addressing previous shortcomings in health welfare projects by transforming it into a universal model that covered all diseases.

The Elderly Pension Welfare Program, designed to assist the poor, abandoned, and neglected elderly, saw an expansion of eligibility from 400,000 to one million recipients during the Thai Rak Thai party's rule. Subsequently, the policy became universal after the party was politically overthrown in 2009, and the Democratic Party assumed office, extending pension rights to all seniors.

To summarize the evolution of welfare policy in Thailand, Torn Pitidol (2017) comparative study from 1932-2000 emphasizes the influence of the political climate,

noting the importance of transition to democracy in driving the development of the welfare system. The commitment of the previous administration played a crucial role in shaping the present welfare landscape. However, the sustainability of welfare policies may be subject to adjustments or discontinuation when political parties with differing views on welfare policy assume power. The implementation of public policies in Thailand often involves stipulated conditions for participation, leading to the exclusion of certain segments of the population. Efforts to reduce the poverty gap and achieve a more equitable distribution of incomes highlights the state's commitment to strengthening social welfare policies. Well-being is considered a legitimacy that the state should provide to its people, emphasizing the importance of living standards. Welfare provision decisions are made by the government, aligning with the societal situation, environment, and needs. Piyan Pannapap (2021) observed improvements in overall opportunities in Thailand, with increased enrollment rates in kindergarten and growing access to the health insurance system over the past decade. However, disparities in education and health quality across different regions of Thailand rain high, attributed to factors such as inefficiency of resource allocation and poverty hindering access to public health and quality education.

In conclusion, driving Thailand towards a welfare society requires collective responsibility. While social welfare requires individuals to be responsible for themselves, the state plays a crucial role in developing people's capacity and strengthening communities by expanding the community dimension to include various communities.

#### 2.1.2 Concept of Welfare Policy

The concept of welfare policy has been elucidated by scholars both domestically and abroad. Turner (1974) defines "social welfare" as an endeavor aimed at fostering a stable basic standard of living for individuals. It encompasses services to both individuals and communities, focusing on social development and empowering individuals to confront challenges related to physical and mental well-being, socioeconomic issues, and endeavors to eliminate people's state of self-sufficiency. Friedlander and Apte (1980) expand on the concept, characterizing "social welfare" as the regulation of policies, benefits, and services aligning with societal needs. They

emphasize its fundamental importance in facilitating rapid and lasting improvements from challenging situations to more favorable conditions. In contrast, Barket (1987) provides a broader interpretation, framing social welfare as a means to address social, economic, educational, and public health needs essential to societal existence, encompassing the overall well-being of individuals within a nation or community.

The Social Welfare Promotion Act of 2003 offers a legal definition, stating that social welfare constitutes a system of social services aimed at preventing problems of social development and enhancing social security to meet the people's necessities. The goals include achieving a high quality of life and fostering complete self-reliance. Social welfare, as per this definition, contributes to elevating equality in education, health, housing, work, income, recreation, and justice. The underlying principle is that all citizens possess the right to receive and participate in social welfare at all levels.

Pathumwadee Phochanekul (2009) provides an economic perspective on the term "social welfare" defining it as the well-being associated with the utility or satisfaction of individuals. In economics, welfare is conceptualized as the societal goal of well-being. Activities like market relief and the provision of allowance support and projects by the state are not welfare in themselves but rather tools or services that contribute to achieve well-being.

In conclusion, the ideas of welfare from both domestic and foreign scholars converge on the notion of a process that promotes social needs, assisting individuals in meeting social, economic, educational, and public health needs to enhance convenience and safety, ultimately contributing to an improved quality of life.

#### 2.1.2.1 Format of Social Welfare

In the realm of social welfare studies, the researcher presents information on the concept and principles of the social welfare model, drawing on the insight of Timus (as cited in Wantanee Wasikasin et al., 2010, pp. 3-5), who classified social welfare into three broad forms:

#### 1) Residual Model of Welfare

(1) This model is built on the belief that individuals in society primarily fulfill their needs through two significant sources, namely the market and the family.

- (2) People with social needs are expected to utilize their personal resources, such as income or savings, to access social services. If they are unable to afford these services, the family is the next recourse.
- (3) The residual model, state social welfare institutions intervene to assist "the rest" (residual), meaning those individuals who lack the means to purchase services in a free-market economy that minimize state intervention.
- (4) Assistance under this model is often limited to specific groups of individuals deemed in need, assessed through means testing evaluations.
- 2) "Industrial Achievement Performance" Model (Handmaiden Model)
- (1) This model perceives social welfare as a pivotal mechanism within the economy, serving as a tool to reward those contributing to the system's productivity.
- (2) Rewards, facilitated through taxes, fiscal measures, and career advancements are designed to meet the needs of productive individuals who significantly contribute to the economy.
- (3) High working capacity is seen as a driver of productivity that is deemed satisfactory for the overall economic well-being.
  - 3) The "Institute" (Institute Redistributive Model)
- (1) This model positions social welfare as a crucial social institution contributing to integration within society, playing an indispensable role in maintaining social stability.
- (2) In contrast to the free-market economy, which can perpetuate social and economic injustices, this model seeks to counteract such injustices and align social welfare with capitalist structures.
- (3) It is envisioned as a means to address the socioeconomic transformation process that may give rise to inequality and injustice.

In summary, Titmus's categorization offers three distinct forms of social welfare models, each with its own principles and objectives, ranging from targeted assistance to the broader integration of social welfare within the economic and institutional fabric of society.

#### 2.1.2.2 Elements of Social Welfare Arrangements

Rapeepan Khamhom (2011) categorizes the elements of social welfare management into two types: broad and narrow, encompassing various dimensions of individuals' lives. The broad scope covers seven keys areas:

- 1) Education
- 2) Health
- 3) Housing
- 4) Working and earning (Employment and income

maintenance)

- 5) Recreation
- 6) Justice (Social justice)
- 7) Social services/ Human services

The development of social welfare management involves the active participation of government social welfare organizations, public benefit organizations, community welfare organizations, and local government entities. These entities contribute to provide social welfare in accordance with established standards. Welfare, in this, represents immediate assistance to target groups experiencing distress, such as providing funds for shelter to enable people to resume a normal life.

The components of broad social welfare provision are categorized into four main services:

- 1) Protection: aimed at safeguarding the welfare rights of the target group in the short and long term, aligned with relevant laws such as the Prevention and Suppression of Human Trafficking Act B.E. 2551, and Child Protection Rights Act B.E. 2556
- 2) Prevention: focused on preventing social problems for the target group through measures like social surveillance. It involves providing knowledge to prevent various risks that may affect children, youth, women and disadvantaged individuals.
- 3) Correction: providing services to target groups that have experienced situations such as sexual harassment, domestic violence, loss of family, or lack of care among children, youth, and elderly.

4) Therapy: social services provided to target groups affected by health or mental health problems and catastrophic crises. This service aims at psychological rehabilitation to help the target group adjust and return to normal life in society.

On the other hand, narrow social welfare arrangements focus on systemically limiting overall welfare provision. The state chooses to operate with specific branches of social welfare provision, implementing projects to address people's needs in necessary situations. This approach is often influenced by the government's social policy, emphasizing the establishment of a social security system and investments in projects benefiting the majority of the population. The characteristics of narrow social welfare arrangements are often defined by laws such as the Social Security Act of 1935 in the United States (Wattananee Wasikasin et al., 2010, p. 3).

In summary, the elements of social welfare are intricately linked to the management process, aiming for stability and the exercise of rights through budget allocation aligned with diverse needs of the people. Active participation from various entities is crucial for effective operation of social welfare initiatives.

#### 2.1.2.3 Early Days of Elderly Pension

At the inception of the elderly pension program, the government's focus on assisting the elderly is evident, dating back to the establishment of country nursing homes in 1916 with the goal of providing support to seniors with family ties or a place to live. Over time, additional welfare institutions have been set up, and various services, such as the creation of elderly service centers, have been introduced to address the evolving needs of the aging population. To address the social situation comprehensively, concrete steps towards implementing an elderly pension were taken in 1992. This initiative, part of the Department of Public Welfare under Prime Minister Chuan Leekpai's leadership during two terms from 1992 to 1995, aimed to provide a form of social welfare specifically allocated for individuals aged 60 and above. The establishment of the elderly pension involved active participation from all sectors, with the Ministry of Social Development and Human Security taking a lead role as the responsible government organization. Local government organizations also played a significant part in providing welfare for the elderly. The government initiated a welfare

fund for the elderly in communities in 1993, providing a monthly subsidy of 200 baht to economically disadvantaged seniors. This marked the starting point for local organizations to contribute to social welfare for the elderly. In 2001-2002, the responsibility for this mission was transferred to the Department of Local Administration and Bangkok, further emphasizing the government commitment to supporting the elderly population.

The payment of pension for the elderly in Thailand has evolved over time, reflecting changes in policies and adjustments based on economic conditions. The subsistence allowance for the elderly is governed by regulations set by the Ministry of Interior, with eligibility criteria and payment rates determined by factors such as age and income.

Initially, the allowance for the elderly was set to 500 baht per month, and eligibility was based on factors such as domicile in the area of the local government organization and insufficient income for subsistence. After two cabinet resolutions in 2006, the allowance was increased to 500 baht per month, with flexibility to adjust the fiscal potential while ensuring the total amount does not exceed 1,000 baht per month. The goal was to provide sufficient support for the living situation of the elderly.

The involvement of communities, local government organizations, and the government is crucial for the success of the elderly welfare programs. The participation of these entities ensures that the needs and problems of the community are considered, and support is provided for problem-solving and service provision. The role of communities and local government organizations has become increasingly important due to their readiness in terms of resources and social capital to care for the elderly and enhance social welfare provision.

Under Prime Minister Yingluck Shinawatra's policy, adjustments were made to the subsistence payments for the elderly to reflect the rising cost of living. The allowance was tiered based on age, with different amounts allocated for individuals aged 60-69, 70-79, 80-89, and 90 years and above.

The responsible agencies for the payment of pension for the elderly include the Department of Local Administrative Promotion, Bangkok, and Pattaya City. Eligibility criteria include Thai nationality, 60 or older, birth before October 1, 1916,

and not receiving welfare or other benefits regularly from government agencies, state enterprises, or local government organizations.

The evolution of elderly welfare in Thailand has seen adjustments in response to economic conditions and policy changes. The conceptual framework for implementing these policies is shaped by both domestic and international academic theories, emphasizing the importance of community involvement, local government support, and responsive adjustment to meet the changing needs of the elderly population.

#### 2.1.3 The Situation of the Elderly in Thailand

The information provided highlights the significant demographic shifting occurring in Thailand, categorized by the country's transition into an aging society. This transformation is marked by a growing proportion of elderly population (aged 60 and over), coupled with a decline in the birth rate and the working-age population. The aging phenomenon is not unique to Thailand but is a global trend faced by many countries. In the case of Thailand, the proportion of elderly individuals is projected to increase from 18.1 percent in 2020 to 31.4 percent in 2040. This demographic shift has implications for various aspects of society, including the economy and social welfare. The foundation of the Thai Gerontology Research and Development Institute reports a significant change in the age structure of the Thai population over the past 50 years, evolving from a predominantly young population to an older one. In 1970, only 4.9 percent of the population was aged 60 and over, but by 2020, this figure had risen to 18.1 percent. The aging population is expected to increase rapidly in the coming years, with the number of elderly individuals aged 60 and over growing by approximately 3.5 percent per year. The group of elderly individuals in their late 80s is projected to increase even more significantly, at an average of 7.1 percent per year. The data presented also indicates that the aging trend is attributed not only to a decreasing birth rate but also to an increase in life expectancy. The number of births has been exceeding the number of deaths each year, but the margin has been narrowing. The working-age population (15-59 years) is expected to decline, creating a future scenario where the ratio of the working-age population to the elderly population will be halved from 3.6 to 1.8.

The implications of this demographic shift are multifaceted. Not only will there be an increased demand for healthcare and social services for the elderly, but there will also be economic challenges, such as a shrinking workforce and changing consumption patterns. Preparing for the aging society requires comprehensive strategies that go beyond addressing health issues and include considerations for workforce management, social support systems, and economic planning.

In conclusion, the impending status of Thailand as a completely aging society by 2022 highlights the urgency for comprehensive policies and strategies to address the diverse challenges associated with an aging population. The demographic shift will impact various aspects of the society, necessitating proactive planning and innovative solutions.

#### 2.1.3.1 Characteristics of Elderly Society

Based on the report from the United Nations, there are two demographic groups-children and the elderly-who do not generate income. When these two segments combined, their total surpasses the working-age population. This phenomenon is classified into two types:

- 1) An aging society is defined by the population aged 60 years and above living in a specific area, constituting 10 percent or more of the total population within that area. Alternatively, it is characterized by a population aged 65 and over residing in the area, forming seven percent or more of the total population within the same area.
- 2) An aged society is identified by a population aged 60 years and above living in a specific area, constituting 20 percent or more of the total population within the area. Alternatively, it is characterized by a population aged 65 and over residing in the area, forming 14 percent or more of the total population within the same area.

Therefore, it is crucial for Thai society to be aware and prepared for the imminent entry into an aging society by 2025, which is less than a decade away. Various statistics highlight the urgency for Thai people to address the following impending situations:

1) Increased Lifespan: the average lifespan of Thai people is expected to extend to 85 years by 2025, emphasizing the need for more substantial

financial preparations. In the last decade, inflation has been around 4 percent, leading to a significant rise in the cost of living, with predictions that basic expenditure, such as a dish of rice, could double.

- 2) Escalating Medical Expenses: medical costs are anticipated to rise by five to eight percent annually, particularly affecting the savings of the elderly. Elderly individuals tend to incur higher medical expenses per hospital visit, surpassing those of younger individuals by about ten thousand baht.
- 3) Changes in Population Structure: the modern trend of smaller families with only one child reduces the working-age population, potentially slowing down the country's development and economic growth.
- 4) Inadequate Retirement Savings: A major concern is that conventional retirement savings may no longer be sufficient. For instance, a person at 40 years old may need 240,000 baht annually after retirement. Factoring in inflation, this amount may increase to 530,000 baht over 20 years, necessitating a minimum of 10 million baht to sustain expenditures until the age of 80.
- 5) Rapid Growth in Elderly Population: Thailand is currently the third fastest growing country, globally, second to Singapore in ASEAN. In less than 15 years, Thailand is projected to surpass Singapore in terms of its aging population.
- 6) Prevalence of Elderly Diseases: notably, statistics from the National Statistical Office in 2011 reveal alarming rates of diseases among elderly, with one Thai person succumbing to cancer every four minutes, heart disease every six minutes, stroke every six minutes, and a 30 percent chance of developing Alzheimer's for those over 90 years, with women having twice the likelihood compared to men.

#### 2.1.3.2 How to Deal with Elderly Society?

In preparation for retirement and the challenges posed by an aging society, it is essential to plan for medical expenses and other financial needs. Here are five suggested ways to solidify the quality of elders after retirement and adapt policies for the impending aging society:

1) Accelerate the Value of Money to Beat Inflation: In the light of the decreasing value of money due to inflation, investment should be made to outpace inflation. Retirement-oriented investment options such RMF, LTF, or pension

insurance, which may offer tax benefits can be explored. Tax refunds gained from these investments can further contribute to wealth accumulation.

- 2) Retirement Age Extension: Many countries are adopting policies to extend the retirement age, aiming to increase the number of working-age individuals and mitigate economic impacts. Examples include Singapore increasing the retirement age from 65 to 67, South Korea moving from 55 to 60, and Japan allowing seniors to work until 65 by 2025. Thailand is currently in the process of proposing similar measures to the cabinet.
- 3) Encouraging Elderly Employment in the Private Sector: To promote elderly employment, the government is establishing service centers for elderly recruitment. Companies hiring individuals aged 60 and over, with incomes below 15,000 baht, receive corporate income tax exemption. However, the impact was limited, with only 2.9 percent of all elderly people benefiting. Efforts should be made to leverage the skills and experiences of the elderly for maximum benefit.
- 4) Upskilling and Matching Skills with Elder Workers: Enhancing the capabilities and efficiency of elderly workers through upskilling is vital. Collaboration between public and private sectors is crucial for formal and informal education and training throughout their lifespan. Thailand has initiated programs to train elderly workers for diverse career opportunities, ensuring social protection for their self-reliance.
- 5) Early Planning: The government plays a pivotal role in creating an elderly-friendly infrastructure system. Balanced income and expenditure allocation, especially post-retirement income through the establishment of a provident fund, is crucial for. Addressing the challenges of an aging society.

The present economy and society for elderly in Thailand are marked by significant challenges, primarily centered around insufficient funds for retirement. This financial strain poses a major hurdle for Thai senior citizens, and as Thailand transitions into an aging society, the impact on the economy is becoming more evident.

#### **Economic Challenges:**

1) Reduced Purchasing Power: Frugal spending by elderly families, estimated to be around 30 percent less, will inevitably reduce future

purchasing power in the country. This decrease in domestic consumption is likely to lead to lower investment and a potential decline in foreign direct investment (FDIs).

- 2) FDI trends: Thailand, once a prominent destination for FDIs, has seen a decline, attracting only six percent in 2022. This shift in investment to other ASEAN countries like Vietnam, Indonesia, and Singapore reflects changing trends, indicating the need for Thailand to address economic threats posed by an aging society.
- 3) Outflow of Thai Capitals: There is a noticeable trend of Thai capitals flowing out to other destinations. This outflow may be attributed to concerns about the economic impact of an aging population.

#### **Production Impact:**

- 1) Labor Shortage and technology Adoption: the changing population structure with fewer newborns and more elderly citizens leads to a decreasing working labor force. To cope with this, businesses resort to adopting more technology and machine tools to replace human labor.
- 2) Impact on Productivity and National Income: A higher proportion of the elderly in the population contributes to a decrease in gross national product and average income per person, potentially affecting overall production quality.
- 3) Financial Implications: The government faces reduced tax revenue due to decreased consumption and personal income. Simultaneously, there is an increased expenditure on health, medical, and social services for the elderly.

#### Social Impact:

- 1) Family Dynamics and Elderly Abandonment: With increased responsibilities on the working-age population, there is a potential strain on household interactions. This could result in more cases of elderly individuals being abandoned or left behind by their families.
- 2) Psychological Challenges: The elderly face psychological threats, including depression and loneliness, due to lack of work and daily life activities. Attention to mental health becomes crucial.
- 3) Physical Health Problems: Without proper financial planning, physical health problems become challenging for the elderly, making it difficult for them to sustain their lives.

In conclusion, addressing the challenges of an aging society in Thailand requires collaborative efforts from both the public and private sectors at individual, community, and national level. Emphasis should be placed on encouraging individuals to recognize the importance of planning for an aging society, fostering community collaboration, disseminating health knowledge, and providing social and psychological support for the elderly. Analyzing the current situation helps identify areas that require amendments or additions to enhance the welfare of the elderly.

#### 2.2 Concept of the Elderly

#### 2.2.1 Definition of Elderly

Thailand is undergoing a significant demographic shift, transitioning into a fully- aged society. The United Nations World Population Aging data indicates that after 2009, the population at the dependent age (children and the elderly) surpassed the population at working age, driven by declining fertility rates and increased life expectancy. In 2017, for the first time in history, the population of children was smaller than that of the elderly.

In 2017, Thailand's population was 64.6 million, with 9.6 million being elderly. Projections estimate that by 2030, there will be 17.6 million elderly (26.3 percent) and 20.5 million (32.1 percent) by 2050. Both government and private initiatives are collaboratively working to project, promote, and support the elderly's status, roles, and activities.

The aging society is characterized by a population aged 60 and over, constituting 10 percent or more of the total population, while an aged society involves a proportion of 20 percent or more. The United Nations categorizes societies stepping into an aging society, aged society, and super aged society based on the percentage of the elderly population. The aging phenomenon is a global trend, with various countries entering different stages of aging. The UN emphasizes the need for societal preparation to harness the opportunities presented by demographic changes. The impact of an aging society on production includes a shrinking labor force, increased use of technology to compensate for labor shortages, and economic challenges such as decreased national

income and tax revenue coupled with rising expenses for health and social services for the elderly.

The term "elderly" typically refers to individuals aged 60 and over, representing the last stage of life. The age 60 is widely accepted as the benchmark for defining the elderly, aligning with international standards. Scholars like Sophaphan Ratnai (2012, p. 8) or Jintana Rod-ararom (2011, p. 17) categorize the elderly into different groups based on age ranges, and the aging process involves physical, mental, and social changes. The assistance of families, children, and government agencies is crucial to improve the quality of life for the elderly who face various challenges in health, psychology, and economics during their retirement year.

## 2.2.2 Theory of the Elderly

The theory of aging encompasses various perspectives to understand the multidimensional aspects of the aging process. The study of aging involves three main groups of theories: biological, psychological, and sociological.

- 1) Biological Theory
- (1) Genetic theory: Focus on the genetic code determining life expectancy.
- (2) Organ Theory: Discusses wear and tear theory, neuroendocrine theory, and immunological theory, explaining aging at the organ level.
- (3) Physiological Theory: Involves stress and adaptation theory, waste product accumulation theory, free radical theory, and cross-link theory. These theories explain how physiological processes contribute to aging.
  - 2) Psychological Theory
- (1) Personality Theory: Emphasizes that the elderly's happiness depends on their personality development throughout life.
- (2) Erikson's Epigenetic Theory: Divides human development into eight stages, highlighting different challenges and conflicts at each stage.
- (3) Robert Peck's Theory: Divides the elderly into early and late sages, focusing on ego differentiation, body transcendence, and ego transcendence.
  - 3) Social Theory

- (1) Activity theory: Suggests that engaging in activities positively correlates with life satisfaction for the elderly.
- (2) Disengagement Theory: Proposes that the elderly and society gradually disengage as the individual's health deteriorates. It emphasizes a natural process of withdrawal.
- (3) Continuity Theory: Developed as a response to the contradictions in activity and disengagement theories, it emphasizes that successful aging depends on the individual's personality and past life patterns.
- (4) Role Theory: Describes how individuals adapt to new roles and conditions in old age.

These theories collectively provide a comprehensive understanding of aging, incorporating biological, psychological, and sociological dimensions. Each theory offers insights into different aspects of the aging process, emphasizing the importance of considering multiple factors when studying and addressing the challenges and changes associated with aging.

## 2.2.3 The Needs of the Elderly

The needs of all human beings at different ages share many characteristics. This begins with the needs that satisfy the human body's basic needs: food, shelter, medicine, and clothing. The same is true for the elderly population. In addition to the need for such matters, there is still a need to respond to various problems according to the roles and situations in daily life.

The psychologist Maslow has identified human needs "from the ground up." The minimum commences with fundamental physical needs like food, shelter, clothing, and medicine. Higher up the pyramid progresses to safety needs, involving protection from potential threats. The highest demands are love and belonging, which includes relationships and social integration.

From the concept of needs, the elderly are people with physical needs. The emotional, social, and mental aspects are equally crucial, with variations influenced by an individual's environment, achievements, or success. Consequently, the concept of orchestrating activities for the elderly revolves around curating diverse engagements that fully cater to their distinct needs across different domains. In essence, aligning

activities with the specific needs of the elderly not only motivates their participation but also ensures a sense of fulfillment and satisfaction as active participants in these endeavors. Regular care for declining physical conditions, including recommended aerobic exercises even for elderly with congenital diseases but with guidance from healthcare professionals. Psychological issues need serious acknowledgement. Some elderly individuals may face challenges adapting, leading to stress, with manifestations varying based on personal factors. With big transitions during retirement, elderly still seek continued respect and esteem within society. The aspiration to participate in family decisions and minimize reliance on others especially when it comes to finance.

In conclusion, the comprehensive care of the elderly, physical, mental, and social well-being. These collective needs are the responsibility of everyone to participate, family, community, and society to provide holistic support and care for the aging population.

## 2.2.4 Determination and Planning of Public Welfare for the Elderly

The strategic planning of the Department of Elderly Affairs underscores the involvement of executives, elderly experts, and administrative staff across regions. Their tasks involve implementing development plans, analyzing both social and environmental contexts within and outside the organization, considering domestic and international dimensions, and addressing stakeholders. This comprehensive analysis aims to evaluate potential impacts on the organization, facilitating a collective understanding of how the organization will be affected in order to determine the strategic position and alternatives. In this regard, the researcher presented information into the planning process aligned with the elderly plan. The discussion delved into the intricacies of planning, particularly in shaping strategies for broader public administration.

The National Elderly Plan Volume 2 (2002-2021), revised No.1, 2009, is a key national strategic plan geared towards preparing the elderly population for a high-quality aging experience. It encompasses strategies promoting elderly development and social protection systems, disseminating knowledge, and evaluating results. The plan is structured around five strategies, each with specific measures:

1) Population preparation strategy for quality aging

- (1) Income collateral measures for elderly
- (2) Measures for education and lifelong learning
- (3) Measures to raise awareness of the value and dignity of the elderly.
  - 2) Promotion of the elderly strategy
    - (1) Measures for health promotion prevention, and self-care
- (2) Measures to promote coexistence and strengthen elderly organizations
  - (3) Measures to promote working and earning income for the elderly
  - (4) Measures to support the elderly with potential
  - (5) Measures to promote media programs for the elderly
  - (6) Measures for suitable and safe housing and environment.
  - 3) Social protection system strategy for the elderly
    - (1) Income protection measures
    - (2) Quality assurance measures
    - (3) Family, caregiver, and protection measures
    - (4) Measures for service system and support networks
- 4) Management strategy for national elderly work development and personnel development
- (1) Management measures for national-level elderly work development
- (2) Measures to promote and support the development of elderly personnel
- 5) Strategies for compiling and developing knowledge on the elderly and monitoring the national elderly plan
- (1) Measures to support research agencies for knowledge development
  - (2) Measures to support research studies on the elderly
- (3) Measures for continuous monitoring and evaluation of the national elderly plan
- (4) Measures for the development of systematic and modern information systems on the elderly.

Furthermore, local administrative organizations, guided by specific laws, have duties and powers concerning public services for the elderly. These duties range from mandatory tasks to those that are optional but regulated by applicable laws. The researcher emphasizes that various organizations and agencies collaborate to provide comprehensive protection, portion, and support for the elderly, acknowledging their right to these services. The study also explores international welfare management concepts for the elderly described as follow:

## 2.2.5 Concepts of Welfare for the Elderly Abroad

The global rise in the elderly population has sparked concerns, particularly in nations labeled as "aging societies" including Japan, Singapore, South Korea, Australia, Canada, United States, and Italy. These countries have proactively implemented measures to address the challenges posed by this demographic shift, providing valuable insights for Thailand to consider in fortifying its support systems (Nareerat Chitmontri & Sawitree Tayasilps, 2008, pp. 10-17)

# 1) Japan

Japan, boasting the highest percentage of elderly citizens globally, initiated comprehensive welfare policies in 1986. These policies cover employment insurance, income, health and social welfare, learning, community participation, housing, and environmental systems. With a focus on long-term care, particularly at home, Japan has implemented various plans, such as the Gold Plan in 1989 and the Public Long-term Care Insurance law in 2000, emphasizing the expansion of caregiving facilities and quality improvement. Notably, the Ministry of Health and Social Welfare merged with the Ministry of Labor in 2001 to streamline efforts, establishing the Health and Welfare for the Elderly agency.

## 2) Singapore

Singapore has evolved its aging policies through collaborative efforts, particularly with Volunteer Welfare Organizations (VWOs) at policy making and implementation level. The goal is the reduce government role in caring for the elderly but encouraging the role of people and community instead. The threefold framework of "Heart ware", "Soft ware", and "Hard ware" underscores societal attitude adjustments, potential-building activities, and infrastructure development, respectively. The

financial system in Singapore revolves around individual responsibility, with a National Saving Fund (Central Provident Fund) facilitating post-retirement income through savings, pensions, and health forced accounts. The health and social welfare system in Singapore integrates institutional and non-institutional services, emphasizing service quality, accessibility, and community support projects.

### 3) United States

The US social welfare system encompasses health insurance and social security, with federal and state level systems providing benefits for working retirees. The Medicare system, funded by income taxes, caters to health related needs, while community-based care services include Multipurpose Senior Centers, Adult Day Care Services, Respite Care, and more. Family dynamics are American values, where many elderly individuals do not live with their children, contributing to the demand for formal caregiver service.

## 4) England

In England, the welfare system aims to enable the elderly to work based on their abilities and opportunities, promoting financial security after retirement. The three-tiered income security system includes retirement pensions from insurance premiums, benefits for specific events, and income-related support benefits for low-income earners. The health service system emphasizes individual-centered care, promoting health, self-reliance, and community living through various services, including Home Care Services and Family Placement schemes.

In conclusion, while the specific measures vary, the overarching goals of global welfare systems for elderly remain consistent: enhancing quality of life, well-being, and health. The focus includes financial preparation for old age and the development of accessible and comprehensive health service tailored to the needs of the elderly.

Summary of Variable Synthesis Tables

The synthesis of concept variables pertaining to the present state and prospective trends concerning Thai elderly individuals comprises several key components. Primarily, the study delves into the evaluation of welfare policies tailored to the elderly demographic. Additionally, it scrutinizes the prevailing conditions experienced by the elderly populace within the country. Furthermore, the study encompasses an examination of the conceptual framework surrounding elderly

individuals. Academic perspectives congruent with the research underpin this comprehensive investigation. The summarized findings are delineated in Table 2.1 below:

Table 2.1 Variable Synthesis (Overview)

| Situation of the Elderly in Thailand at Present and Future Trends |                       |                            |                             | public<br>Iderly  |  |  |
|---|-----------------------|----------------------------|-----------------------------|---|--|--|
| Researcher  | 1. Welfare management | 2. Changing in the elderly | 3. The needs of the elderly | 4.Determination and pub planning of welfare for the elderly |  |  |
| 1. Asa Briggs (1961, pp.221-258)                                  | 1                     |                            |                             |   |  |  |
| 2. Gordon & Spicker (1999, pp.145-146)                            | 1                     |                            |                             |   |  |  |
| 3. Mai Wann (1998, pp.154-165)                                    |                       |                            |                             |   |  |  |
| 4. Turner (1974, p.14)  | 1                     |                            |                             |   |  |  |
| 5. Wantanee Wasikasin et al. (2010, pp. 3-5)                      |                       |                            |                             |   |  |  |
| 6. Titmuss, Rapeepan Khamhom (2011, pp.15-20)                     | $\sqrt{}$             |                            |                             |   |  |  |
| 7. Gordon & Spicker (1999, pp.145-146)                            |                       | V                          |                             |   |  |  |
| 8. Sompol Nawaka (2012, p.8)                                      |                       | $\sqrt{}$                  |                             |   |  |  |
| 9. Gubrium (1973, as cited in Esberger and Hughes,                |                       |                            | 1                           |   |  |  |
| 1989, p.28)   |                       |                            |                             |   |  |  |
| 10. Somsak Srisantisuk (2013)                                     |                       |                            |                             | $\sqrt{}$   |  |  |
| 11. Department of Local Administration (2009)                     |                       | $\checkmark$               | $\sqrt{}$                   | $\sqrt{}$   |  |  |
| 12. Nareerat Chitmontri and Sawitree Thayansilp                   |                       |                            |                             | $\checkmark$  |  |  |
| (2008, pp.10-17)  |                       |                            |                             |   |  |  |
| Frequency   | 6                     | 5                          | 3                           | 3   |  |  |
|   |                       |                            |                             |   |  |  |

Table 2.1 reveals findings pertinent to the current state and future projections concerning Thailand's elderly population, emphasizing the significance of understanding their circumstances. This significance is delineated through four key aspects, which serve as the variables under scrutiny in this study:

- 1) Management of welfare provisions
- 2) Dynamics of aging
- 3) Specific needs of the elderly
- 4) Formulation and enactment of public welfare policies catering to the elderly

These four components represent criteria processes that demand attention from relevant agencies and the public sector alike. Given the escalating trend of an aging society, ensuring adequate welfare support to uphold the fundamental quality of life becomes imperative for the nation's developmental trajectory. Consequently, Thailand's transition toward a fully developed nation necessitates meticulous attention to the elderly population's requirements, alongside the formulation of robust policy frameworks capable of addressing their needs across diverse circumstances. These variables not only serve as focal points for the present study but also present avenues for further investigation, such as evaluating policy implementation through practical application.

### 2.2.6 Concept of Policy Implementation

Determining the welfare system and political consensus within the parliament framework (Multi-Attribute Consensus Reaching: MACR) involves establishing policy guidelines for the welfare of Thailand's elderly population. Policies concerning elderly care, as documented by Sasipat Yodpetch and referenced in Thitirat Disyothin (2007), include:

1) Health and sanitation policy aims to promote and support comprehensive health services, addressing both physical and mental wellbeing. The entails initiatives for health promotion, prevention, early diagnosis, treatment, and rehabilitation. Such endeavors form an integral part of the ongoing efforts within the integrated healthcare system, facilitating the dissemination of knowledge across urban and rural areas.

- 2) Education policy endeavors to facilitate lifelong learning management, with a particular focus on non-formal education tailored to the needs of the elderly. This includes formal and informal educational opportunities designed to equip individuals with the skills necessary to navigate life's transitions effectively.
- 3) Income and work security policies seek to establish social measures ensuring the financial stability of the elderly. This includes guaranteeing a minimum income for subsistence, supporting flexible employment arrangements that align with individual capabilities, and promoting avenues for the elderly to contribute economically while ensuring fair compensation. Moreover, these policies encourage the elderly to utilize their skills and expertise for personal, familial, and societal benefit, emphasizing the transfer of knowledge and experience.
- 4) Social and cultural policies are aimed at fostering an environment conducive to the wellbeing of the elderly, particularly those with familial responsibilities. This includes promoting the extended family structure to facilitate intergenerational care and support. Additionally, these policies emphasize the value of respecting and cherishing the wisdom and contributions of the elderly, advocating for the transfer of knowledge and cultural traditions that enrich society.
- 5) Social welfare policies advocate for the utilization of the Social Security Act to safeguard the welfare of the elderly across various domains. This entails expanding social through the establishment of dedicated service centers and welfare units, ensuring comprehensive support and assistance for elderly individuals.

### Health and Sanitation Initiatives

Universal health coverage in Thailand is regarded as a fundamental entitlement provided by the state to ensure equitable access to healthcare services. Administered by the National Health Security Office (NHSO) since 2006, this initiative aims to furnish health insurance tailored to the needs of individuals across different regions. Collaborative efforts involving multiple governmental bodies, including the Ministry of Health, Ministry of Social Development and Human Security, Ministry of Interior, Provincial Administrative Organizations, and Municipal League of Thailand, have been instrumental in efficiently managing and implementing this health insurance system. Notably, NSHO allocates resources to the "Sub-district Fund" supporting community-

led projects focused on healthcare reinforcement and disease prevention for elderly groups.

The Elderly Act of 2003 and the 2<sup>nd</sup> National Elderly Plan (2002-2021) prompted the Ministry of Public Health to establish dedicated channels for the elderly healthcare services. However, challenges persist in actual practice, particularly concerning the provision of expedited services for elderly patients amidst high demand within hospital settings.

Sub-district hospitals represent community-driven healthcare initiatives, stemming from active participation at the local level in managing in the sub-district health insurance system. This approach, termed "partnership care," involves collaboration among three primary stakeholders: community members, healthcare facilities, and local government entities, adhering to the guidelines stipulated in the National Health Insurance Act B.E. 2545. The act mandates the National Health Security Office (NHSO) to provide support to non-profit organizations tasked with the managing local funds.

Illustratively, projects such as the "Two-Baht Hospital" in Bung Khla Sub-district, Lomsak District, Petchabun Province, operate on a contribution basis of two baht per person per month, amounting to 24 baht annually. These initiatives receive support from healthcare facilities in terms of personnel and budget allocations. Additionally, the Sub-district Administrative Organization (SAO) can augment the budgets of government-affiliated community hospitals in alignment with regulations. Funding activities through the community health fund channel encompass a range of health services, including health promotion, disease prevention and control, as well as treatment and referrals.

Furthermore, this model bolsters the capacity of health centers to assume a more prominent role within the community by offering scholarships to local children pursuing nursing studies, with the expectation of their subsequent return to work at the sub-disrtict hospital. Sustained and robust management of these funds holds the potential to evolve into a pivotal avenue for supporting elderly welfare in the future, as posited by Nareerat Chitmontri and Sawitree Thayanslip in 2008.

Home care services constitute an integral aspect of elderly welfare, catering to their specific health needs within the familial environment. By offering specialized medical assistance and fostering empowerment through knowledge sharing, home care initiatives contribute to the overall well-being and satisfaction of elderly individuals and their families.

Housing provisions encompass a range of supportive services within comprehensive care homes for the elderly. These facilities, including 21 state welfare establishments serving approximately 3,000 individuals, offer diverse amenities such as medical care, physical therapy, religious services, recreational activities, and cultural engagement opportunities.

Employment related welfare initiatives include the Elderly Welfare funf administered by the Community Organization Development Institute (POSC). This project, supported by a budget of 80 million baht, aims to enhance the welfare system for the elderly across 76 provinces by empowering elderly individuals to lead and participate in decision-making processes concerning their welfare. Collaborative efforts between the NSHO and local development mechanisms, as demonstrated in projects like the "Palm Plantation Project" in Krabi province, strive to address the financial challenges faced by rural elderly populations, promoting community engagement and economic empowerment.

Social and recreational services for the elderly encompass various models, including Elderly Clubs and Multipurpose Centers for the Elderly. These initiatives foster socialization, physical and mental well-being, and community engagement through organized activities and support services. The establishment of Multipurpose Centers emphasize community-based care approaches, continuity of care, and holistic services to enhance the quality of life for elderly individuals.

In conclusion, the determination of welfare policies for the elderly necessitates coordinated efforts among governmental agencies and support organizations, guided by cooperative action plans and established criteria to effectively implement policy directives.

### Political system

Foreign scholars like Tobias Gombert have emphasized how different sets of political ideas, or "core values," influence the political, economic, and social landscapes of each country. These core values shape societies' ideal goals and guide policy directions across various domains, including the economy, education, and the public

health. Each government or political party reflects the normative values it deems desirable, leading to distinct ideal goals. This observation resonates with enduring questions in political philosophy regarding the definition of the good life and good politics.

Various political philosophers, such as Aristotle, Thomas Hobbes, and Karl Marx, offer differing perspectives on the good life and the ideal state. For instance, Aristotle advocates for a political system where every citizen can participate in governance, while Hobbes prioritize stability and security within the state. In contrast, Marx critiques liberal liberties and argues for the freedom through the elimination of exploitation and class inequalities.

The concept of the "welfare state" embodies principles of fairness in resource allocation and wealth distribution, often referred to as (re)distributive justice. These principles include equality, performance-based justice, needs-based justice, and equal opportunity social policy. Social democratic welfare states, exemplified by countries Sweden, prioritize access to pensions for all seniors and performance-based benefits. By integrating different preventive models, they aim to proactively address social challenges.

Critics of the preventive welfare state raise concerns about high costs and advocate for diversified funding sources, such as capital-side taxes, to support social policies. However, such taxation may raise questions of fairness and equality among wealthier individuals who may not directly benefit from welfare provisions. Nonetheless, the principle of reciprocity underscores the responsibility of those with greater assets or incomes to contribute more to societal welfare.

The ideal goals of the welfare state transcend national borders, highlighting the need for international cooperation to address global challenges. Social security systems play a crucial role in providing individuals with stability, dignity, and self-reliance, offering tangible and intangible benefits such as housing, financial assistance, education, and healthcare.

In summary, the researcher's analysis underscores the complex interplay between political ideologies, welfare policies, and societal values in shaping the pursuit of the good life and good governance.

## 2.2.7 Welfare State and Democratic Society

The researcher delves into the relationship between the welfare state and democratic society, drawing from the example of the Federal Republic of Germany as a democratic and social federation outlined in Article 20 of its Basic Law. While the German constitution explicitly addresses principles of democracy and the rule of law, the principle of the welfare state is not explicitly stated. However justice emerges as a critical criterion in shaping the welfare state.

Democracy, characterized by equal rights to freedom and political participation for all citizens, is integral to the welfare state. The philosopher Aristotle's views on citizenship and equality are still relevant today, although his beliefs about certain individuals being inherently suited for servitude or about the inferior status of women have been challenged. Achieving equal political rights, exemplified by the suffrage movement, remains an ongoing process.

Equality, respect, and self-determination are fundamental prerequisites for democracy. Access to basic resources like food, shelter, education, and vocational training is essential for upholding these principles. The welfare state plays a crucial role in providing these resources and creating conditions conducive to freedom and democracy.

The relationship between democracy and social protection has been recognized historically, with organizations like German Workers' Association asserting that political freedom is inseparable from social liberation. The Social Democratic Party of Germany emphasizes the importance of the welfare state in safeguarding citizens from the market hardships and promoting individual autonomy.

Intervening in income distribution through taxation and contributions is necessary to ensure freedom, security, and property for all citizens. This does not infringe upon ownership but rather ensures the protection of essential freedoms and rights.

In conclusion, understanding the interplay between the political system, the welfare state, and governance is crucial for fostering democracy and promoting social welfare. This understanding informs policy implementation, such as the development of elderly welfare systems, under sustainability principles.

## 2.2.8 Exploring New Innovations to Support Elderly Welfare Policies

This requires a comprehensive understanding of innovation within public organizations and its potential impact on societal development. Innovation is crucial for advancing economic and social development, enabling organization to compete globally and ensure stability. In the context of government agencies, innovation is essential for addressing existing challenges and improving the quality of services provided to society. In public administration, innovation involves the creation, development, and application of knowledge and practices to enhance efficiency, effectiveness, and the quality in government operations and services. This approach leads to the creation of shared economic and social values or benefits. Public sector innovation encompasses various aspects, including the development of new policies, services, processes, or products.

The Office of Civil Service Commission in Thailand defines public sector innovation within framework of government roles and functions. It identifies six forms of innovation:

- 1) Service Innovation: Improving or creating new services to meet the needs of the public.
- 2) Service Delivery Innovation: Providing services in new or different ways, often leveraging technology
- 3) Administrative or Organizational Innovation: Creating new processes within government organization to enhance efficiency.
- 4) Conceptual Innovation: Seeking new approaches to problem-solving and challenging existing assumptions.
- 5) Policy Innovation: Designing or applying new policy tools to bring about changes in situations or behaviors.
- 6) System Innovation: Developing and modifying existing systems to improve coordination and interaction among stakeholders.

In the context of the Thai government, innovation aligns with Thailand 4.0 policy and the Governmental 4.0 system. Collaboration among government organizations, civil servants, private sector organizations, and the general public is crucial for effective innovation. This collaborative approach ensures that innovative

solutions address the needs and expectations of society, particularly in areas such as elderly welfare policies.

### 2.2.8.1 Government Innovation

In today's rapidly evolving global landscape, characterized by technological advancements and shifting economic and political dynamics, governments are facing unprecedented challenges that demand innovative solutions. These transformations have disrupted traditional norms and created a future that is difficult to predict, leading to increased economic inequality and persistent struggles for gender equality. Additionally, rising conflicts and dwindling confidence in governmental institutions underscore the need for new policy approaches and services to effectively mange these complex challenges.

In response, governments worldwide have recognized the importance of fostering innovation to address the multifaceted issues of the modern world. By increasing opportunities and creating innovative solutions, governments aim to build a better future for their citizens. These new approaches must instill confidence among the populace, ensuring that everyone has the opportunity to improve their well-being in a constantly evolving digital economy driven by new creations and advancements.

Government innovation involves exploring new directions that positively impact people's daily lives while encouraging citizen participation in shaping a collective government future. This necessitates overcoming outdated structures and thought patterns, embracing technology, processes, and the new ideas to ensure sustainability. Furthermore, innovation must prioritize public trust and security as fundamental beliefs to faster an environmental conducive to progress.

A key aspects of government innovation is its focus on inclusiveness and addressing the needs of vulnerable populations. Identify emerges as a fundamental requirement for individuals and businesses to access services, participate in society and the economy, and unlock the potential of innovative services. Governments and stakeholders are thus spearheading initiatives to foster the emergence of identities through technological advancements, enabling citizens to integrate knowledge, skills, and experiences in globally interconnected world.

Moreover, government innovation seeks to transform the paradigm of public service delivery by overcoming the constraints of traditional bureaucratic processes. By embracing innovative approaches, governments aim to redefine their operations as interconnected systems, reshaping structures and methodologies to drive transformative changes. However, it's crucial to consider the impact on all stakeholders, both within and outside the government, to achieve successful outcome.

Governments face various challenges in providing inclusive support to vulnerable populations, such as the elderly, amidst relocation crisis and uncertainties due to automation. To address these challenges, governments are turning to innovation, aiming for sustainable development and seeking equitable solutions. Embracing innovation enables governments to create a society that meets the needs of all individuals, mitigating the effects of transitions and economic disparities through a comprehensive approach and safety nets.

In conclusion, government innovation is evolving into a regular practice driven by a shred understanding within governmental entities. Despite the challenges of navigating differing perspectives and ensuring effective implementation, embracing innovative methodologies is crucial for transformative change and building a more inclusive and sustainable society.

### 2.2.8.2 Definition of Public Policy

The term "public policy" encompasses a broad range of meanings and interpretations reflecting its complexity and significance in governance. Derived from the Greek root "ps.Polis," which means city or state, "policy" refers to the principles and practices that guide the actions of a country or community. It serves as a framework and set of guidelines for decision-making and action within governmental or organizational contexts.

Public policy can be understood through various lenses, each emphasizing different aspects and objectives. Scholars and researchers have provided several definitions and perspectives on public policy, reflecting the diverse interests and goals associated with it:

1) Government Activity: Public policy can be seen as the activities undertaken by governments, encompassing decisions to act or not to act in pursuit of societal goals. This definition emphasize the role of government in addressing socially relevant problems and providing remedial services to citizens.

- 2) Decision-Making Process: Another perspective views public policy as the decision-making process aimed at defining broad guidelines to guide various tasks and achieve started objectives. It involves setting goals, values, and practices for government projects, ensuring consistency with societal values and guidelines for goal achievement.
- 3) Guideline for Government Activities: Public policy serves as a guideline for a government activities, encompassing past, present, and anticipated future actions. It directs governmental endevors and shapes the direction of governance, reflecting the commitment of governments to meet the needs of the populace.
- 4) Commitment and Announcement: Public policy can also be understood as a commitment announced by political parties during election campaigns. It reflects promises made to the electorate regarding actions that will benefit the populace once in power. This definition underscores the importance of addressing societal problems and fulfilling governmental obligations to the people.
- 5) Problem-Solving and Innovation: Lastly, public policy involves problem-solving and innovation, aiming to address existing challenges, promote development, and foster innovation. It requires governments to adopt proactive approaches and innovative solutions to meet the evolving needs of society.

In conclusion, public policy encompasses a broad array of meanings, ranging from governmental activities and decision-making processes to guidelines for action and commitments to societal well-being. It reflects the dynamic nature of governance and the imperative to address societal challenges while meeting the needs of the populace.

### 2.2.8.3 Public Policy Process

The public policy process involves a series of steps and procedures aimed at addressing societal issues, formulating policies, making decisions, implementing them, and evaluating their effectiveness. Scholars and researchers have proposed various conceptual frameworks and models to understand and analyze this process. Here's summary of the public policy process based on different perspectives:

1) Problem Formation: The process begins with identifying policy issues or problems that require government intervention. This may involve recognizing societal needs or challenges that demand attention from policymakers.

- 2) Agenda Setting: Once problems are identified, they enter the agenda-setting stage, where they gain attention from media, interest groups, and government officials. Agenda setting determines which issues will be prioritized for policymaking and decision-making.
- 3) Policy Formulation: During this stage, policymakers develop potential solution or policy alternatives to address the identified problems. Policy formulation involves defining the goals of the policy, considering various options, and assessing their feasibility and potential impacts.
- 4) Legitimation: Policies that emerge from the formulation stage require legitimacy to become official actions. This legitimacy is obtained through political processes, such as approval by political parties, interest groups, the president, or the parliament.
- 5) Implementation: After a policy is adopted and legitimized, it moves into the implementation phase. Implementation involves putting the policy into action through various activities, such as organizational restructuring, resource allocation, and rule development, it is essential to have clear guidelines and mechanism for civil servants to follow during implementation.
- 6) Evaluation: The final step of the policy process is evaluation, where policymakers assess the effectiveness, efficiency, and impact of the implemented policies. Evaluation helps determine whether the policy achieved its intended goals, identify any unintended consequences, and provide feedback for future policymaking.

Overall, the public policy process is complex and iterative endeavor that requires careful planning, collaboration, and evaluation. By understanding each stage of the process and considering factors such as problem identification, agenda setting, policy formulation, legitimation, implementation, and evaluation, policymakers can develop and implement policies that address societal needs and contribute to positive outcomes for the public.

### 2.2.8.4 Category of Public Policy

The categorization of public policy is essential for understanding and analyzing the diverse range of policies implemented by governments. Scholars have proposed various criteria for classifying public policies, including:

- 1) Nature of content and objectives: Policies can be classified based on their subject matter and objectives. Policies with similar content and objectives are grouped together, while those with different content and objectives are categorized separately. This classification helps in understanding the substance and purpose of each policy.
- 2) Policy process: Policies can be classified based on the stages or steps involved in the policy process, from formulation to implementation and evaluation. This classification helps visualize how mechanisms in the policy process work and allows for a more accurate understanding of policies formulated under specific conditions, such as during times of crisis.
- 3) Extent of impact: Policies can be classified based on the extent of their impact once implemented. Policies with similar impacts are grouped together, while those with different impacts are categorized separately. This classification helps in assessing the effectiveness and significance of different policies.
- 4) Nature of government activities or missions: Policies can be classified based on the major activities or missions of the government. This classification considers the importance of various government activities, ranging from essential tasks to secondary or minor activities. It helps in understanding the overall priorities and objectives of government actions.

In conclusion, the types of public policies encompass considerations such as the nature of content and objectives, the policy process, the extent of impact, and the nature of government activities or missions. These classifications facilitate detailed analysis and planning for policy implementation, ensuring appropriate methods are developed for further development and community-centered policymaking.

# 2.3 Expend the Context of Sustainable Development Goals (SDGs)

The Sustainable Development Goals (SDGs) are a set of global objectives aimed at addressing various dimensions of development, including economic, social, and environmental aspects. These goals, comprising 17 targets, were established by the United Nations to guide development efforts worldwide from September 2015 to August 2030.

Expanding the context of sustainability principles involves a comprehensive examination of each SDG and its associated targets, operational guidelines, and a process guidelines. Let's explore the expansion of the context of sustainability principles within framework of the SDGs.

Goal 1: End poverty in all its forms everywhere:

Targets focus on eradicating extreme poverty, implementing social protection measures, ensuring equal rights to economic resources, and building resilience to climate-related disaster among vulnerable populations.

Goal 2: End hunger, achieve food security and improved nutrition, and promote sustainable agriculture:

Targets include ending hunger addressing malnutrition, increasing agricultural productivity and income for small-scale producers, ensuring sustainable food production systems, and preserving genetic diversity in seeds and cultivated plants.

Goal 3: Ensure healthy lives and promote well-being for all at all ages:

Targets aim to reduce maternal and child mortality, combat communicable diseases like AIDS, tuberculosis, and malaria, promote mental health, prevent substance abuse, and ensure universal access to reproductive health services and essential medicines.

Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all:

Targets focus on achieving universal access to primary and secondary education, ensuring access to quality pre-primary education, promoting access to technical and vocational education, eliminating gender disparities in education, and fostering education for sustainable development.

Goal 5: Achieve gender equality and empower all women and girls:

Targets include ending discrimination and violence against women, eliminating harmful practices like child marriage and female genital mutilation, ensuring equal participation in decision-making, and providing universal access to sexual and reproductive health rights.

Goal 6: Ensure availability and sustainable management of water and sanitation for all:

Targets aim to achieve universal access to safe drinking water and adequate sanitation, improve water quality and efficiency, and protect ecosystems related to water resources.

Goal 7: Ensure access to affordable, reliable, sustainable, and modern energy for all:

Targets focus on ensuring access to modern energy services, increasing the share of renewable energy, and improving energy efficiency globally.

Goal 8: Promote sustained, inclusive, and sustainable economic growth, full and productive employment, and decent work for all:

Targets include promoting sustainable economic growth, increasing productivity and innovation, creating decent jobs, ending forced labor and child labor, ensuring equal pay for equal work, and promoting sustainable tourism and access to financial services.

The process guidelines associated with each goal provided operational strategies for achieving the targets, such as increasing investment, strengthening international cooperation, implementing policy reforms, and empowering local communities.

In Summary, the contextual use of sustainability principles within the framework of the SDGs involves a holistic approach to addressing the various development challenges while promoting economic, social, and environmental sustainability. By examining the targets and process guidelines of each goal, policymakers and stakeholders can develop comprehensive strategies to achieve sustainable development outcomes by 2030.

# 2.4 Financial System/Budget Management Process

The financial system and budget management process are crucial aspects of organizational management, whether in the private or public sector. Here's an overview of the key components and importance of budgeting, particularly in the context of government:

### 1) Budgeting Process

- (1) Planning: This involves setting objectives and goals aligned with the organization's mission, formulating policies or operational strategies to achieve these goals, and providing a detailed action plan with relevant financial projections.
- (2) Coordination: Ensuring that all departments are aware of the goals and guidelines, creating a detailed action plan for each agency, and coordinating budget plans among departments to ensure consistency and alignment with overall objections.
- (3) Control: Using the budget plan as a monitoring tool to control department performance by comparing actual performance with planned budgets, identifying discrepancies, and finding solutions to improve future plans.

## 2) Types of Budgeting

- (1) Comprehensive budgeting: Planning for every unit in the organization according to sub-goals and overall business goals. It includes basic budget plans and financial budget plans divided into long-term and short term periods.
- (2) Partial Budgeting: Organizing action plans for specific departments or key areas, suitable for smaller organizations where executives can closely monitor operations.

### 3) Importance and Benefits of National Budget

- (1) Administrative Tool: The national budget serves as a tool for governing the country and managing its affairs.
- (2) Economic Development: It is used to develop the country's economy by allocating resources to priority areas such as infrastructure, education, and healthcare.
- (3) Economic Stability: The budget helps maintain economic stability and fiscal health by managing government finances effectively.
- (4) Resource Allocation: It allocates limited resources efficiently and fairly to address the needs of the population and promote equitable development.

In summary, budgeting plays a vital role in organizational management and government administration, facilitating planning coordination, control, and resources allocation to achieve set objectives and goals.

## 4) Managing the Budget for Elderly Welfare

In the fiscal year 2023 budget if the Thai government, the Prime Minister underscored the allocation of funds towards social welfare, prioritizing stability over

other public concerns. An examination of this allocation reveals numerous projects managed by various agencies, with consolidated budgets and provisions for central fund utilization if necessary. Even budgets from preceding terms, currently undergoing parliamentary review, are subject to adjustments and can be incorporated into ongoing budgetary process. As per the Budget Act, all approved budgets eventually revert to the government, allowing for considerations of additional funding requests to address any remaining gaps, with approvals granted by the Cabinet.

The budget for the fiscal year 2023 underscores the Thai government's significant emphasis on diverse facets of social welfare, especially targeting students, the elderly, and disadvantaged populations. A meticulous analysis budgetary allocation delineates a total of 449.57 billion baht allocated for 2023 reveals a substantial increase to 632.58 billion baht, marking a notable increment of 183 billion baht from fiscal year 2014 to the present. This augmented budget aims to address several key areas:

The Early Childhood Group: Thai government prioritizes the well-being of newborns through budgetary support for the first-born child group (0-6 years old) since 2016. This support includes monthly subsidy of 600 baht for households with average income noe exceeding 100,000 bath per person per year. In the budget for the year 2023, a total of 16.321 billion baht has been allocated for this purpose, targeting 2.58 million individuals.

The Elderly Group: Acknowledging the growing elderly population, the Thai government provides monthly living allowances based on age brackets. In the budget for 2023, 87.580 billion baht has been allocated for this purpose, benefitting 11.03 million individuals. Significant efforts are also directed towards improving the living conditions of the elderly, with a budget of 225 million baht allocated in 2023 to enhance 10,000 households.

Underprivileged Groups: Measures to support individuals with limited opportunities include welfare programs to reduce household expenses, travel costs, and cooking and gas expenses through welfare cards. In the budget for 2023, 35.515 billion baht has been allocated for this purpose, targeting 13.45 million people. Additionally, efforts to improve housing conditions for low-income individuals aim to benefit 25,000 households with a budget allocation of 563 million baht in 2023. Furthermore, provisions are made to address overcrowding and ensure sustainable living conditions

in communities, with a budget of 337 million baht allocated. For individual with disabilities, the month living allowance has been increased to 1,000 baht per person in 2023, with a total allocation of 20.339 billion baht aiming to benefit 2.09 million people.

The Healthcare Welfare Group: The Thai government prioritizes the social security system, particularly healthcare welfare, ensuring access for all employees. Significant enhancements have been made in benefits, including increased compensation for lost income in case of disability and extended maternity leave compensation. In the budget for the year 2023, 48.514 billion baht has ben allocated for these initiatives, targeting 23.34 million individuals compared to 12.31 million covered in 2014. Furthermore, efforts are made to ensure the well-being of healthcare providers, with adjustments in compensation and a total allocation of 12.614 billion baht in 2023 targeting 1.05 million individuals.

Thus, it is evident that within budget constraints, the government is dedicated to catering to individuals across all age groups, particularly the disadvantaged, to ensure access to welfare, especially social welfare. Alignment of these efforts with current circumstances and collaborative integration of all tasks and responsibility are imperative.

### 5) Thai budget system

The Thai budget system, known as the Strategic Performance Budgeting System (SPBB), represents a departure from traditional resource control-oriented budgeting towards a focus on output and outcome, aimed at enhancing resource utilization efficiency and effectiveness for the public good. This strategic approach, sometimes referred to as Program Budgeting Strategic Performance-Based Budgeting System (SPBB), emphasizes performance rather than mere resource allocation. Success is gauged through clear and practical indicators aligned with overarching goals, encompassing quantity, quality, timeliness, and cost-effectiveness. To effectively implement this strategy-based budgeting system, agencies' projects must be equipped with monitoring and evaluation and mechanism across four dimensions: quantity, quality, time, and cost.

- (1) Quantitative Dimension: Objectives regarding project implementation volume are delineated in quantifiable terms, facilitating progress tracking through numerical outputs, such as the volume of output delivered within the fiscal year.
- (2) Qualitative Dimension: Quality objectives encompass two facets: adherence to prescribed standards by governmental entities and satisfaction levels of target groups towards the production/ service process.
- (3) Timeliness Dimension: Stipulates the time required for project completion to attain the desired output, such as providing services for license acquisition within stipulated timeframes.
- (4) Cost Dimension: Encompasses the expenses associated with output/project delivery, ensuring cost containment within specific limits, like the cost of service provision not exceeding predetermined thresholds.

The budgeting process in both public and private sectors shares common conceptual foundations. It commences with organizations clearly defining their vision, mission, and objectives, followed by delineation of performance requirements to achieve those objectives. Financial budget planning, coupled with action plans, serves as a key tool in this endeavor, facilitating operational control and concept performance monitoring and evaluation. By focusing on Thailand's budget system, one can draw parallels between budgeting concepts in both sectors, emphasizing strategic performance and output-oriented approaches over resource control. The national budgeting process, guided by Strategic Performance-Oriented Budget principles. Serves as a valuable example for students, offering insights for their own endeavors and guiding adjustments to operational guidelines in alignment with productivity indicators.

In conclusion, budget management and financial planning constitute processes akin to project plan management, commencing with vision formulation and proceeding according to established principles and procedures.

Summary of Variable Synthesis Tables: The synthesis of conceptual variables surrounding policy implementation, particularly in fostering community welfare policies with a focus on sustainability principles and financial/budget management processes, aligns with academic discourse. This summary, encapsulated in Table 2.2, provides a comprehensive overview of aligned viewpoints and concepts.

Table 2.2 Summary of Conceptual Variables (Policy Implementation)

| <b>Implementation of the Policy</b> |                      |                  |                     | lic                                | ity   |  |
|-------------------------------------|----------------------|------------------|---------------------|------------------------------------|---|--|
|                                     | Fixed Welfare System | Political System | Political Consensus | Promote Community Public<br>Policy | Contextual of Sustainability<br>Principles (SDGs) | Financial System<br>Management Process |
| Researcher                          | Fixe                 | Poli             | Poli                | Promo<br>Policy                    | Con   | Fin:<br>Ma                             |
| 1. Sasipat Yodphet, as cited in     | V                    |                  |                     |                                    |   |  |
| Thitirat Disyothin (2007)           |                      |                  |                     |                                    |   |  |
| 2. National Health Security Office  | 1                    |                  |                     |                                    |   |  |
| (2007)                              |                      |                  |                     |                                    |   |  |
| 3. Suphanee Onchuenchit and         | $\sqrt{}$            |                  |                     | $\sqrt{}$                          |   |  |
| Rutaiporn Tritrong (2006)           |                      |                  |                     |                                    |   |  |
| 4. Thailand Development             | V                    | 1                |                     | 1                                  |   |  |
| Research Institute (2006)           |                      |                  |                     |                                    |   |  |
| 5. SPD Hamburg Programme            |                      |                  |                     |                                    |   |  |
| (2007, pp.55-56)                    |                      |                  |                     |                                    |   |  |
| 6. King, Stevahn, Ghere &           |                      |                  | 1                   |                                    |   |  |
| Minnema (2001)                      |                      |                  |                     |                                    |   |  |
| 7. (Avery, 1981)Avery (1981)        |                      |                  |                     |                                    |   |  |
| 8. Vanderwood (1993)                |                      |                  | $\sqrt{}$           |                                    |   | $\sqrt{}$                              |
| 9. Permsak Jariamphan (2012)        |                      |                  |                     | V                                  |   |  |
| 10. Friedrich (1963, p. 70)         |                      |                  |                     |                                    | $\sqrt{}$   |  |
| 11. Wamsley & Zald (1976)           |                      |                  |                     | V                                  |   |  |
| 12. Mark Considine (1994, pp.3-6)   |                      |                  |                     | $\sqrt{}$                          | $\sqrt{}$   | $\sqrt{}$                              |
| Frequency                           | 4                    | 1                | 3                   | 6                                  | 2   | 2                                      |
| Percentage                          | 33                   | 8                | 25                  | 50                                 | 16  | 16                                     |

In Table 2.2, it is evident that the enactment of public policies plays a crucial role in driving educational initiatives. The successful implementation of the elderly

welfare system policy in northeastern Thailand, adhering to sustainability principles, owes to various factors synthesized from academic insights and theories. These factors include:

- 1) Establishing the welfare system
- 2) Political framework
- 3) Consensus of Parliament (Multi-Attribute Consensus Reaching:

## MACR)

- 4) Fostering community-centric policies
- 5) Applying sustainability principles within the context (SDGs)
- 6) Financial and budget management processes

From this study, a conceptual framework has been formulated to study, implement, and evaluate the success of this policy. However, further development of the synthesized components can be pursued in subsequent phrases.

Assessing the elderly welfare system policy under sustainability principles is crucial. Although policy evaluation typically occurs as a final step in policy process, it can be integrated at each stage. The genesis of policy evaluation can be tracked to Harold Lasserll's seminal work, "The Policy Orientation," published in 1951, which catalyzed the discourse on public policy research. Despite challenges in identifying key drivers, Lassswell's pivotal role is undeniable. Subsequently, policy evaluation gained traction in the 1960s, notably during President Johnson's tenure, with a focus on effectiveness measurement and bureaucratic performance evaluation. This period saw significant investment in poverty alleviation and public services, marking the emergency of policy evaluation as a political tool for resource allocation efficiency. Congressional acts in the 1970s further institutionalized policy evaluation, necessitating enhanced governmental expertise and fostering collaborations with private consulting firms. Concurrently, universities and research institutes began offering specialized training in policy analysis and evaluation, fostering burgeoning job market in this field.

1) Fundamental of Public Policy Assessment

There are two types of public policy assessment: system evaluation within the policy-making process and policy implementation evaluation.

System evaluation or policy-making process assessment typically involves evaluating the political feasibility of the system and assessing the administrative and environmental performance, including effectiveness. This evaluation also considers the readiness and potential obstacles in policy implementation.

On the other hand, policy performance evaluation focuses on assessing the implementation of specific policies, including the evaluation of strategic plans and effectiveness of their execution. This type of assessment gauges the attainment of operational objectives set forth by the policy.

In practice, the success measurement of any policy begins with evaluating the achievements of its programs or projects, starting from the lowest level of policy implementation.

Understanding these two principles of public policy evaluation, we will delve into the basic concepts, including the meaning, importance, and nature of policy evaluation. Initially, we will explore the significance of policy evaluation, followed by an examination of its meaning and importance.

### 2) Meaning and Importance of Public Policy Evaluation

## (1) Definition of Public Policy Assessment

Public policy evaluation encompasses various termsrefelcting its evalutive nature. Scholars offer diverse perspectives, with each focusing on areas of interest. Robert Haveman emphasizes evaluation research's central criterion, centering on government activities' societal impact. Joseph S. Wholey defines policy evaluation as assessing a nation's policies and programs' overall effectiveness, determining if stated objectives are achieved. Richard D. Bingham and Claire L. Felbinger refer to it as a scientific approach to predicting policy implementation success. Charles O. Jones underscores policy evaluation's systematic and continuous nature in understanding policy effects on societal issues. This evaluation, as per William N. Dunn and Carol Weiaa, aids governments in reviewing, monitoring, and assessing their progress, aiming to address societal needs and policy goals effectively. Ultimately, policy evaluation seeks to answer: What societal changes result from policy implementation? In summary, public policy evaluation compares post-implementation outcomes with predetermined policy objectives.

## (2) The Importance of Public Policy Evaluation

The importance of public policy evaluation lies in ensuring effective policy implementation. It ensures policies and programs meet their objectives

efficiently. Constant monitoring helps identify operational challenges, deviations from initial policies, and necessary adjustments. Given the dynamic nature if policymaking, evaluations become crucial for adapting policies to evolving circumstances. However, some parties may overlook or underestimate evaluations due to perceived risks. Yet, they serve as critical indicators of policy success or failure, impacting various stakeholders. Recognizing this importance is paramount for fostering effective governance and societal well-being.

(3) Duty of Public Policy Assessment

Public policy evaluation serves several vital functions:

- a) Providing accurate and reliable information about policy performance to understand its impact on target populations.
- b) Fostering clarity and criticism of policy objectives, aiding in goal definition and operationalization.
- c) Assisting in the application of policy analysis methods, defining problems, and offering solutions for future policymaking.

In essence, public policy evaluation is indispensable for informed decisionmaking, ensuring policies align with societal needs and goals.

# 2.5 The Essence of Public Policy Evaluation

Public policy evaluation encompasses several significant aspects that warrant attention. Firstly, it is crucial to delineate the distinction between policy evaluation and monitoring. While monitoring primarily involves the gathering of information pertaining to anticipated and unanticipated policy outcomes, policy evaluation delves deeper by placing emphasis on discretionary considerations associated with the assessment of desirable policy or program values. Thus, policy evaluation entails a concerted endeavor to ascertain the societal utility or value of the policy or program, rather than mere data collection.

Secondly, the interdependence between facts and values plays a pivotal role in public policy evaluation. Evaluating public policies necessitates a thorough consideration of both empirical facts and normative values. It is imperative to

demonstrate that policy outcomes are not only based on factual evidence but also aligned with societal values, effectively addressing real world issues.

Thirdly, public policy evaluation exhibits an orientation towards the interplay between past and present circumstances. Evaluative assessments tend to focus on retrospective analysis, scrutinizing past and present outcomes rather than future projections. This retrospective approach entails examining the efficacy of policies post-implementation, contrasting with prospective analyses which occur before policy enactment. Consequently, the evaluation process centers on elucidating the connection between past policy interventions and present outcomes.

Fourthly, the duality of values inherit in evaluation underscores its multifaceted nature. Evaluation values typically encompass two dimensions: goal orientation and methodological considerations. While the former pertains to the overarching objectives of policy evaluation, the latter delineates the methodologies employed to achieve these goals. Therefore, public policy assessment is characterized by a nuanced interplay between defining evaluation objectives and employing suitable methodologies to attain them.

## 2.6 Characteristics of Public Policy Evaluation

According to Joseph D. Comtors (1981), an ideal policy assessment should embody certain distinct characteristics. Firstly, it must exhibit interdisciplinary traits, drawing upon insights and knowledge from various scientific domains. This interdisciplinary approach facilitates a comprehensive understanding of the nature and ramifications of policy implementation.

Secondly, assessment processes should not merely reflect the perspectives of decision-makers or assessors along but necessitate mutual acceptance by both parties. For instance, when evaluating decentralized public policies, such as those concerning sub-district administrative organizations, it is imperative to engage academic with specialized expertise in local decentralization. This ensures a balanced and comprehensive evaluation process.

Thirdly, effective public policy evaluation demands the adept utilization of diverse strategies to discern the true effects of policy interventions. Employing a

multifaceted approach enables a nuanced comprehension of the multifarious impacts of public policies.

Fourthly, objectivity is paramount in public policy evaluation. For instance, when assessing economic policies implemented by the government, impartiality is crucial. Academics tasked with evaluation must adhere strictly to academic principles and maintain impartiality in their assessments. Evaluations should be conducted in accordance with rigorous academic standards, ensuring integrity and credibility in the appraisal process.

Types of Public Policy Assessment

Scholars in the field of public policy assessment have organized assessment into distinct categories based on various criteria. For instance, Richard D. Bingham and Claire L. Felbinger (1989, p. 3) delineate four primary types of policy assessment.

The first category, termed "process assessment," centers on evaluating the methods and delivery of programs or policies to their intended recipients. This type of assessment focuses on gauging program activities and customer satisfaction, rather than addressing management issues.

The second category pertains to impact assessment, which will be discussed further in the subsequent section.

The third category, known as policy evaluation, directs attention towards appraising the effects of a policy or program on its intended problem area.

The fourth type, as classified by Bingham and Felbinger, is meta-evaluation. This form of assessment involves synthesizing findings from various evaluation research endeavors, seeking commonalities in outcomes, measures, ans trends across the literature. Meta-evaluation bears resemblance to a comprehensive review of relevant literature.

In addition to Bingham and Felbinger's classification, other scholars have also categorized public policy assessments into these four types. Moreover, alternative categorizations of policy assessments exist, such as those based on time constraints, purpose, or substantive criteria.

In summary, the classification of public policy assessments is contingent upon various criteria, and this discussion outlines the categorization based on the aforementioned criteria.

It is evident that assessments are conducted within a structured framework aligned with implementation conditions. Consequently, assessments undergo validation and continual refinement within these parameters.

Upon synthesizing variables concerning the assessment of the elderly welfare system policy under sustainability principles, this study draws upon academic perspectives consistent with its objectives to formulate actionable plans. The synthesis results are presented in Table 2.3

Table 2.3 Variable Synthesis (Policy Assessment)

| Implementation Policy Assessment              | t                 |                                |               |                |
|---|-------------------|--------------------------------|---------------|----------------|
| Researcher                                    | Budget allocation | Government agency<br>personnel | Participation | Infrastructure |
| 1. Jumpol Niyompanich (2009)                  | V                 |                                |               |                |
| 2. Richard D. Bingham and Claire L. Felbinger | V                 | $\sqrt{}$                      |               |                |
| (1989, p.3)                                   |                   |                                |               |                |
| 3. Jumpol Niyompanich (2009)                  | 1                 | $\sqrt{}$                      | $\sqrt{}$     |                |
| 4. Charles O. Jones (1970)                    |                   | $\sqrt{}$                      |               |                |
| 5. Claire L. Felbinger (1989, p.3)            |                   |                                | V             |                |
| 6. Robert Haveman (1987, pp.191-218)          |                   |                                |               |                |
| Frequency                                     | 3                 | 3                              | 3             | 3              |
| Percentage                                    | 50                | 50                             | 50            | 50             |

Table 2.3 illustrates the implementation of public policy assessment. A synthetic table effectively summarizes this evaluation process, focusing on factors conducive to the welfare of the elderly. This assessment encompasses various criteria, including budget management, government personnel, participation, and infrastructure. The researcher has scrutinized these characteristics and assessment guidelines, drawing

upon scholarly insights pertinent to the management of elderly welfare. These insights serve as valuable benchmarks for refining future policy plans.

In the realm of pertinent research, both domestic and foreign studies contribute significantly to understanding the complexities of the elderly welfare management. For instance, Chulalak Paiboonfungfueng's (2020) investigation into sustainable development in elderly-friendly communities elucidates distinct frameworks tailored to the needs of Bangkok and its environs. Similarly, Chatchadaporn Chaisat (2018) explores the potential development of the elderly in the lower Northeastern region, offering insights into health carem, participation, and security measures. Furthermore, Rattikarn Insuk and Thanattha Rojanatrakul (2018) delve into social welfare management for the elderly in administrative areas, shedding light on community perspectives and organizational strategies.

Expanding the scope globally, Sukamdi et al. (2020) highlight the importance of the elderly care services in response to demographic shifts, particularly in developing countries like Indonesia. Additionally, Terry Fulmer (2021) underscores the pressing need for comprehensive health care reforms to cater to the burgeoning older adult population in the United States. Furthermore, Brunner Karma's (2021) qualitative inquiry into the health-related needs of the elderly emphasizes the significance of community-based interventions and specialized care approaches to promote healthy aging effectively.

### **CHAPTER 3**

### RESEARCH METHODOLOGY

The research, titled "The Success of the Implementation of the Elderly Welfare System Policy Under Sustainability Principles in the Northeast of Thailand," is a research and development study to achieve the following objectives:

- 1) Study success factors: Investigate the factors contributing to the success of implementing the elderly welfare policy in the northeast of Thailand.
- 2) Compare policy implementation success: Compare the success of implementing the elderly welfare policy under sustainability principles in the northeast of Thailand, categorized by demographic characteristics of the sample.
- 3) Describe relationship among factors: Describe the relationship among factors influencing the success of implementation of the elderly welfare policy under sustainability principles in the northeast region of Thailand.
- 4) Propose a success model: Propose a model outlining the success factors for implementation of the elderly welfare policy into practice under sustainability principles in the northeast region of Thailand.

The researcher has organized the research process into four steps:

- Step 1: involves studying the success factors of implementing the elderly welfare policy in practice under sustainability principles in the northeast of Thailand. The research conducted the following activities:
  - 1) Literature Review and Conceptual Framework:
- (1) Explored and analyzed concepts and theories related to the success of implementing the elderly welfare policy under sustainability principles in the northeast of Thailand.
  - a) Explored evolution of welfare policy
  - b) Examined the current situation of the elderly in the country
- c) Investigated the determination and planning of public welfare for the elderly.

- (2) Studied the implementation of the policy, considering various aspects:
  - a) Political system and the consensus of the parliament
- b) Commitment to political parties, emphasizing community opolicies with people at the center.
  - c) Contextual use of Sustainable Development Goals (SDGs)
  - d) Financial system and budget management process
  - e) Reviewed relevant research

## 2) Assessment Components

- (1) Introduced a balance scorecard (BSC) principle with four perspectives: effectiveness, service quality, performance, and organizational development.
- (2) Component 1: focused on assessing and analyzing model in the implementation.
- (3) Component 2: synthesized indicators and assessment criteria from the policy framework for elderly welfare under sustainability principles (2002-2022).
- (4) Component 3: detailed the assessment methods, including interviews, data item inspection, documentary review, and inquiry, reflecting the reality of the implementation.
- (5) Component 4: employed performance appraisal principles for a comprehensive assessment.

## 3) Opinion Survey

- (1) Conducted a survey on the opinions regarding the success of the implementation of the elderly welfare policy in practice under sustainability principles in the northeast of Thailand.
- (2) Determined the population as elderly individuals with welfare (3,386,357 people in 20 provinces in the northeast of Thailand, according to 2021 statistics).

Table 3.1 Number of Elderly in the Northeast of Thailand

| Province          | Number of Population |
|-------------------|----------------------|
| Kalasin           | 151,345              |
| Khon Kaen         | 299,639              |
| Chaiyaphum        | 195,784              |
| Nakhon Phanom     | 100,618              |
| Nakhon Ratchasima | 435,347              |
| Buriram           | 242,102              |
| Maha Sarakham     | 157,588              |
| Mukdahan          | 48,265               |
| Yasothon          | 87,634               |
| Roi-Et            | 215,253              |
| Loei              | 106,848              |
| Sisaket           | 223,307              |
| Sakon Nakorn      | 155,966              |
| Surin             | 216,188              |
| Nong Khai         | 76,592               |
| Nong Bua Lamphun  | 73,020               |
| Amnat Charoen     | 57,242               |
| Udon Thani        | 223,278              |
| Ubon Ratchathani  | 143,456              |
| Bueng Kan         | 29,358               |
| Total             | 3,386,357            |

Source: Statistics on the Elderly in Thailand (2011).

The researcher applied the Krejcie and Morgan table (1970) at the confidence level of 95 percent to determine a sample of 400 individuals, using stratified random sampling and purposive sampling methods.

Table 3.2 Stratified Random Sampling Method

| Province          | Number of Population | Number of Sample |
|-------------------|----------------------|------------------|
| Kalasin           | 151,345              | 18               |
| Khon Kaen         | 299,639              | 35               |
| Chaiyaphum        | 195,784              | 23               |
| Nakhon Phanom     | 100,618              | 19               |
| Nakhon Ratchasima | 435,347              | 51               |
| Buriram           | 242,102              | 29               |
| Maha Sarakham     | 157,588              | 19               |
| Mukdahan          | 48,265               | 5                |
| Yasothon          | 87,634               | 10               |
| Roi-Et            | 215,253              | 25               |
| Loei              | 106,848              | 13               |
| Sisaket           | 223,307              | 26               |
| Sakon Nakhon      | 155,966              | 18               |
| Surin             | 216,188              | 26               |
| Nong Khai         | 76,592               | 9                |
| Nong Bua Lamphun  | 73,020               | 7                |
| Amnat Charoen     | 57,242               | 7                |
| Udon Thani        | 223,278              | 26               |
| Ubon Ratchathani  | 143,456              | 17               |
| Bueng Kan         | 29,358               | 3                |
| Total             | 3,386,357            | 400              |

This comprehensive approach aims to gather insights from literature, create a conceptual framework, and utilize various assessment components and survey methods to evaluate the success of implementing the elderly welfare policy in the specified region.

1) Apart from conducting a questionnaire from 400 respondents, an opinion interviews on the success of implementing elderly welfare policy under sustainability principles in northeast of Thailand was utilized. Additionally, key

performance indicators for the development of success and interview data from involved parties.

- 2) Tool development framework: A framework for question creation consistent with the study's objectives was established based on document analysis and related research.
- 3) Tool quality determination: the validity of the tools was assessed by five qualified individuals, considering coverage and aligning with the content through the Item-Objective Congruence (IOC) index. Items with values between 0.6-1.00 was selected for questionnaire improvement based on expert recommendations. Reliability was assessed using the Cronbach's alpha coefficient method with a sample size comparable to the population.
- 4) Data collection involved sending letters of cooperation to target groups and collecting questionnaires directly from involved agencies.
- 5) Data Analysis: includes descriptive statistics such as frequency, percentage, mean and standard deviation. Inferential statistical analysis was conducted through a study of linear structural equation modeling, causal relationship structure analysis, and correlation research with advanced statistical analysis.
- 6) Sample size: the number of samples and variables in the conceptual framework should ideally have a 20 to 1 ratio (Stevens, 1986). Accurate sample estimation, as per Schumacker and Lomax (2010), suggests having a sample size of 10-20 samples per variable. Kelloway (1998) suggests that an appropriate sample size should be at least 200 people based on conceptual framework. The researcher determined a suitable sample size of 20 times the number of variables in the conceptual framework, resulting in 400 participants.
- 7) Qualitative data obtained from questionnaires and document synthesis were analyzed using the content analysis method, and a summary was created.
- 8) To enhance the model's significance and transform it into an essential body of knowledge, verification criteria and the goodness of fir index (GFI) were applied to research models using empirical data.

This comprehensive approach ensures a rigorous and thorough examination of both quantitative and qualitative data, providing a robust foundation for understanding the success factors and implementation of elderly welfare policy in northeast of Thailand under sustainability.

Step 2: Creating a model for assessing the success of elderly welfare policy implementation.

The researcher determined the content scope of the evaluation model by analyzing data related to evaluation model elements from the first step. This involved studying related documents and research to design a draft evaluation model for assessing the success of elderly welfare policy implementation under sustainability principles in northeast of Thailand. A manual for assessment was prepared, detailing course descriptions, indicator specifics, measurement criteria, data sources, and implementation guidance. Coordination with relevant departments ensured alignment.

Expert review using MACR technique: the draft model was subjected to a comprehensive review by experts to assess usefulness, feasibility, suitability, and validity. The Multi-Attribute Consensus Reaching (MACR) technique was employed for expert evaluation through group discussions, idea exchange, suggestion gathering, and in-depth review.

- 1) Focus group of experts: A focus group comprised of 10 experts categorized as follows:
  - (1) Qualified individuals at the national level
  - (2) Qualified individuals at the district level
  - (3) Qualified individuals at the sub-district level
  - 2) Variables studied:

The evaluation focused on four variables:

- (1) Usefulness: the practical applicability of the model
- (2) Feasibility: the practicality and ease of implementation
- (3) Suitability: Alignment with the unique context of northeast of

#### Thailand

(4) Comprehensive validity: the overall effectiveness and validity of the evaluation model

This step ensured a rigorous examination of the draft model's utility and suitability for assessing the success of elderly welfare policy implementation. Expert

input was valuable in refining and enhancing the model to meet the specific needs and conditions of the northeast region.

Step 3: Piloting elderly welfare public policy implementation under sustainability principles in northeast Thailand

In this step, the focus was on the experimental implementation of the elderly welfare public policy under sustainability principles in the northeast of Thailand. The assessment encompassed various aspects, including budget allocation, cost benefit analysis, annual budget consideration, and overall processes and impacts.

(Experiment design) The experiment involved randomly selecting areas in four provinces based on data from zoning operations in the northeast Thailand. Simple random sampling was employed, utilizing a non-returnable and immersible model. A three-month trial period was implemented to test the model's effectiveness in real-world conditions. (Trail execution) During the three-month trail, the researcher closely monitored and assessed key aspects of the elderly welfare public policy implementation. Emphasis was placed on budget allocation, cost-benefit dynamics, annual budget management, and the overall impact of the policy. (Adjustment based on trial results) the results obtained from the trail were used to make necessary adjustments to the model. Any shortcomings or areas for improvement were identified and addressed to enhance the model's functionality and effectiveness. (Model finalization and expert verification) the adjusted model was considered complete and ready for further development. Results and the refined model were presented to qualified experts, following a similar approach to the second step, for thorough verification and validation before full-scale implementation.

This step ensured that the model for elderly welfare public policy under sustainability principles was not only theoretically sound but also practical and effective in real-world scenarios. The trail period allowed for refinement, and expert verification provided additional insights and recommendations for optimization.

Step 4: Full-scale Implementation of elderly welfare public policy under sustainability principles in the northeast of Thailand

This step involved the comprehensive implementation of the successfully developed model for elderly welfare public policy under sustainability principles. The

goal was to extend the use of the model to all provinces and evaluate its implementation on a broader scale, providing an overview at the provincial level.

#### 1) Model analysis and refinement

The researcher thoroughly analyzed the model for the success of the elderly welfare policy in practice under sustainability principles. Different components, including the rational alternative model, political system model, policy assessment model, and mechanisms, methods od participation between government and non-governmental entities, were scrutinized.

## 2) Guidelines for further development

The analyzed model served as a comprehensive guideline for further development and refinement. Recommendations and insights from the analysis were considered to enhance the model's effectiveness and address any potential challenges.

# 3) Extension to all provinces

The successfully developed model was extended for use in all provinces within the northeast of Thailand. The implementation was carried out with attention to regional variations and specific needs of each province.

### 4) Overview evaluation at provincial level

The implementation process was evaluated at an overview level for each province. Key performance indicators, success factors, and challenges were assessed to understand the impact and effectiveness of the elderly welfare public policy under sustainability principles in diverse regional contexts.

#### 5) Feedback and iterative improvement

Feedback from the provinces and stakeholders involved in the implementation was collected. An iterative improvement process was initiated to address any emerging issues, refine the model further, and ensure continuous enhancement.

By implementing the model at a large scale and conducting an overview evaluation, this step aimed to validate the model's applicability in diverse contexts and provide valuable insights for ongoing improvement and optimization.

### **CHAPTER 4**

#### DATA ANALYSIS AND FINDINGS

This research, centered on the successful implementation of the elderly welfare system under sustainability principles in Northeast of Thailand, employed a research and development approach with the following key objectives: 1) Aimed to explore and understand the factors contributing to the successful application of the elderly welfare system policy in practice in the northeast region of Thailand by utilizing various analytical criteria, including frequency, percentage, mean and standard deviation, to assess the success of policy implementation. 2) Compared the success of policy implementation of the elderly welfare system under sustainability principles across different characteristics of sample sizes in the northeast region. Applied the balance scorecard concept with perspectives on effectiveness, service quality, performance, and organizational development measurement components. 3) Explored the relationship among various factors influencing the success of policy adoption for the elderly welfare system in the northeast region. Utilized interviews and data related to policy adoption to analyze and understand the dynamics influencing quality.

Step 1: The study examined the factors influencing the successful implementation of policy, with a specific focus on the adoption of the elderly welfare system within the Northeast region of Thailand, emphasizing sustainability principles.

The data underwent analysis according to the first objective to investigate the factors affecting the successful implementation of policy, particularly regarding the integration of the elderly welfare system within the Northeast region of Thailand, with an emphasis on sustainability principles.

Surveying public perspectives on the successful implementation of the elderly welfare system policy within the Northeast region, emphasizing sustainability.

Part 1: The questionnaire was devised to gather respondents' demographic information, utilizing frequency distribution and percentages to elucidate findings, as depicted in Table 4.1.

Table 4.1 Fundamental Data of the Respondents

| <b>Population Characteristics</b> | Number (People) | Percentage |
|-----------------------------------|-----------------|------------|
| 1. Gender                         |                 |            |
| Male                              | 196             | 49.00      |
| Female                            | 204             | 51.00      |
| Total                             | 400             | 100        |
| 2. Age                            |                 |            |
| 60-65 Years Old                   | 108             | 27.00      |
| 66-70 Years Old                   | 97              | 24.25      |
| 71-75 Years Old                   | 134             | 33.50      |
| Over 75 Year Old                  | 61              | 15.25      |
| Total                             | 400             | 100        |
| 3. Level of Education             |                 |            |
| Undergraduate                     | 202             | 50.50      |
| Bachelor's Degree                 | 146             | 36.50      |
| Higher than a Master's Degree     | 52              | 13.00      |
| Total                             | 400             | 100        |
| 4. Years of Work Experience       |                 | 7/8        |
| Under 5 Years                     | 72              | 18.00      |
| 5-10 Years                        | 195             | 48.75      |
| 11-20 Years                       | 110             | 27.50      |
| More than 20 Years                | 23              | 5.75       |
| Total                             | 400             | 100        |
| 5. Status                         | MAGA            |            |
| Solo                              | 103             | 25.75      |
| Living with Family                | 128             | 32.00      |
| Living with Others                | 118             | 29.50      |
| Other (Please Specify)            | 51              | 12.75      |
| Total                             | 400             | 100        |

| <b>Population Characteristics</b>  | Number (People) | Percentage |
|------------------------------------|-----------------|------------|
| 6. Main Occupation                 |                 |            |
| Retired Civil Servants/Pensioners  | 67              | 16.75      |
| State Enterprises/State Enterprise | 53              | 13.25      |
| Employees                          | 33              | 13.23      |
| Employed/Seller                    | 87              | 21.75      |
| Personal Business                  | 43              | 10.75      |
| Unemployed                         | 65              | 16.25      |
| Others (Farmer)                    | 85              | 21.25      |
| Total                              | 400             | 100        |
| 7. Income of Your Family Per       | MAT             |            |
| Month                              |                 |            |
| Below 10,000 Baht                  | 13              | 3.25       |
| 10,000-30,000 Baht                 | 223             | 55.75      |
| 30,001-60,000 Baht                 | 99              | 24.75      |
| 70,001-100,000 Baht                | 34              | 8.50       |
| More Than 100,000 Baht             | 31              | 7.75       |
| Total                              | 400             | 100        |
| 8. Main Source of Income           |                 |            |
| Self-employed                      | 171             | 42.75      |
| Elderly Allowance Provided by      | 69              | 17.25      |
| the Government                     |                 |            |
| From Spouse or Children-           | 72              | 18.00      |
| Grandchildren                      |                 |            |
| From Ancillary Occupations         | 56              | 14.00      |
| Other (Please                      | 32              | 8.00       |
| Specify)                           |                 |            |
| Total                              | 400             | 100        |

Gender distribution: The majority of respondents were female, comprising 204 individuals, accounting for 51 percent of the sample, while make respondents totaled 196, representing 49 percent.

Age distribution: The predominant age group among respondents was 71 to 75 years, with 134 individuals, constituting 33.50 percent. Subsequently, the age bracket of 60 to 65 years included 108 respondents, making up 27 percent. Those aged 66 to 70 years accounted for 97 individuals, representing 24.25 percent, and individuals over 75 years numbered 61, comprising 15.25 percent.

Educational attainment: A majority of respondents had educational qualifications below a bachelor's degree, totaling 202 individuals, or 50.50 percent. Bachelor's degree holders accounted 146 respondents, representing 36.50 percent, while those with educational attainment exceeding a master's degree were 52, comprising 13 percent.

Work experience: The majority of respondents reported having 5 to 10 years of work experience, with 195 individuals, constituting 48.75 percent. Respondents with 11 to 20 years of experience numbered 110, representing 27.50 percent, whereas those with less than five years of experience amounted to 72, making up 18 percent. Finally, respondents with over 20 years of experience totaled 23, comprising 5.75 percent.

Living arrangements: The majority of respondents resided with family members, with 128 individuals, representing 32 percent. Additionally, 118 respondents lived with others, accounting for 29.50 percent, while 103 individuals lived alone, constituting 25.75 percent. Other living arrangements were reported by 51 respondents, comprising 12.75 percent.

Occupation: The largest proportion of respondents were employed or engaged in selling activities, totaling 87 individuals, representing 21.75 percent. Other occupations, such as farming, were reported by 85 individuals, making up 21.25 percent. Retired civil servants or pensioners accounted for 67 respondents, comprising 16.75 percent, while unemployment was reported by 65 individuals, representing 16.25 percent. Employee of state enterprises numbered 53, constituting 13.25 percent, and self-employed individuals accounted for 43 respondents, comprising 10.75 percent.

Monthly family income: The majority of respondents reported monthly family incomes ranging from 10,000 to 30,000 baht, with 223 individuals, representing 55.75 percent. Incomes of 30,001 to 60,000 baht were reported by 99 respondents, comprising 24.75 percent, while incomes of 70,001 to 100,000 baht were reported by 34 individuals, representing 8.50 percent. Incomes exceeding 100,000 baht were reported

by 31 respondents, making up 7.75 percent, whereas incomes below 10,000 baht were reported by 13 individuals, accounting for 3.25 percent.

Primary source of income: The largest proportion of respondents cited self-employment as their main source of income, with 171 individuals, comprising 42.75 percent. Income provided by spouses or children/grandchildren was reported by 72 respondents, making up 18.00 percent. Government-provided elderly allowances were received by 69 individuals, representing 17.25 percent, while income from auxiliary occupations was reported by 56 respondents, comprising 14 percent. Other sources of income were reported by 32 individuals, accounting for eight percent.

Part 2 An analysis of the information regarding the elderly welfare system's needs. Analysis of the data based on the needs of the elderly welfare system by using mean and standard deviation is shown in the results in Tables 4.2 to Table 4.6.

Table 4.2 Results of Mean and Standard Deviation of the Elderly Welfare System's Needs (Overall)

| Needs of the Elderly Welfare |          | Opinion Level |          |        |  |  |
|------------------------------|----------|---------------|----------|--------|--|--|
| System (Overall)             | <u>x</u> | S. D.         | Comment  | Number |  |  |
| 1. Health                    | 3.67     | 0.35          | High     | 2      |  |  |
| 2. Education                 | 3.21     | 0.42          | Moderate | 3      |  |  |
| 3. Housing                   | 3.17     | 0.50          | Moderate | 4      |  |  |
| 4. Security                  | 3.90     | 0.53          | High     | 1      |  |  |
| Overall                      | 3.64     | 0.43          | High     |        |  |  |

From Table 4.2, the findings illustrate that the exigencies pertaining to the elderly welfare system were generally characterized by a high level of significance (Mean = 3.64, Standard Deviation = 0.43). A detailed examination of individual needs unveils twp prominent domains that garnered notably high ratings: Security Mean = 3.90, Standard deviation = 0.53) and Health (Mean = 3.67, Standard Deviation = 0.35), the latter emerging as the second highest priority. Additionally, two other domains attained moderate ratings: Education (Mean = 3.21, Standard Deviation = 0.42) and Housing (Mean = 3.17, Standard Deviation 0.50).

Table 4.3 Analysis of Mean and Standard Deviation Results in the Needs of Elderly Welfare System (Health Aspect)

| Needs of Elderly Welfare System           | Opinion Level |       |         |        |
|---|---------------|-------|---------|--------|
| (Health Aspect)                           | <u>x</u>      | S. D. | Comment | Number |
| 1. Do you want to receive                 | 4.02          | 0.41  | High    | 2      |
| complimentary treatment?                  |               |       |         |        |
| 2. Do you wish for a provision of elderly | 4.14          | 0.22  | High    | 1      |
| priority passes in hospitals and other    |               |       |         |        |
| places?                                   |               |       |         |        |
| 3. Do you want it to be convenient by     | 4.01          | 0.54  | High    | 3      |
| having a public health service near your  |               |       |         |        |
| home?                                     |               |       |         |        |
| 4. Do you wish for a provision of home    | 3.93          | 0.43  | High    | 4      |
| visits providing counseling and advice    |               |       |         |        |
| on health care by public health officers? |               |       |         |        |
| 5. Do you wish to have a provision of     | 3.90          | 0.53  | High    | 5      |
| access to both public and private health  |               |       |         |        |
| care services for elderly in all areas?   |               |       |         |        |
| Overall                                   | 3.67          | 0.35  | High    | 6//    |

Based on the data presented in Table 8, the comprehensive analysis reveals that the requirements within the elderly welfare system, particularly concerning health aspects, were notably substantial (Mean = 3.67, Standard Deviation = 0.35). An indepth examination of each specific need indicates that all aspects garnered high ratings. These aspects include the desire for the provision of elderly priority passes in hospitals and other establishments (Mean = 4.14, Standard Deviation = 0.22), the preference for receiving complimentary treatment (Mean = 4.02, Standard Deviation = 0.41), the inclination towards convenient access to public health services in proximity to their residence (Mean = 4.01, Standard Deviation = 0.54), the aspiration for home visits from public health officers offering counseling and healthcare advice (Mean = 3.93, Standard

Deviation = 0.43), and the wish for access to both public and private healthcare services across all regions for the elderly population (Mean = 3.90, Standard Deviation = 0.53).

Table 4.4 Analysis of Mean and Standard Deviation Results of Needs of Elderly
Welfare System (Education Aspect)

| Needs of Elderly Welfare System                |          | 0    | pinion Level |        |
|--|----------|------|--------------|--------|
| (Education Aspect)                             | <u>x</u> | S.D. | Comment      | Number |
| 1. Do you want to acquire appropriate          | 3.26     | 0.42 | Moderate     | 3      |
| knowledge, especially on any matters           |          |      |              |        |
| regarding government support for your          |          |      |              |        |
| rights and benefits?                           |          |      |              |        |
| 2. Do you want to acquire appropriate          | 3.28     | 0.30 | Moderate     | 2      |
| knowledge through radio, television, and       |          |      |              |        |
| newspapers from knowledgeable officers?        |          |      |              |        |
| 3. Do you want to receive appropriate          | 3.26     | 0.64 | Moderate     | 4      |
| vocational training that fits the elderly with |          |      |              |        |
| the purpose of creativity?                     |          |      |              |        |
| 4. Do you want to receive a chance to          | 3.36     | 0.21 | Moderate     | 1      |
| perform your talents and abilities in line     |          |      |              |        |
| with your age, such as knowledge sharing?      |          |      |              |        |
| 5. Do you want to see open encouragement       | 2.72     | 0.54 | Moderate     | 5      |
| of social awareness and self-awareness of      |          |      |              |        |
| being a valuable elderly person?               |          |      |              |        |
| Overall  | 3.21     | 0.42 | Moderate     |        |

Based on the findings presented in Table 9, it is evident that the overall assessment of the educational aspects within the elderly welfare system delineated a moderate level of significance (Mean = 3.21, Standard Deviation = 0.42). A granular examination of individual needs reveals that each aspect attained a moderate rating. These encompass the desire for opportunities to utilize one's talents and abilities commensurate with age, such as through knowledge sharing (Mean = 3.36, Standard

Deviation = 0.64), the aspiration to acquire relevant knowledge through various media channels facilitated by knowledgeable officers (Mean = 3.28, Standard Deviation = 0.30), the inclination towards obtaining specific knowledge pertaining to government support for rights and entitlements (Mean = 3.26, Standard Deviation = 0.42), the interest in receiving vocational training tailired to elderly individuals with an emphasis on fostering creativity (Mean = 3.26, Standard Deviation = 0.64), and the desire for the promotion of social and self-awareness among the elderly population (Mean = 2.72, Standard Deviation = 0.54).

Table 4.5 Analysis of Mean and Standard Deviation Results of the Needs of Elderly Welfare System (Housing Aspect)

| Needs of Elderly Welfare System            |          | Op   | inion Level |        |
|--|----------|------|-------------|--------|
| (Housing Aspect)                           | <u>x</u> | S.D. | Comment     | Number |
| 1. Do you want to see the provision of     | 3.11     | 0.47 | Moderate    | 4      |
| nursing homes for the elderly at the sub-  |          |      |             |        |
| district level?                            |          |      |             |        |
| 2. Do you want to see the government's     | 3.03     | 0.52 | Moderate    | 5      |
| provision of support on complimentary      |          |      |             |        |
| nursing homes as a type of welfare?        |          |      |             |        |
| 3. Do you want to live in a nursing home   | 3.28     | 0.31 | Moderate    | 2      |
| if provided?                               |          |      |             |        |
| 4. Do you want the provision of a low-     | 3.24     | 0.32 | Moderate    | 3      |
| interest loan campaign for housing for the |          |      |             |        |
| elderly?                                   |          |      |             |        |
| 5. Do you need a place with a fully        | 3.33     | 0.22 | Moderate    | 1      |
| equipped medical facility?                 |          |      |             |        |
| Overall                                    | 3.17     | 0.50 | Moderate    |        |

As depicted in Table 4.5, the comprehensive analysis indicates that the needs associated with the housing aspect of the elderly welfare system were assessed at a moderate level (Mean = 3.17, Standard Deviation = 0.50). Upon closer examination of

individual needs, it becomes apparent that all aspects received moderate ratings. These encompass the necessity for a residence equipped with comprehensive medical facilities (Mean = 3.33, Standard Deviation = 0.22), the preference for residing in nursing homes if made available (Mean = 3.28, Standard Deviation = 0.31), the desire for the implementation of low-interest loan campaigns tailored for elderly housing (Mean = 3.24, Standard Deviation = 0.320, the advocacy for establishing nursing homes for the elderly at the sub-district level (Mean = 3.11, Standard Deviation = 0.47), and the call for governmental support in providing complimentary nursing homes as a form of welfare (Mean = 3.03, Standard Deviation = 0.52)

Table 4.6 Analysis on Mean and Standard Deviation Results of the Needs of Elderly Welfare System (Security Aspect)

| Needs of the Elderly Welfare System        | Opinion Level |      |         |        |
|--|---------------|------|---------|--------|
| (Security Aspect)                          | <u>x</u>      | S.D. | Comment | Number |
| 1. Do you want to have a provision of      | 4.13          | 0.34 | High    | 1      |
| safety and security management for the     |               |      |         |        |
| elderly in public building areas?          |               |      |         |        |
| 2. Do you want to see the provision of     | 4.02          | 0.45 | High    | 2      |
| help centers from government agencies      |               |      |         |        |
| and private sectors for the elderly that   |               |      |         |        |
| have been harmed and exploited             |               |      |         |        |
| illegally?                                 |               |      |         |        |
| 3. Do you want to have a provision of      | 3.98          | 0.59 | High    | 3      |
| on-site facilities in public areas such as |               |      |         |        |
| corridors and toilets?                     |               |      |         |        |
| 4. Do you want to receive the provision    | 3.81          | 0.33 | High    | 4      |
| of an ecosystem of health care             |               |      |         |        |
| treatments and services?                   |               |      |         |        |
| 5. Do you want to have a provision of an   | 3.75          | 0.65 | High    | 5      |
| elderly service in all communities?        |               |      |         |        |

| Needs of the Elderly Welfare System (Security Aspect) |          | Opir | nion Level |        |
|---|----------|------|------------|--------|
|   | <u>x</u> | S.D. | Comment    | Number |
| Overall   | 3.90     | 0.53 | High       |        |

Based on the data in Table 4.6, the overall analysis indicates that the requirements within the security aspect of the elderly welfare system were characterized by a high level of significance (Mean = 3.90, Standard Deviation = 0.53). A detailed examination of each specific need reveals that all aspects garnered high ratings. These include the desire for safety and security management provisions for the elderly within public buildings areas (Mean = 3.90, Standard Deviation = 0.53), the call for the establishment of help centers by both governmental agencies and private sectors to aid elderly individuals who have been subjected to abuse, exploitation or abandonment (Mean = 4.02, Standard Deviation = 0.45), the preference for on-site facilities organized within public areas such as corridors and toilets (Mean = 3.98, Standard Deviation = 0.59), the inclination towards receiving an ecosystem of healthcare treatments and services (Mean = 3.81, Standard Deviation = 0.33), and the desire for the provision of elderly services within all communities (Mean = 3.75, Standard Deviation = 0.65).

Part 3: Examination of the implementation of elderly welfare policy

This part of the study is the data analysis part on the needs of the elderly welfare system by using mean and standard deviation. The results are shown in Table 4.7 to Table 4.10.

Table 4.7 Analysis of Mean and Standard Deviation Results of Implementation of Elderly Welfare Policy (Overall)

| Implementation of Elderly        | Opinion Level |       |         |        |  |
|----------------------------------|---------------|-------|---------|--------|--|
| Welfare Policy (Overall)         | <u>x</u>      | S. D. | Comment | Number |  |
| 1. Determination of the welfare  | 3.92          | 0.55  | High    | 4      |  |
| system                           |               |       |         |        |  |
| 2. Promotion of community public | 3.94          | 0.56  | High    | 3      |  |
| policies                         |               |       |         |        |  |

| Implementation of Elderly      | Opinion Level |       |         |        |
|--------------------------------|---------------|-------|---------|--------|
| Welfare Policy (Overall)       | <u>x</u>      | S. D. | Comment | Number |
| 3. Implementing sustainability | 3.98          | 0.52  | High    | 1      |
| principles                     |               |       |         |        |
| 4. Financial/budget management | 3.97          | 0.53  | High    | 2      |
| process                        |               |       |         |        |
| Overall                        | 3.95          | 0.51  | High    |        |

As evidenced in Table 4.7, the analysis reveals that the execution of the elderly welfare policy, in its entirety, achieved a high level of effectiveness (Mean = 3.95, Standard Deviation = 0.51). A scrutiny of individual components demonstrates that each aspect received high ratings. These encompass the implementation of sustainability principles (Mean = 3.98, Standard Deviation = 0.52), the financial and budget management processes (Mean = 3.97, Standard Deviation = 0.53), the promotion of community public policies (Mean = 3.94, standard Deviation = 0.56), and the determination of welfare system (Mean = 3.92, Standard Deviation = 0.55).

Table 4.8 Analysis of Mean and Standard Deviation Results of the Implementation of Elderly Welfare Policy (Determination of the Welfare System)

| Implementation of the Elderly                        | Opinion Level |       |         | - / / / |
|--|---------------|-------|---------|---------|
| Welfare Policy (Determination of the Welfare System) | <u>x</u>      | S. D. | Comment | Number  |
| 1. Do you have a good understanding of               | 3.92          | 0.69  | High    | 2       |
| the allowance program?                               |               |       |         |         |
| 2. Do you have a plan to use the welfare             | 3.90          | 0.69  | High    | 3       |
| of the elderly?                                      |               |       |         |         |
| 3. Do you have the ability to manage a               | 3.94          | 0.70  | High    | 1       |
| good understanding of the welfare                    |               |       |         |         |
| system in all aspects?                               |               |       |         |         |

| Implementation of the Elderly                        | Opinion Level |       |         |        |  |
|--|---------------|-------|---------|--------|--|
| Welfare Policy (Determination of the Welfare System) | <u>x</u>      | S. D. | Comment | Number |  |
| 4. Do you agree with the long-term                   | 3.91          | 0.64  | High    | 4      |  |
| integration of the welfare program for               |               |       |         |        |  |
| the elderly?   |               |       |         |        |  |
| 5. Do you have an opinion on the                     | 3.90          | 0.69  | High    | 5      |  |
| promotion of the government in                       |               |       |         |        |  |
| promoting the new welfare of the                     |               |       |         |        |  |
| elderly?   |               |       |         |        |  |
| Overall  | 3.92          | 0.55  | High    |        |  |

According to the findings presented in Table 4.8, the assessment indicates that the implementation of the Elderly Welfare Policy, particularly concerning the determination of the welfare system, attained a high level of efficacy (Mean = 3.92, Standard Deviation = 0.55). Upon examining each specific need, it becomes apparent that all aspects received high ratings. These include the ability to comprehend the welfare system comprehensively (Mean = 3.94, Standard Deviation = 0.70), understanding of the allowance program (Mean = 3.92, standard deviation = 0.69), agreement with the long-term integration of elderly welfare programs (Mean = 3.91, Standard Deviation = 0.64), planning for the utilization of elderly welfare (Mean = 3.90, Standard Deviation = 0.69), and endorsement of the government's promotion of new elderly welfare initiatives (Mean = 3.90, Standard Deviation = 0.69) respectively.

Table 4.9 Analysis of Mean and Standard Deviation Results of Implementation of Elderly Welfare Policy (Promotion of Community Public Policies)

| Implementation of Elderly Welfare         | <b>Opinion Level</b> |       |         |        |  |
|---|----------------------|-------|---------|--------|--|
| <b>Policy (Promotion of Community</b>     |                      |       |         |        |  |
| <b>Public Policies</b> )                  | <u>x</u>             | S. D. | Comment | Number |  |
| 6. Have you learned about policy plans    | 3.92                 | 0.71  | High    | 2      |  |
| from community agencies to support the    |                      |       |         |        |  |
| elderly welfare project?                  |                      |       |         |        |  |
| 7. Do you receive any support from the    | 3.91                 | 0.72  | High    | 3      |  |
| community regarding flexibility of its    |                      |       |         |        |  |
| rules and regulations which gives you     |                      |       |         |        |  |
| utilization convenience?                  |                      |       |         |        |  |
| 8. Have you had an opportunity to express | 3.87                 | 0.65  | High    | 5      |  |
| your opinions about providing elderly     |                      |       |         |        |  |
| assistance?                               |                      |       |         |        |  |
| 9. Do you think that the network          | 3.89                 | 0.67  | High    | 4      |  |
| connections in welfare management can     |                      |       |         |        |  |
| be easily implemented, such as            |                      |       |         |        |  |
| disbursement of living expenses, etc.?    |                      |       |         |        |  |
| 10. Do you think that the management      | 4.00                 | 0.70  | High    | 1      |  |
| system in the community is modernized     |                      |       |         |        |  |
| and has established a good understanding  |                      |       |         |        |  |
| of the community which finally            |                      |       |         |        |  |
| strengthens the ecosystem of utilization? |                      |       |         |        |  |
| Overall                                   | 3.94                 | 0.56  | High    |        |  |

Based on the finding presented in Table 4.9, the evaluation indicates that the implementation of the elderly welfare policy, specifically focusing on the promotion of community public policies, achieved a high level of effectiveness (Mean = 3.94, Standard Deviation = 0.56). Upon analyzing each specific need, it id evident that all aspects received high ratings. These include the perception of the modernization and

comprehensive understanding of the community management system, ultimately reinforcing the economy of utilization (Mean = 4.00, Standard Deviation 0.70), awareness of policy plans from community agencies to support elderly welfare projects (Mean = 3.92, Standard Deviation = 0.71), receipt of support from the community regarding flexibility in rules and regulations, enhancing utilization convenience (Mean = 3.91, Standard Deviation = 0.72), belief in the ease of implementation of network connections in welfare management, such as the disbursement of living expenses (Mean = 3.89, Standard Deviation = 0.67), and opportunities for expressing opinions about providing elderly assistance (Mean = 3.87, Standard Deviation = 0.65).

Table 4.10 Analysis of Mean and Standard Deviation Results of Implementation of Elderly Welfare Policy (Implementation of Sustainability)

| Implementation of Elderly                         |          | Ol    | oinion Level |        |
|---|----------|-------|--------------|--------|
| Welfare Policy (Implementation of Sustainability) | <u>x</u> | S. D. | Comment      | Number |
| 11. Do you think that the social                  | 3.88     | 0.71  | High         | 4      |
| aspects of the elderly population can             |          |       |              |        |
| be improved in terms of future well-              |          |       |              |        |
| being through the help of agencies?               |          |       |              |        |
| 12. Do you think that the policy plan             | 3.84     | 0.65  | High         | 5      |
| to develop the welfare system                     |          |       |              |        |
| strengthens the community and the                 |          |       |              |        |
| elderly group?                                    |          |       |              |        |
| 13. Do you think that receiving                   | 4.01     | 0.72  | High         | 2      |
| cooperation from external networks                |          |       |              |        |
| in organizing a welfare system truly              |          |       |              |        |
| helps the elderly group?                          |          |       |              |        |
| 14. Do you think that the welfare                 | 3.92     | 0.68  | High         | 3      |
| promotion process should be                       |          |       |              |        |
| organized in a modern way for                     |          |       |              |        |

| Implementation of Elderly                                | Opinion Level |       |         |        |  |  |
|--|---------------|-------|---------|--------|--|--|
| Welfare Policy (Implementation of Sustainability)        | <u>x</u>      | S. D. | Comment | Number |  |  |
| stability and with the same approach                     |               |       |         |        |  |  |
| in every project?  |               |       |         |        |  |  |
| 15. Do you think government                              | 4.01          | 0.68  | High    | 1      |  |  |
| agencies should allocate protection rights continuously? |               |       |         |        |  |  |
| Overall  | 3.98          | 0.52  | High    |        |  |  |

According to the findings presented in Table 4.10, the implementation of policies aimed at enhancing the welfare of the elderly, employing sustainable principles, exhibited a high level of efficacy (Mean 3.98, Standard Deviation = 0.52). Upon analyzing individual statements, it is evident that there was a substantial agreement across all aspects. Participants strongly endorsed the notion that government agencies should consistently allocate various forms of protection rights, which garnered significant consensus (Mean = 3.98, Standard Deviation = 0.52). Additionally, participants emphasized the critical importance of receiving cooperation from external networks to orchestrate a welfare system that genuinely benefits the elderly, indicating a high level of agreement (Mean = 4.01, Standard Deviation = 0.72). Furthermore, participants highly supported the establishment of modern management processes to promote welfare consistently across all projects, reflecting a shared perspective (Mean = 3.92, Standard Deviation = 0.68). They also expressed confidence that the social aspects of the elderly could be enhanced in the future through assistance from relevant organizations, with a notable level of agreement (Mean = 3.88, Standard Deviation = 0.71). Finally, there was substantial agreement regarding the plan for policy development aimed at fostering a resilient community and providing support for the elderly (Mean = 3.84, Standard Deviation = 0.65).

Table 4.11 Analysis of Mean and Standard Deviation Results of Implementation of Elderly Welfare Policy (Financial/ Budget Management)

| Implementation of Elderly Welfare  | Opinion Level |       |         |        |  |
|--|---------------|-------|---------|--------|--|
| Policy (Financial/Budget Management)   | <u>x</u>      | S. D. | Comment | Number |  |
| 16. Do you think that the budget for elderly care should be allocated in                         | 4.06          | 0.68  | High    | 1      |  |
| accordance with the welfare program?   |               |       |         |        |  |
| 17. Do you think there should be an  | 3.87          | 0.63  | High    | 4      |  |
| allocation of income upon old age that is suitable for the target group?                         |               |       |         |        |  |
| 18. Do you think there should be a   | 3.92          | 0.72  | High    | 3      |  |
| plan for a fund system with distributions according to the specified objectives for examination? |               |       |         |        |  |
| 19. Do you think that the community welfare savings system can create stability for the elderly? | 3.95          | 0.72  | High    | 2      |  |
| 20. Do you think that the integrated plan of government agencies can                             | 3.86          | 0.76  | High    | 5      |  |
| manage and allocate the budget thoroughly?   |               |       |         |        |  |
| Overall  | 3.97          | 0.53  | High    |        |  |

According to the data provided in Table 4.11, there was a notable level of implementation (Mean = 3.97, Standard Deviation = 0.53) of policies concerning the welfare of the elderly, particularly focusing on financial management and budgeting. Upon examining each individual aspect, it became evident that there was strong consensus across all domains. Participants strongly advocated for aligning budget allocations for elderly care with welfare projects (Mean = 4.06, Standard Deviation

0.68). Furthermore, they expressed belief in the stability provided to the elderly through community welfare saving systems (mean = 3.95, Standard Deviation = 0.72). Participants also emphasized the importance of implementing a transparent and verifiable system, for fund allocation (Mean = 3.92, Standard Deviation = 0.72) Additionally, they asserted that appropriate income distribution should be tailored to the needs of the target group (Mean = 3.87, Standard Deviation = 0.63) and highlighted the efficiency of government agencies' comprehensive plans in managing and allocating expenses (Mean = 3.86, Standard Deviation = 0.76).

Step 2 The process for creating an evaluation framework to assess the success of implementing policies for the elderly welfare system in the northeastern region of Thailand

The researcher employed a quantitative analysis methodology, surveying a sample group of 400 individuals within the region. Subsequently, data obtained from a core group of ten individuals, assessed through quality analysis tools, underwent examination for the purpose of conducting a Multi-Attribute Consensus Reaching (MACR) meeting. This methodology, a form of group discussion, was utilized to foster discourse, exchange viewpoints, propose suggestions, and delve into pertinent topics and issues comprehensively.

The MACR technique was implemented to elicit feedback from a select group of ten individuals with distinguished qualifications, chosen by the researcher, spanning national, district, and sub-district levels. Through structured discussions and the exchange of perspectives, participants provided insights and recommendations pertaining to relevant items and issues. Subsequently, the researcher analyzed the outcomes derived from these discussions to fulfill her researcher objectives, which primarily involved evaluating the efficacy of policy implementation concerning elderly welfare within the northeastern region of Thailand.

1) The study was conducted to analyze the success factors of implementing policies for the welfare system of elderly people in the northeastern region of Thailand.

In assessing the effectiveness of implementing welfare policies for the elderly in the northeastern region of Thailand, the researcher employed the Balanced Scorecard (BSC) approach, as previously noted. This methodology encompasses four distinct perspectives: the financial perspective, the customer perspective, the internal business

process perspective, and the learning and growth perspective. The study aimed to establish Key Performance Indicators (KPIs) for each perspective to gauge the success of policy implementation.

In the evaluation process within the sustainable development framework for the elderly welfare system, in the northeastern region of Thailand, the government organization utilized the balanced scorecard evaluation framework. This framework comprises four dimensions or perspectives, as follows:

- (1) Perspective on effectiveness: this dimension centers on assessing key strategies and evaluating performance, with a specific focus on the implementation of policies aimed at enhancing the welfare system for the elderly in the northern region of Thailand.
- (2) Perspective on service quality: this dimension emphasizes the evaluation key strategies and performance indicators, particularly in relation to enhancing the quality of services provided within the elderly welfare system in the northeast region.
- (3) Perspective on efficiency: this dimension concentrates on ensuring the effective utilization of allocated budgets, timely reporting, and efficient project management practices within the elderly welfare system.
- (4) Perspective on organizational development: this dimension is dedicated to fostering the growth and development of personnel within the welfare organization, focusing on enhancing their capabilities and skills to better serve the elderly population in the northeastern region.

Table 4.12 Assessment Items and Number of Indicators for Evaluating the
Implementation Policy of Welfare System for Elderly Under
Sustainability Principles in the Northeast of Thailand (Dimension 1:
Effectiveness)

N = 400

| TIMES!   | Total Number of Indicator |       |         |     |
|--|---------------------------|-------|---------|-----|
| <b>Assessment Items Indicators</b>               | Weight                    | Score | Average | No. |
|  | Value                     |       |         |     |
| 1. The degree of success in driving the          | 100                       | 98    | 0.92    | 1   |
| eligibility notification system and assisting    |                           |       |         |     |
| people in obtaining welfare over the course      |                           |       |         |     |
| of their lives                                   |                           |       |         |     |
| 2. Level of success in helping the project       | 100                       | 32    | 0.11    | 23  |
| target population improve the quality of life    |                           |       |         |     |
| of vulnerable groups and individual              |                           |       |         |     |
| households                                       |                           |       |         |     |
| 3. The level of success in developing a data     | 100                       | 56    | 0.34    | 12  |
| accounting system (data catalog) leading to      |                           |       |         |     |
| the disclosure of government data (open          |                           |       |         |     |
| data)  |                           |       |         |     |
| 4. Level of success in preparing the 5-year      | 100                       | 43    | 0.33    | 21  |
| government action plan (2023-2027) of            |                           |       |         |     |
| Department of Older Persons                      |                           |       |         |     |
| 5. The level of success in monitoring and        | 100                       | 76    | 0.76    | 6   |
| evaluating the integrated plan to prepare for    |                           |       |         |     |
| the aging society, B.E.2017-2022                 |                           |       |         |     |
| 6. The degree of success in driving the          | 100                       | 54    | 0.34    | 13  |
| eligibility notification system and assisting in |                           |       |         |     |
| obtaining public welfare throughout life         |                           |       |         |     |
| 7. Level of success in assisting the project's   | 100                       | 61    | 0.32    | 14  |
| target demographic to enhance the quality of     |                           |       |         |     |
|  |                           |       |         |     |

|  | Total Number of Indicator |       |         |     |
|--|---------------------------|-------|---------|-----|
| <b>Assessment Items Indicators</b>             | Weight                    | Score | Average | No. |
|  | Value                     |       |         |     |
| life for vulnerable groups and individual      |                           |       |         |     |
| households                                     |                           |       |         |     |
| 8. Level of success in development of human    | 100                       | 65    | 0.43    | 11  |
| resources, particularly on Social              |                           |       |         |     |
| Development and Security Volunteers who        |                           |       |         |     |
| specialize in caring of elderly                |                           |       |         |     |
| 9. The number of the elderly that receive      | 100                       | 52    | 0.22    | 17  |
| welfare from the Social Welfare                |                           |       |         |     |
| Development Center                             |                           |       |         |     |
| 10. The success level of good corporate        | 100                       | 87    | 0.86    | 4   |
| governance policy formulation                  |                           |       |         |     |
| 11. The level of success of the                | 100                       | 45    | 0.43    | 19  |
| implementation of the internal control         |                           |       |         |     |
| evaluation monitoring plan                     |                           |       |         |     |
| 12. Evaluation of government agency            | 100                       | 33    | 0.22    | 22  |
| success levels based on measures aimed at      |                           |       |         |     |
| enhancing the efficiency of government         |                           |       |         |     |
| operation for fiscal year 2022                 |                           |       |         |     |
| 13. The level of success in helping the target | 100                       | 46    | 0.45    | 18  |
| population, particularly fragile households,   |                           |       |         |     |
| in development of quality of life within the   |                           |       |         |     |
| framework of group-based development           |                           |       |         |     |
| project  |                           |       |         |     |
| 14. Percentage of success achieved by the      | 100                       | 54    | 0.53    | 16  |
| Quality-of-Life Development and Career         |                           |       |         |     |
| Promotion Center for the elderly in            |                           |       |         |     |
| enhancing good life for elderly individuals    |                           |       |         |     |
|  |                           |       |         |     |

|  | Total Number of Indicat |       |         | ors |  |
|--|-------------------------|-------|---------|-----|--|
| <b>Assessment Items Indicators</b>               | Weight                  | Score | Average | No. |  |
|  | Value                   |       |         |     |  |
| 15. Percentage of the elderly and people of      | 100                     | 23    | 0.21    | 25  |  |
| all ages that participated in activities to pass |                         |       |         |     |  |
| on wisdom  |                         |       |         |     |  |
| 16. The level of success in creating             | 100                     | 65    | 0.65    | 10  |  |
| knowledge and understanding to prepare for       |                         |       |         |     |  |
| aging  |                         |       |         |     |  |
| 17. Percentage of implementation of the          | 100                     | 67    | 0.58    | 9   |  |
| internal audit plan fiscal year 2022             |                         |       |         |     |  |
| 18. Success percentage of internal audit         | 100                     | 87    | 0.87    | 2   |  |
| report preparation fiscal year 2022              |                         |       |         |     |  |
| 19. Percentage of audited units that have        | 100                     | 32    | 0.44    | 24  |  |
| provided documented evidence to elucidate        |                         |       |         |     |  |
| the outcomes of implementing                     |                         |       |         |     |  |
| recommendations proposed by the internal         |                         |       |         |     |  |
| audit group                                      |                         |       |         |     |  |
| 20. Level of success in driving the              | 100                     | 67    | 0.65    | 8   |  |
| notification system, rights and assistance in    |                         |       |         |     |  |
| obtaining people's welfare throughout life       |                         |       |         |     |  |
| 21. The level of success in developing a data    | 100                     | 87    | 0.73    | 3   |  |
| accounting system (data catalog) leading to      |                         |       |         |     |  |
| the disclosure of government data (open          |                         |       |         |     |  |
| data)  |                         |       |         |     |  |
| 22. The level of success of the outstanding      | 100                     | 43    | 0.44    | 20  |  |
| debt collection of the local elderly fund        |                         |       |         |     |  |
| 23. Level of success in helping the              | 100                     | 56    | 0.56    | 15  |  |
| population target groups according to the        |                         |       |         |     |  |
| group quality of life development project        |                         |       |         |     |  |
| fragile household                                |                         |       |         |     |  |
| Č  |                         |       |         |     |  |

|   | <b>Total Number of Indicators</b> |       |         |     |  |
|---|-----------------------------------|-------|---------|-----|--|
| <b>Assessment Items Indicators</b>            | Weight                            | Score | Average | No. |  |
|   | Value                             |       |         |     |  |
| 24. Percentage of success in training for the | 100                               | 71    | 0.42    | 7   |  |
| elderly                                       |                                   |       |         |     |  |
| 25. Percent of success in promoting learning  | 100                               | 82    | 0.33    | 5   |  |

According to Table 4.12, the assessment and number of indicators for evaluating the implementation of sustainable policies concerning the welfare of the elderly in the northeastern region of Thailand (Dimension 1-Effectiveness) revealed several noteworthy findings: the highest level of success was observed in driving the notification system and providing assistance in accessing welfare benefits for individuals throughout their lifetime, with a score of 98 and an average of 0.92. Following closely, the internal audit report preparation for the fiscal year 2022 attained the second-highest score of 87, with an average of 0.87. Similarly, the development of a Data Catalog system to facilitate the release of government data (Open Data) and the establishment of policies for good governance of organizations both received a score of 87, with respective average of 0.7 and 0.86. Conversely, the success levels for promoting learning, monitoring and evaluating the preparedness plan for elderly social support, and training the elderly demonstrated relatively lower scores ranging from 82 to 71, with corresponding averages ranging from 0.33 to 0.76. Notably, projects aimed at improving the quality of life for vulnerable households, specifically under the Center for Quality of Life and Elderly Employment Promotion (COPE), received a satisfactory score of 54, with an average of 0.53. Conversely, activities such as following up on overdue debts of the elderly fund in the area, evaluating the performance of government agencies, and aiding targeted populations through quality of life improvement projects exhibited comparatively lower success rates, with scores ranging from 43 to 23 and average values ranging from 0.11 to 0.44.

These results provide valuable insights into effectiveness of implementing policies for elderly welfare in the northeastern region of Thailand and highlight areas of strength as well as opportunities for improvement.

Table 4.13 Assessment Items and Number of Indicators for Evaluating
Implementation Policy of Welfare System for the Elderly Under
Sustainability Principles in the Northeast of Thailand (Dimension 2:
Service Quality)

|   | Total Number of Indicators |       |         |     |  |
|---|----------------------------|-------|---------|-----|--|
| Assessment Item Indicators                      | Weight<br>Value            | Score | Average | No. |  |
| 1. Percentage of success in providing           | 100                        | 73    | 0.23    | 5   |  |
| services and clarifying documents in            |                            |       |         |     |  |
| sequence  |                            |       |         |     |  |
| 2. Success of the policy framework has an       | 100                        | 66    | 0.62    | 8   |  |
| effect on the service to improve the quality    |                            |       |         |     |  |
| of life of the elderly at a high level.         |                            |       |         |     |  |
| 3. The percentage of success of the main        | 100                        | 51    | 0.15    | 10  |  |
| goal (GOAL) is "the elderly are healthy, are    |                            |       |         |     |  |
| able to take care of themselves, and have a     |                            |       |         |     |  |
| good quality of life."                          |                            |       |         |     |  |
| 4. Percentage of success of people with         | 100                        | 83    | 0.34    | 1   |  |
| accessibility to information on health          |                            |       |         |     |  |
| system  |                            |       |         |     |  |
| 5. Accomplishments in the field include         | 100                        | 54    | 0.33    | 9   |  |
| initiatives such as deploying caregivers to     |                            |       |         |     |  |
| provide in-home care for elderly individual     |                            |       |         |     |  |
| 6. Percentage of management system              | 100                        | 81    | 0.45    | 2   |  |
| implementation for elderly care such as the     |                            |       |         |     |  |
| utilization of care managers/ caregivers        |                            |       |         |     |  |
| 7. Success of health system working group       | 100                        | 69    | 0.67    | 6   |  |
| both central and health district in the elderly |                            |       |         |     |  |
| age group                                       |                            |       |         |     |  |
| 8. Percentage of the elderly that are           | 100                        | 77    | 0.45    | 4   |  |
| satisfied with the emergency home service       | 100                        | 77    | 0.45    | 4   |  |

|  | <b>Total Number of Indicators</b> |       |         |     |  |
|--|-----------------------------------|-------|---------|-----|--|
| <b>Assessment Item Indicators</b>            | Weight                            | Score | Average | No. |  |
|  | Value                             |       |         |     |  |
| 9. Percentage of government agencies that    | 100                               | 44    | 0.62    | 12  |  |
| have updated their operating manuals         |                                   |       |         |     |  |
| through their websites to keep them up to    |                                   |       |         |     |  |
| date on the elderly welfare movement         |                                   |       |         |     |  |
| 10. The number of areas that have care and   | 100                               | 45    | 0.43    | 11  |  |
| protection systems to protect the rights of  |                                   |       |         |     |  |
| the elderly                                  |                                   |       |         |     |  |
| 11. There is an online system for borrowing  | 100                               | 67    | 0.54    | 7   |  |
| funds from the old age fund.                 |                                   |       |         |     |  |
| 12. The degree of success in driving the     | 100                               | 78    | 0.57    | 3   |  |
| system to notify people of their rights and  |                                   |       |         |     |  |
| to assist them in receiving welfare over the |                                   |       |         |     |  |
| course of their lives                        |                                   |       |         |     |  |

In Table 4.13, the evaluation outcomes and number of indicators for assessing the implementation of sustainable principles in the elderly welfare system in the northeastern region of Thailand (Dimension 2: Quality of Service Provision) are highlighted:

The highest score was recorded for public satisfaction with the system's accessibility to health information via easily accessible technology, such as the Department of Health's website, with a score of 83 and an average of 0.34.

Following closely, the management system for the elderly, including care managers or care givers, achieved the second-highest score percentage of 81, with an average score of 0.45.

The success rate in driving the notification and assistance system for the public to receive benefits throughout their lives garnered a score of 78, with an average score of 0.57.

The percentage of satisfied elderly individuals with emergency housing services attained a score of 77, with an average of 0.45.

The success rate in providing services and explaining documents sequentially received a score of 73, with an average score of 0.23.

The success rate of the health system team, both central and regional, for the elderly group achieved a score of 69, with an average score of 0.67.

The online loan fund system for the elderly's occupation scored 67, with an average score of 0.54.

The success rate of operational plan framework, which significantly impacts the provision of services to enhance the quality of life for the elderly, garnered a high level of success with a score of 66 and an average score of 0.62.

The success rate in announcing the Ministry of Public Health's support, such as sending individuals to talk care of the elderly at home, received a score of 54, with an average score of 0.33.

The success rate of primary target (GOAL), focusing on "Elderly people's health and well-being are improved and sustained," obtained a score of 51, with an average value of 0.15.

In terms of number of areas with systems in place to care for and protect the rights of the elderly, this initiative scored 45, with an average value of 0.43.

The indicator with the lowest score was the percentage of government agencies that updated their operating manuals through their website to align with changes in elderly welfare policies, which scored 44, with an average value of 0.62.

Table 4.14 Assessment Items and Number of Indicators for Evaluating
Implementation Policy of Welfare System for the Elderly Under
Sustainability Principles in the Northeast of Thailand (Dimension 3:
Efficiency)

|  | Total Number of Indicators |       |         |     |  |
|--|----------------------------|-------|---------|-----|--|
| <b>Assessment Items Indicators</b>     | Weight                     | Score | Average | No. |  |
|  | Value                      |       |         |     |  |
| 1. Weighted average percentage of      | 100                        | 77    | 0.42    | 4   |  |
| achievement of planned performance and |                            |       |         |     |  |
| expenditure on elderly welfare         |                            |       |         |     |  |

| Assessment Items Indicators                    | <b>Total Number of Indicators</b> |       |         |     |
|--|-----------------------------------|-------|---------|-----|
|  | Weight                            | Score | Average | No. |
|  | Value                             |       |         |     |
| 2. Success in the development of elderly       | 100                               | 72    | 0.44    | 5   |
| welfare in promoting local authorities to      |                                   |       |         |     |
| organize a long-term care system for the       |                                   |       |         |     |
| elderly in the community                       |                                   |       |         |     |
| 3. Set policies and guidelines / measures for  | 100                               | 85    | 0.52    | 2   |
| creating and expanding opportunities for       |                                   |       |         |     |
| accessing basic social security for the        |                                   |       |         |     |
| elderly.                                       |                                   |       |         |     |
| 4. Number of social welfare development        | 100                               | 54    | 0.61    | 9   |
| centers that have created happiness and        |                                   |       |         |     |
| learning corners to add knowledge and          |                                   |       |         |     |
| prepare before aging                           |                                   |       |         |     |
| 5. Training to enhance the potential of        | 100                               | 81    | 0.37    | 3   |
| community power weavers for driving            |                                   |       |         |     |
| elderly social movements (NSOs) in on-site     |                                   |       |         |     |
| or online formats                              |                                   |       |         |     |
| 6. Developing the potential of the elderly in  | 100                               | 69    | 0.66    | 7   |
| the community (quality of life and career      |                                   |       |         |     |
| promotion for the elderly without asking for   |                                   |       |         |     |
| a greater budget)                              |                                   |       |         |     |
| 7. Percentage of families that pass the strong | 100                               | 66    | 0.53    | 8   |
| family standard                                |                                   |       |         |     |
| 8. Success with sufficient budget and the      | 100                               | 70    | 0.41    | 6   |
| ability to build a foundation for the end of   |                                   |       |         |     |
| life   |                                   |       |         |     |
| 9. Percentage of work success of the elderly   | 100                               | 47    | 0.44    | 10  |
| that can make a living                         |                                   |       |         |     |

|  | <b>Total Number of Indicators</b> |       |         |     |
|--|-----------------------------------|-------|---------|-----|
| <b>Assessment Items Indicators</b>             | Weight                            | Score | Average | No. |
|  | Value                             |       |         |     |
| 10. Success in developing international        | 100                               | 89    | 0.34    | 1   |
| policy plans and sustainability in the quality |                                   |       |         |     |
| of life of the elderly                         |                                   |       |         |     |

According to Table 4.14, the evaluation of key performance indicators in implementing sustainable policies for elderly welfare in the northeastern region of Thailand (Dimension 3: Efficiency perspective) revealed several significant findings: the highest score was achieved in the success of developing policies aligned with international standards and sustainability to enhance the quality of life for the elderly, scoring 89 with an average value 0.34. Following closely, policies and guidelines aimed at creating and expanding access to basic social security for the elderly garnered a score of 85, with an average value of 0.52. Training initiatives aimed at empowering community leaders to drive social movements focused on elderly welfare, whether through on-site or online formats, received a score of 81, with an average value of 0.37. The effectiveness of work performance achievement, as per the planned expenses in the field of elderly welfare, averaged at 77, with an average value of 0.42. Success in developing welfare programs for the elderly to promote long-term care systems within the community attained a score of 72, with an average value of 0.44. Adequacy in estimating budgets and establishing foundations for end-of-life care received a score of 70, with an average value of 0.41. Initiatives focused on developing the potential of elderly individuals within the community, such as the establishment of centers for enhancing quality of life and career promotion without additional budget allocation from the Department of Local Administration, scored 69, with an average value of 0.66. The percentage of families meeting strong family standards reached 66, with an average value of 0.53. Social welfare development centers that established corners for happiness and learning, preparing for old age, received a score of 54, with an average value of 0.61. Conversely, the percentage of successful employment among the elderly population capable of self-sustainment scored 47, with an average value of 0.44. These findings shed light on the efficiency of initiatives aimed at enhancing elderly welfare

in the northeastern region of Thailand, highlighting areas of success and areas for potential improvement.

Table 4.15 Assessment Items and Number of Indicators for Evaluating
Implementation Policy of Welfare System for the Elderly Under
Sustainability Principles in the Northeast of Thailand (Dimension 4:
Organization Development)

| Assessment Items Indicators                    | Total Number of Indicators |       |         |     |
|--|----------------------------|-------|---------|-----|
|  | Weight                     | Score | Average | No. |
|  | Value                      |       |         |     |
| 1. There is a process of selection,            | 100                        | 83    | 0.52    | 2   |
| commendation, and honor. The prototype         |                            |       |         |     |
| of the elderly, the model of the elderly club, |                            |       |         |     |
| the LTC sub-district.                          |                            |       |         |     |
| 2. Prepare the support system and people to    | 100                        | 64    | 0.68    | 6   |
| enter the aging society.                       |                            |       |         |     |
| 3. Social safety net by privatizing various    | 100                        | 55    | 0.44    | 9   |
| welfare under the responsibility of the        |                            |       |         |     |
| private and community sectors                  |                            |       |         |     |
| 4. Survey and collect health conditions and    | 100                        | 44    | 0.31    | 11  |
| desirable health behaviors of the elderly      |                            |       |         |     |
| through the screening of leaders and sub-      |                            |       |         |     |
| agencies in the community.                     |                            |       |         |     |
| 5. Evaluate the performance of sleep           | 100                        | 88    | 0.26    | 1   |
| promotion and brain exercise with anti-        |                            |       |         |     |
| aging nutrition                                |                            |       |         |     |
| 6. Percentage of success in personnel          | 100                        | 60    | 0.46    | 7   |
| development to understand the condition of     |                            |       |         |     |
| the elderly and management                     |                            |       |         |     |

|   | Total Number of Indicators |       |         |     |
|---|----------------------------|-------|---------|-----|
| <b>Assessment Items Indicators</b>            | Weight                     | Score | Average | No. |
|   | Value                      |       |         |     |
| 7. There is a welfare management process      | 100                        | 57    | 0.52    | 8   |
| in all aspects with speed and that meets the  |                            |       |         |     |
| main objectives of the policy plan.           |                            |       |         |     |
| 8. Relevant agencies can integrate areas of   | 100                        | 71    | 0.58    | 5   |
| the elderly to create both physical and       |                            |       |         |     |
| mental stability.                             |                            |       |         |     |
| 9. Analyze and estimate the expenditure on    | 100                        | 48    | 0.23    | 10  |
| social welfare of the public sector over the  |                            |       |         |     |
| next 20 years (2014-2033) that will be        |                            |       |         |     |
| affected by entering the aging society and    |                            |       |         |     |
| suggest ways to improve and organize the      |                            |       |         |     |
| social welfare system of the public sector as |                            |       |         |     |
| a whole for maximum efficiency                |                            |       |         |     |
| 10. Groups that can still help themselves by  | 100                        | 82    | 0.63    | 3   |
| focusing on health promotion and disease      |                            |       |         |     |
| prevention so elderly can maintain good       |                            |       |         |     |
| health for as long as possible for the group; |                            |       |         |     |
| elderly people that are in poor health and    |                            |       |         |     |
| need assistance in nursing care will focus    |                            |       |         |     |
| on nursing care. Nursing care at the health   |                            |       |         |     |
| facility or hospital near the home first and  |                            |       |         |     |
| may be required to use a higher level of      |                            |       |         |     |
| nursing home.                                 |                            |       |         |     |
| 11. The organization has learned all aspects  | 100                        | 77    | 0.41    | 4   |
| within the electronic service center.         |                            |       |         |     |

According to Table 4.15, the evaluation of key performance indicators in implementing sustainable welfare policies for the elderly in the northeast of Thailand (Dimension 4: Organizational Development Perspective) revealed several significant

findings: This highest-scoring area pertained to the assessment of programs promoting sleep and brain exercises, as well as nutrition delay, and the formulation of policy proposals and standards, scoring 88 with an average of 0.26. Following closely, the selection process, recognition, and commendation of exemplary elderly individuals, including model elderly clubs and exemplary individuals in long-term care (LTC) subdistricts, scored 83 with an average of 0.52. Focus on enhancing health and disease prevention for elderly individuals capable of self-care, as well as access to appropriate medical care for those in poor health, scored 82 with an average of 0.63. All units within the electronic service center demonstrating learning across various domains scored 77 with an average of 0.41. Units integration elderly-related initiatives to ensure physical and mental stability received a score of 71 with an average of 0.58. Preparedness for the elderly support system and the integration of individuals into elderly society scored 64 with an average of 0.68. The lowest-scoring indicator pertained to the percentages of successful development od personnel to comprehend the situation of the elderly and their management, scoring 60 with an average value of 0.46, ranking last among all indicators.

These findings underscore the importance of organizational development initiatives in enhancing elderly welfare in the northeastern region of Thailand. Additionally, the utilization of Multi-Attribute Consensus Reaching (MACR) methodology with 10 main respondents facilitated comprehensive data exploration and analysis, allowing for expert insights, suggestions, and in-depth examination of relevant issues.

2) Qualitative analysis of the interviewing data of the implementation policy of the welfare system for the elderly into operation under the principle of sustainability in the northeast region of Thailand

What do you think of the current system for managing social welfare benefits for the elderly, given the following situation?

In 2021, the demographic landscape of Thailand comprised approximately 66.7 million individuals. The demographic shift towards an aging population has been marked by a substantial increase, reaching 12.5 million individuals, with a continuing upward trajectory. Concurrently, global dynamics influences by economic expansion, technological advancements, and various industrial developments have reverberated

throughout societies worldwide. Thailand, likewise, has undergone adaptation to evolving lifestyles, precipitating shifts in human behaviors that have ramifications for both the quality of life and public health, resulting in diminished physical and mental well-being. The transition to an aging society presents a formidable challenge in the realms of economic and social advancement.

Addressing the imperative of an aging society stands as a paramount national agenda. The ongoing implementation of the action plan on the elderly (2002-2022) underscores the necessity for Thai society to navigate the transition comprehensively by the year 2021. Evaluation od the action plan reveals areas necessitating refinement, particularly concerning the preparation of the populace for dignified aging, the promotion and enhancement of elderly care, and the fortification of social safeguards for the elderly demographic. (Contributor 1)

Amidst the rapid and pronounced transitions toward the realization of a fully aged society, the labor force confronts escalating challenges characterized by heightened costs or scarcities, prompting a heightened reliance an mechanization and technological integration. Concurrently, households harboring elderly members grapple with heightened financial constraints, necessitating augmented saving due to diminished retirement income, consequently dampening prospects for future expenditure. As the burden of responsibility intensifies for workers, expenditure escalates while savings dwindle. Urgent governmental intervention is imperative to bolster social welfare expenditure, particularly in safeguarding the health of the elderly, albeit at the expense of diminished national investment and savings. The burgeoning elderly demographic exerts downward pressure on Gross National Product and individual income, alongside diminishing the quality of production. (Contributor 2)

In 2019, Thailand experienced a significant decline in its birth rate, recording a mere 610,000 births, juxtaposed against a noteworthy surge in the elderly population aged 80 and above, marking an increase of 1.3 million individuals, with this trend showing persistent momentum. This demographic shift underscores the imperative of directing heightened attention towards this age cohort.

Research analysis forecasts that by 2023, Thailand will attain the status of a "super-aging society," wherein individuals aged 60 and above are anticipated to constitute 28 percent of the total populace. This impending demographic transformation

portends significant repercussions, particularly for the working-age populace, who will assume augmented responsibilities in providing care of the elderly. Presently, Thailand grapples with a workforce-to-elderly-to-child ratio of 4:1:1, a figure projected to diminish to 2:1:1 by 2036. Such demographic dynamics threatens to impinge upon the financial security and quality of life of the elderly populace. The burgeoning aging demographic in Thailand precipitates the risk of labor shortages and economic upheavals, while simultaneously straining the government's social welfare infrastructure. In response, advocating for "active aging" – a paradigm emphasizing the promotion of good health, financial stability, social engagement, and productivity among the elderly-stands as a viable strategy to integrate them into the work force, bolster economic contributions, and mitigate reliance on government assistance.

Presently, Thailand has instituted policies and initiatives aimed at fostering employment opportunities for senior citizens. The Ministry of Labor has formulated guidelines mandating employers who engage workers aged 60 and above to adhere to specific provisions, including a minimum hourly wage of 45 baht, a maximum daily work duration of seven hours, and ensuring safe working environments conducive to the health of senior employees. Furthermore, employers who enlist workers above the age of 60 may qualify for tax incentives. Private enterprises embracing policies for hiring senior workers are obliged to tailor job roles and durations to suit their capabilities and needs.

#### 1) Public Welfare Planning and Policy for Elderly

Following extensive research, it is the contention of the present author that comprehensive measures are in place to safeguard, advance, and sustain the elderly through a multifaceted approach. This encompasses facilitating accessible medical services, fostering opportunities for religious education, career enhancement, and social engagement. Moreover, direct support is extended through the provision of amenities in public infrastructure, transportation, and various other public services. Legal aid and counseling services are made available to elderly individuals who fall victim to abuse or neglect. Additionally, a spectrum of services spanning family assistance, housing provisions, nutrition support, provision of essentials such as blankets, and livelihood assistance, including traditional funeral services, are offered. Tax incentives are provided to individuals contributing financially or through asset donations to funds

dedicated to elderly care, as well as for the establishment of support funds catering to seniors with insufficient means to sustain themselves. (Contributor 3)

The establishment of robust social welfare mechanisms targeting elderly welfare id paramount in fostering an enhanced quality of life for this demographic cohort. Thus, the formulation od comprehensive social welfare initiatives addressing the diverse spectrum of elderly needs is imperative, enabling their integration within familial and societal contexts, thereby ensuring their contentment and well-being. (Contributor 4)

In the northeastern region of Thailand, a prevailing demographic trend reveals a significant number of elderly individuals residing in solitude, bereft of substantial familial support from offspring or grandchildren. This phenomenon is particularly pronounced in rural locales, where economic and social constraints impel working-age individuals to migrate to urban centers in pursuits of employment opportunities. Moreover, spouses are compelled to engage in livelihood activities, be it agricultural pursuits or seeking employment in distant locales, to sustain their families. Consequently, the elderly find themselves assuming caretaking duties for grandchildren instead of receiving reciprocal care. In instances where parents fail to provide financial sustenance or maintain regular contact, elderly individuals shoulder the responsibility of family support, a phenomenon witnessing rise in prevalence. (Contributor 5)

## 2) Policies and Plans Pertaining to the Elderly

Historically, governmental policies directed towards the elderly have been primarily centered on the establishment of welfare systems aimed at mitigating associated challenges. Initiatives have been undertaken to foster the proliferation of elderly clubs across various provinces, exemplified by the inception of institutions such as the Thai National Association of Senior Citizen. Complementary efforts encompass the provision of healthcare assistance tailored to the needs of the elderly, the orchestration of educational initiatives targeting seniors, and the cultivation of a societal ethos that esteems and venerates the elderly demographic.

Consequently, successive administrations have underscored the paramountcy of the elderly populace and strived to ameliorate their quality of life through a spectrum of interventions. These encompass the provision of public infrastructure catering to their specific needs, enhancements to healthcare services tailored to geriatric requirements, the facilitation of educational opportunities, the institution of welfare schemes, and the cultivation of a societal fabric poised to extend support to elderly. Moreover, governmental endeavors extend to the facilitation of employment opportunities for disadvantaged elderly individuals and those with disabilities, alongside initiatives to bolster their societal integration through establishment of specialized centers geared towards enhancing their quality of life. Complementary programs include community health rehabilitation initiatives and proactive health education campaigns disseminated through diverse media channels, aimed at augmenting health literacy among the elderly populace.

# 4.1 Establishment of Welfare and Political Systems

From a personal perspective, when formulating welfare policies within the political framework, it becomes imperative to align these policies with their implementation strategies. It is incumbent upon the state to uphold the principles of equitable rights for all citizens, ensure the enhancement of overall quality of life, and facilitate household income generation through employment opportunities. However, it becomes evident that the varying quality of life among families influences their respective contributions, thereby posing a challenge, particularly for the elderly demographic. This underscores the pivotal role accorded to welfare policies within the purview of state governance, which may manifest through political deliberations or engender severe critiques, a evidenced in the prevailing scenario. (Contributor 5)

In the view of this author, while managing the welfare system, despite perceptions of favoritism towards specific groups and criticisms regarding the fostering of dependency on government assistance, certain forms of welfare should be extended to citizens based on their entitlements as integral members of society. However, the existing welfare framework continues to exhibit deficiencies in its aspiration to achieve a comprehensive state welfare system, as accessibility to welfare remains restricted and coverage across all facets remain incomplete. A glaring illustration of this deficiency is observed in the social security welfare system, which exclusively encompasses formal employees, this excluding a significant portion of the populace. (Contributor 6)

Therefore, the researchers concludes that the establishment of social policies characterized by a welfare state in Thailand encounters significant challenges, particularly concerning the accessibility of education and healthcare benefits, which remain elusive for certain demographic groups such as individuals with disabilities and minority populations. This predicament is compounded by the dominance of capitalist interests within the government, whose reluctance to relinquish tax-related benefits obstructs the realization of comprehensive welfare policies. Evidenced by their opposition to levies such as land tax, inheritance tax, and progressive taxation -- vital revenue streams for funding comprehensive welfare – the reluctance of those in power perpetuates the inadequacy of social welfare provision. Moreover, the prevalence of indirect taxes, predominantly sourced from value-added taxes on goods and services consumed predominantly by lower and middle-class demographics, exacerbate the insufficiency of tax revenue to support comprehensive welfare akin to that observed in European nations.

Nevertheless, the researcher posits that the adoption of a welfare state framework to address economic and social inequalities in Thailand, despite inherent drawbacks, remains feasible provided that efficacious state management principles are employed to tailor the welfare system to the Thai societal context. While the attainment of the welfare state's objectives may not entirely eradicate social inequality and economic disparities, its successful implementation holds promise in ameliorating these issues at grassroots levels, in alignment with the national economic and social development agenda. However, realizing such aspirations necessitates a concerted effort to allocate sufficient budgets to bolster the welfare state framework, which currently grapples with funding shortages.

# 4.2 Promoting Community-Centric Policies

Recent interviews conducted with local officials have shed light on the ongoing implementation of elderly welfare policies mandates by the state. These encompass a spectrum of initiatives spanning livelihood subsidies, physical health benefits, income support, leisure activities, and security measures, all designed to benefit elderly residents within the region. Numerous projects stemming from these policies have

facilitated uninterrupted care and assistance for elderly citizens by local governmental bodies, particularly targeting those incapacitated by health issues and unable to attend their own needs. Remarkably, the most effective execution of elderly welfare programs has been observed within local government organizations in the northeastern region, where emphasis is placed on skills acquisition through elderly schools, thereby fostering lifelong learning, educational management, skill enhancement, and overall enhancement of the elderly populace's quality of life. Activities conducted within elderly schools hold profound significance of the elderly demographic, serving as conduits for knowledge enrichment, acquisition of essential life skills, and platforms for the exchange of experiences and wisdom, thereby enriching the collective knowledge reservoir of the community. (Contributor 7)

In the recent dialogue with a group of senior citizens concerning their interactions with the local government entities, several crucial insights emerged:

- 1) Health and healthcare provision: the elderly unanimously advocated for comprehensive healthcare services, including home visits and dissemination of health-related information. They emphasized the necessity of volunteer caregiving, establishment of long-term care hospitals, provision of transportation services, and deployment of caregiver teams to assist both at home and hospitals. Additionally, they stressed the importance of community exercise facilities, quality-of-life enhancement centers, vocational training opportunities, and temporary care centers for short-term assistance. Access to social welfare and psychological counseling, as well as daytime care centers staffed with caregivers, were also highlighted as essential components of elderly welfare.
- 2) Organizational income and welfare: the elderly underscored the significance of local government responsiveness to their needs, particularly concerning physical and mental health and income generation. Suggestions included establishing elderly clubs in every community to foster social engagement and supplementing income and job placement was deemed essential, alongside the development of elderly care centers to accommodate the growing aging population.
- 3) Environmental care and residential area priorities: prioritizing environmental well-being in residential areas was emphasized, encompassing initiatives such as maintaining public parks and ensuring well-it, clean surroundings.

The elderly advocated for community involvement in activities and home repairs, including the installation of ramps and handrails for accessibility, as well as offering accommodations or shelter for those in need.

- 4) Leisure and socializing: the establishment of elderly clubs as hubs for information exchange and social interaction was recommended. These clubs would serve as venues for organizing various activities, including religious ceremonies, recreational pursuits, and visits to sick or disabled peers.
- 5) Social stability and support services: ensuring continuous learning opportunities, access to legal services, and protection against abuse or exploitation were deemed critical. Additionally, the provision of secure facilities and funeral arrangements aligned with tradition were emphasized. Social service centers at the village level were proposed to cater to diverse needs, including health services, recreational activities, and religious or charity events.
- 6) Services and support networks: the elderly advocated for the creation of comprehensive support networks, encompassing home care services, community-based monitoring systems, and volunteer caregiver programs. Education and training initiatives for both caregivers and volunteers were deemed essential.
- 7) Other aspects of social welfare: the establishment of learning centers focusing on sustainable economic and cultural centers promoting local traditions was suggested. Mobile libraries or reading rooms were proposed to meet the educational needs of elderly community members.

Overall, the recommendations underscore the multifaceted nature of elderly welfare, emphasizing the importance of holistic support networks, community engagement, and tailored services to enhance the quality of life for senior citizens.

# 4.3 Utilizing the Framework of Sustainable Development Goals

Based on insights gleaned from interviews pertaining to SDGs related to social welfare for the elderly, the following elucidations emerge:

1) Establishing income security: a pivotal goal entails fortifying income security for the elderly and fostering preparedness for old age. This is envisaged

through the promotion of national saving systems aimed at encompassing working individuals lacking state-provided income security in their later years.

- 2) Expanding work opportunities: Efforts are directed towards promoting and broadening employment prospects for the elderly, capitalizing on their skills and experiences across diverse sectors including production, services, academia, counseling, voluntary work, and knowledge dissemination. This pragmatic approach not only leverages the capabilities of the elderly but also addresses labor shortages prevalent in Thailand, both presently and in the foreseeable future.
- 3) Developing long-term care systems: a concerted focus is placed on crafting and enhancing a long-term care infrastructure catering to the needs of the elderly. This entails the formulation of policies and practical mechanisms across urban and rural domains, bolstered by professional and volunteer practitioners collaborating to deliver community-based care and rehabilitation services, particularly for bedridden and mobility-impaired elderly individuals. Accelerated training initiatives seek to equip personnel with requisite knowledge and skills pertinent to elderly care.
- 4) Ensuring elderly-friendly public facilities: the government endeavors to furnish public spaces with suitable and secure amenities for the elderly, underscoring the imperative of creating environments conducive to the well-being of all age demographics. This necessitates fostering awareness among the populace and relevant agencies, striving to ensure universal access to facilities tailored to the needs of the elderly, while fostering intergenerational engagement in utilizing these amenities.
- 5) Enhancing local government capacities: local government organizations are urged to bolster their proficiency in delivering comprehensive quality of life care to elderly. This mandates augmenting the skills and competencies of personnel tasked with elderly services, facilitated through support resources, guidance, and tailored training programs. Empowering staff with the requisite knowledge and expertise enables the provision of professional and proficient services catered to the unique needs of elderly constituents. (Contributor 8)

From a management structure standpoint that prioritizes functional delineations and top-down directives, governance operates under a "one-size-fit-all" paradigm, neglecting the inherent potential and diversity within regions. This approach has engendered challenges and impediments to developmental endeavors, spanning policy

formulation to execution. In summary, this rigid approach has hampered progress and advancement. To elaborate:

- 1) Fragmentation of services: the compartmentalization of operations has led to a lack of coherence and robustness in service provision, impeding continuity and efficacy.
- 2) Political instability: Fluctuations in political leadership have engendered discontinuity in project implementation, hindering sustained progress.
- 3) Resource constraints: inadequate budget allocations and a dearth of qualified personnel specializing in elderly care, particularly at the local level, persist as formidable hurdles.
- 4) Inadequacy of welfare provisions: the existing state-sponsored social welfare framework for the elderly falls short of addressing their genuine needs, with accessibility to benefits remaining unevenly distributed among eligible individuals.
- 5) Dependency syndrome: the prevailing social welfare system perpetuates a sense of dependency among the elderly, fostering a recipient mentality rather than promoting self-reliance and dignity, thereby undermining their quality of life.
- 6) Lack of awareness of rights: many elderly individuals remain unaware of their entitlements outlined in the Elderly Persons Act of 2003, impeding their access to government-provided services.
- 7) Insufficient community engagement: limited involvement and participation from pertinent stakeholders hinder authentic collaboration, exacerbating challenges in elderly care and support.
- 8) Shifting social values: Evolving attitudes among the younger generation, characterized by indifference towards aging and traditional values, pose significant obstacles to initiatives aimed at enhancing the quality of life for older adults. This cultural shift jeopardizes established social support systems and erodes values such as respect, gratitude, and belief in traditional societal structures, further complicating efforts to address elderly welfare comprehensively.

# 4.4 Management of Financial and Budget Systems

As the team responsible for overseeing diverse budgets, the following observations: emerge:

In term of the financial burden associated with elderly welfare programs relative to the state or national income base, projections indicate that if the Thai economy sustains an annual nominal expansion of seven percent, expenditure on such programs is estimated to range between 7.9 percent to 10.2 percent of the national income, contingent upon the utilization of one, two, three welfare packages. This proportion id anticipated to gradually escalate over time alongside the aging demographic profile. However, the sustainability of allocating welfare benefits to the elderly is threatened by the unpredictable global economic landscape, which significantly impacts Thailand's export-dependent economy. Potential downturns in national income and government revenue pose challenges in resource allocation for diverse economic and social initiatives. Moreover, the government contends with regular expenditures, investment requisites, escalating state debt, and political expenditure stemming from populist policies, all of which constrain budgetary allocations. Consequently, there is an imperative for the government to devise sustainable solutions for ensuring the provision of welfare to the elderly amidst these fiscal constraints.

1) What are your thoughts on the evaluation of the elderly welfare system in practice under the sustainable principle for future integration and the success of policy implementation?

The department responsible for structural and operational processes has highlighted several critical issues regarding the elderly welfare system:

- (1) Fragmented Management Systems: The elderly welfare system suffers from structural challenges due to disparate management systems across related organizations, such as the retirement system. This lack of integration and collaboration undermines the overall coherence of Thailand's retirement system.
- (2) Inadequate Budget Allocation: Despite government initiatives to enhance equality for the elderly, budget allocations remain insufficient, representing less than one percent of the annual elderly welfare budget. Moreover, multiple agencies

responsible for managing elderly welfare exacerbate communication and cohesion issues.

- (3) Limited Decision-Making Authority: The Department of Older Persons Affairs lacks decision making authority, primarily serving a coordinating role with other agencies. However, the mechanism to drive this coordination lacks continuity at both policy and operational levels.
- (4) Insufficient Elderly Allowance: The current lump-sum elderly living allowance is inadequate to cover basic living costs, leaving elderly individuals dependent on this scheme struggling financially.
- (5) Growing Financial Burden for Retirement Benefits: The government's responsibility for civil servants' retirement benefits has escalated, despite the existence of the Civil Servant Pension Fund. The government must explore sustainable solutions to mitigate this burden.
- (6) Exclusion of Informal Labor Sector: The existing pension system fails to encompass all segments of the population, particular those in the informal labor sector, leading to financial insecurity for these individuals.
- (7) Lack of Awareness of Rights: Elderly individuals and their families often lack awareness of their rights outlined in the Elderly Person Act of 2003, hindering their access to essential benefits and funds.
- (8) Absence of Long-Term Care Legislation: There is a dearth of laws specifically addressing long-term care for the elderly or persons with disabilities, resulting in hospital-centric care with limited family or community involvement.
- (9) Inadequate Protection for Elderly Workers: The current legal framework lacks provisions for protecting elderly workers, particularly in the informal sector, leaving them vulnerable to exploitation.
- (10) Lack of Support for Local Government: Existing laws and regulations fail to adequately support local government organizations in promoting the quality of life for the elderly.

Addressing these issues requires comprehensive reforms encompassing policy adjustments, budget reallocations, legal amendments, and stakeholder collaboration to ensure the well-being and dignity of Thailand's elderly population.

According to a study by various researchers, aligned with estimates from the Office of the Economic and Fiscal Policy and the Thailand Development Research Institute, the trajectory of social welfare expenses for the elderly suggests an escalating financial burden for the government as the country transitions into an aging society. These expenses, which encompass pensions for retired civil servants, contributions to the Government Saving Fund (GSF), and living allowances for the elderly, are projected to surge continuously until 2033. This upward trend in expenditures poses a potential financial risk, particularly if economic growth falls below anticipated levels. The estimated costs of social welfare expenditures for elderly indicate a rapid increase, primarily driven by the growing number of eligible elderly individuals each year. Importantly, these expenses are legally mandated and represent obligations that the government cannot circumvent. As such, proactive measures are imperative to manage and mitigate the financial implications of providing social welfare support to the aging population.

2) What strategies do you have to ensure future benefits and stability when it comes to implementing the elderly welfare system?

The success of implementing social welfare policies for the elderly hinges on eight key factors identified through the analysis of elderly welfare policy implementation:

- (1) Creation of Elderly Database: Local government organizations must establish comprehensive database of elderly individuals to facilitate informed decision-making, support initiatives, and address issues efficiently, particularly in managing pension disbursements.
- (2) Local Tax Revenue and Budget Allocation: Local governments with substantial local tax revenues can allocate funds to support the livelihood and well-being of the elderly through various means such as establishing funds or offering financial assistance programs.
- (3) Establishment of Elderly Welfare Committees: Forming committees dedicated to elderly welfare comprising representatives from elderly associations, community leaders, and government officials, fosters collaboration and facilitates organized welfare initiatives.

- (4) Qualified Personnel and Volunteer Engagement: Having knowledgeable personnel dedicated to elderly welfare and promoting volunteer involvement in caregiving and support activities are vital for effective implementation of social welfare policies.
- (5) Interagency Coordination: Local government agencies must collaborate and form partnerships to enhance their capacity in providing social welfare services for the elderly, thereby establishing a network of cooperation.
- (6) Proactive Policy Approach: Shifting government policy from passive to proactive, by raising awareness about the importance of elderly individuals in society and transferring welfare responsibilities to local governments, is crucial for successful implementation.
- (7) Commitment of Local Administrators: Strong commitment and drive from local administrators are essential for effective policy implementation and visible development in social welfare initiatives.
- (8) Community-led Development: The desire of community leaders and local residents to innovate and develop social welfare service models plays a significant role in fostering diverse an effective welfare programs.

Additionally, research utilizing the MACR method, involving a group of ten highly qualified individuals, revealed the efficacy of this approach in promoting dialogue, exchanging opinions, proposing suggestions, and examining issues thoroughly. This method proved in facilitating consensus-building and decision-making processes, contributing to informed policy discussions and analysis.

Based on the comprehensive data analysis and consensus reached through discussions, several key findings have emerged:

- (1) Focus Areas of Elderly Policies and Plans: It is imperative for policies and plans concerning the elderly to prioritize healthcare provisions, non-traditional education opportunities, community health rehabilitation, and widespread dissemination of health information.
- (2) Budget Allocation for Sustainable Welfare State: Thailand needs to allocate a substantial budget to support its welfare state by overhauling its tax system. This reform should aim at ensuring the long-term sustainability of the welfare state. Additionally, effective management of public sector organization, inclusive of

community private sector, and non-profit participation, is essential. Integration of new knowledge and technologies is crucial to support both direct and indirect welfare operations.

- a) Process Considerations for Elderly Welfare:
  - (a) Creating income security for the elderly.
  - (b) Promoting and expanding work opportunities for the elderly.
- (c) Establishing and developing long-term care systems for the elderly.
- (d) Providing suitable and safe amenities in public spaces for the elderly, with an emphasis on raising awareness.
- (e) Strengthening the capacity of local governments to improve elderly welfare.
  - b) Factors Contributing to Successful Elderly Welfare Initiatives:
- (a) Establishment of an elderly database within local government organizations.
- (b) Local government readiness and financial stability through local tax revenue.
  - (c) Formation of dedicated committees for elderly welfare.
- (d) Deployment of knowledgeable personnel for elderly welfare management.
- (e) Coordination and collaboration among neighboring local government organizations
- (f) Shift from reactive and proactive policy approaches within the government sector.
- (g) Advocacy and promotion of policies by local government officials.
- (h) Fostering a culture of service model development among social welfare leaders and community members.

In light of these findings, a comprehensive action plan has been developed based on primary information obtained through interviews and analyzed through management principles.

Based on the analysis conducted to achieve Objective 2, which focuses on understanding the relationships among factors influencing the success of implementing elderly welfare policies within the sustainable development framework in the northeastern region of Thailand, several key insights have emerged:

#### Dimension 1: Effectiveness

- (1) The most successful factor in this dimension id the effectiveness of the notification and assistance system for accessing welfare benefits. However, there is a need to improve the percentage of elderly and other community members participating in knowledge-sharing activities.
- (2) Discussions on budget allocation for welfare systems and tax reform aim to ensure sustainable funding and effective management of government agencies responsible for delivering welfare services.

## Dimension 2: Quality of Service

- (1) Successful outcomes include the percentage of the public accessing health information through easily accessible technologies like the Ministry of Public Health's website.
- (2) There is a need to enhance work practices among state agencies to align with the movement of the elderly welfare, emphasizing the importance of updating websites to disseminate relevant information effectively.

## Dimension 3: Efficiency

- (1) Policies developed towards international standards and sustainability in improving the quality of life for the elderly received high scores. However, there is room for improvement in facilitating successful employment opportunities for the elderly.
- (2) Success factors in organizing social welfare for the elderly, such as creating a database of the elderly, establishing welfare committees, and changing policies to be proactive, are crucial for efficient implementation.

#### Dimension 4: Organizational Development Perspective

(1) Programs promoting sleep, brain exercises, and nutrition standards received high scores in this dimension, highlighting the importance of holistic approaches to elderly welfare.

(2) Developing personnel to understand the situation of the elderly and effective management is an area that requires attention and improvement.

In summary, the policy and plan guidelines related to elderly welfare in the northeastern region of Thailand should focus on addressing these identified challenges and opportunities. This includes initiatives to assist the elderly population in healthcare, providing non-formal education, implementing community health restoration systems, and actively disseminating health knowledge through various media channels. By addressing these factors comprehensively, policymakers can work towards enhancing the overall effectiveness, quality, efficiency, and organizational development of elderly welfare policies in the region.

3) Presenting a model of the successful implementation of elderly welfare policies under the principle of sustainability in the northeastern region of Thailand

The success model of implementing sustainable policies for the elderly welfare system

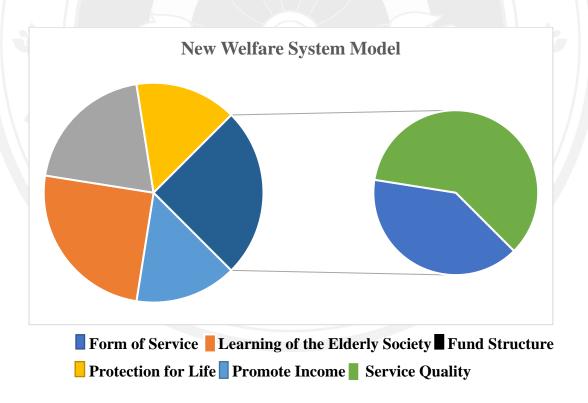


Figure 4.1 New Welfare System Model

# **Development and Sustainable Policy Planning**

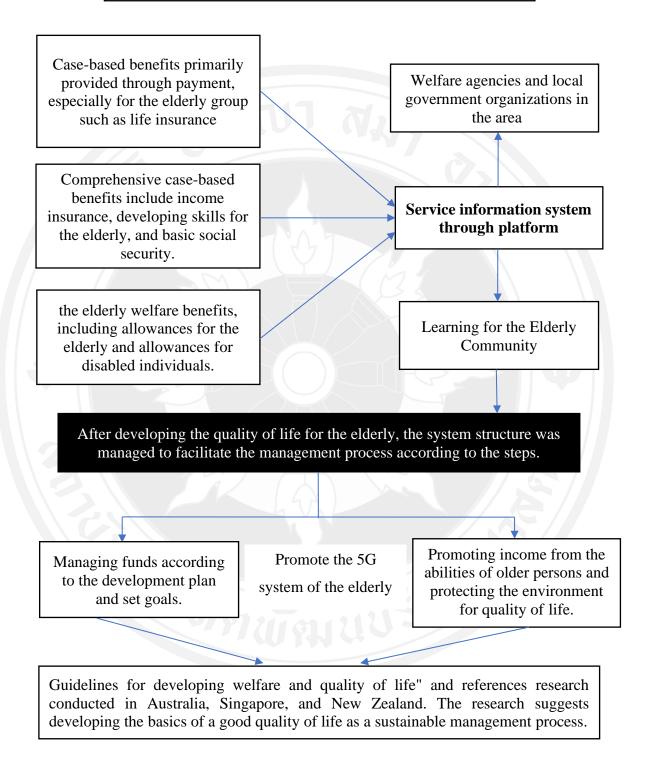
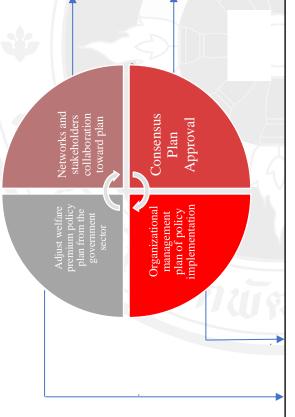


Figure 4.2 Picture of the New Model of the Welfare System



The Political System: Government agencies implementing plans for the elderly under Article 11 are encouraged to collaborate based on data from surveys and discussions, following a top-down decision-making process involving various stakeholders. Policy Evaluation: Analysis of implementation results over 3, 5, and 10 years allows for plan adjustments to ensure sustainability and adaptability for future challenges.

Policy evaluation and decision-making involve governmental agencies, private sector, and the public in drafting Elderly Welfare Policy 2022. This ensures effective management, budget planning, and the development of a 5G information system for the elderly welfare. The goal is to gain approval from all stakeholders for sustainable implementation.

Mechanisms for Sustainable Development

- 1. Elderly welfare funds and rights
- 2. Service quality improvement system development
- 3. Management skills and abilities enhancement
- 4. Engagement of all stakeholders and sectors
- 5. Environmental quality protection for sustain living
- 6. Diversification of budget sources to evaluate welfare program outcomes
- 7. Political system supporting elderly welfare programs

Figure 4.3 Political System Model Policy Assessment to Mechanisms and Methods for Public and Non-Governmental Participation

Comparison of Budgeting and Elderly Welfare Management

Studying the management of elderly welfare by comparing it with Singapore's approach suggests that the presentation of information in Singapore effectively assists low-income elderly individuals. The key aspects of their approach include:

Each individual is required to contribute approximately 8 to 10 percent of their annual income to prepare for their elderly years, which is supplemented by government support.

The government covers 95 percent of the expenses for home improvements to make them suitable for the elderly. Elderly individuals receive SGD 1,180 (approximately THB 28,000) per month if they are unable to support themselves and have medical needs. Additional financial support may also be available.

The government provides an additional monthly allowance of SGD 300-700 (approximately THB 8,000-18,000) for the lowest 20 percent of elderly individuals that do not receive support from their families.

Elderly individuals that are pioneers in Singapore or that have changed their citizenship can receive up to SGD 800 (approximately THB 19,000) per year, along with other supplementary benefits.

Brunei's government has implemented several programs for the elderly, such as tax exemptions, healthcare services, education, and housing support, along with a monthly pension of 6,000 baht.

In Hong Kong, there are daytime care centers available for the elderly, providing various activities, counseling services, and more.

Japan has started using robotics for elderly care and offers computer programs accessible through mobile phones to support their daily lives.

In the Philippines, particularly in the Makati region, the government provides healthcare services, movie vouchers, birthday cakes, and an additional 100,000 pesos (approximately 60,000 baht) as a pension.

Sri Lanka offers pensions ranging from 20,000 to 50,000 baht, and the government also provides low-interest loans specifically for the elderly.

In Taiwan, elderly individuals aged 65 and above receive support. Thailand requires the involvement of government agencies to support the elderly population. With approximately 7.3 million elderly individuals, accounting for about 10.5 percent

of the population, there are around 730,000 vulnerable elderly individuals that require substantial assistance, representing roughly 10 percent of the elderly population. Caring for each individual costs approximately 500 baht per day, totaling 79,935 million baht per year, which amounts to only 2.8 percent of the national budget. This budget allocation is limited but aims at providing meaningful support to the elderly population.



## **CHAPTER 5**

## SUMMARY OF THE FINDINGS AND RECOMMENDATIONS

The research aimed at

- 1) Investigating the key success factors in implementing elderly welfare policies in Thailand's Northeast region.
- 2) Contrasting the effectiveness of elderly welfare policy implementation in the Northeast region based on Sustainable Development principles, categorized by sample population characteristics.
- 3) Elucidating the interrelations among factors influencing the success of elderly welfare policy implementation under SDGs in the Northeast region.
- 4) Assessing the efficacy of implementing elderly welfare policies under Sustainable Development principles in the Northeast region.
- 5) Proposing a model for successful implementation of elderly welfare policies under Sustainable Development principles in the Northeast region. Sunsequently, the researcher will consolidate findings and provide recommendations.

## 5.1 Research Summary

Step 1: Study the factors influencing the success of implementing elderly welfare policy in the sustainable development framework in the Northeastern region of Thailand.

Data analysis according to Objective 1 was conducted to study the success factors of implementing elderly welfare policy in the northeast region of Thailand.

According to the basic data of the questionnaire respondents, it was found that majority of the respondents were female, aged 71-75 years old, with education below a bachelor's degree, had worked for 5-10 years, had family status, worked as a hired worker or salesperson, had a family income of 10,000-30,000 baht, and had main sources of income from self-employment.

A data analysis on the elderly welfare system's needs revealed that, in general, the demand for the elderly welfare system was high (Mean=3.64, SD=0.43). When considering each aspect, there were two aspects with high levels of opinion, namely life safety, with a high level of opinion (Mean=3.90, SD=0.53), followed by public health, which has a high level of opinion (Mean=3.67, SD=0.35), and two aspects with moderate levels of opinion, namely education, which had a moderate level of opinion (Mean=3.21, SD=0.42), and housing, which also had a moderate level of opinion (Mean=3.17, SD=0.50). These are categorized as follows.

Regarding the public health aspect, there was a high level of opinion (Mean=3.67, SD=0.35). When considered on an item-by-item basis, it was found that there was a high level of opinion in all aspects. For instance, seniors would like to have the convenience of having special channels in hospitals and other places (Mean=4.14, SD=0.22). In contrast, the lowest aspect was found to be the desire for general advice services for the elderly provided by government and private organizations, which still had a high level of opinion (Mean=3.90, SD=0.53).

In terms of the education aspect, there was a moderate level of opinion (Mean=3.21, SD=0.42). When considered on an item-by-item basis, it was found that there was a moderate level of opinion in all aspects. For example, seniors would like to have the society's attention and concern in encouraging education (Mean=3.38, SD=0.50).

Regarding the residential aspect, the survey found moderate opinions on these aspects (Mean score = 3.17, SD = 0.50). The respondents expressed the need for convenient accommodations and medical facilities (Mean score = 3.33, SD = 0.22). However, the desire for free welfare for the elderly had the lowest agreement (Mean score = 3.03, SD = 0.52).

On the security aspect, the survey found high opinions regarding security (Mean score = 3.90, SD = 0.53), with high agreement on all specific items. The respondents expressed the need for measures to maintain peace and security for the elderly in public spaces (Mean score = 3.90, SD = 0.53). The aspect with the lowest level of agreement was the desire for establishing senior care units in every community, with a still-high Mean score of 3.75 (SD = 0.65).

The analysis of the data regarding the needs of the elderly welfare system revealed that the implementation of elderly welfare policies, in general, was at a high level (Mean = 3.95, S.D.=0.51). When considered on a specific point basis, it was found that the opinion level was high in every aspect, including the use of sustainable principles (Mean = 3.98, S.D. = 0.52), financial management/budgeting processes (Mean = 3.97, S.D. = 0.53), promotion of community policy (Mean = 3.94, S.D. = 0.56), and the establishment of welfare systems (Mean = 3.92, S.D. = 0.55), in that order.

The establishment of a welfare system was at a high level (Mean = 3.92, S.D. = 0.55). When considered on a specific point basis, it was found that the opinion level was high in every aspect, including the process of managing to create an understanding of the welfare system in every project (Mean = 3.94, S.D. = 0.70), and the aspect with the lowest opinion was the promotion of the government's support for promoting new elderly welfare policies (Mean = 3.90, S.D. = 0.69), in that order.

The promotion of community policy was at a high level (Mean = 3.94, S.D.= 0.56). When considered on a specific point basis, it was found that the opinion level was high in every aspect, including the belief that community management systems should be modernized and that the community should be educated to create knowledge and strengthen their ability to use welfare systems.

The principles of sustainability was at high level (Mean =3.90, S.D. = 0.53) when considering various aspects of their living conditions. Among the areas with high satisfaction levels were the desire for improved management of public spaces to ensure the safety and security of senior citizens in the building (Mean = 3.90, S.D. = 0.53). The area with the lowest level of satisfaction was the need for the establishment of elderly care services in all communities, which still garnered a relatively high satisfaction rating (Mean = 3.75, S.D. = 0.65).

The management of financial/budgetary processes was rated high (Mean = 3.97, S.D. = 0.53). The respondents agreed that budget allocation for elderly care should align with welfare projects (Mean = 4.06, S.D. = 0.68). The lowest-rated aspect was whether the government agencies' master plan for budget allocation could be comprehensive and efficient (Mean = 3.86, S.D. = 0.76).

Step 2: Creating a framework for evaluating the success of implementing elderly welfare policy under the Sustainable Development principles in the Northeastern region of Thailand

The results of the analysis in accordance with Objective 2 were to compare the success of implementing elderly welfare policy under the sustainable development principles in the northeastern region of Thailand.

To achieve this, the study examined the components involved in analyzing the success of implementing the elderly welfare policy under the sustainable development principles in the northeastern region of Thailand.

In the evaluation of the key performance indicators for the implementation of the sustainable elderly welfare policy in the northeastern region, Dimension 1 (Effectiveness) revealed important assessment items and indicators. According to the analysis, the highest score of 98 out of 100 was achieved in driving the notification and assistance system for people to receive welfare throughout their lifetime. The average score was 0.92. The success rate of the internal audit report for the fiscal year 2022 was the second-highest score with 87 points, and an average of 0.87. The lowest score was obtained by the percentage of the elderly and all ages that participated in the knowledge transfer activity, with a score of 23 and an average of 0.21.

In a recent assessment of key performance indicators for the sustainable implementation of elderly welfare policies in th northeastern region of Thailand, the second dimension, quality of service provision, was evaluated. The results revealed that the highest score, with a Mean of 0.34 and a percentage of 83 percent, was given to the public's ability to access health information through user-friendly technologies such as the Department of Health's website. The next highest score, with a mean of 0.45 and a percentage of 81, was given to the management and care of the elderly by care managers or caregivers. On the other hand, the lowest score was given to the percentage of government agencies that have updated their work practices manuals *via* their websites to keep up with the evolving elderly welfare landscape, with a mean of 0.62 and a percentage of only 44 percent.

The evaluation and indicators of performance assessment in the form of assessing the implementation of the sustainable welfare system policy for the elderly in the northeastern region (Dimension 3: Efficiency) found that the highest score of 89

with an average of 0.34 was in the success of developing policies towards international standards and sustainable quality of life for the elderly. The second-highest score of 85 with an average of 0.52 was in the establishment of policies and measures to create and expand opportunities for accessing basic social security for the elderly through training and capacity-building programs such as the Community Power Weaving Project for the Elderly (NSOs) in on-site or online formats with a score of 81 and an average of 0.37 in terms of the program's operational methods. The lowest-scoring indicator with an average of 0.44 was the percentage of successful employment of self-sufficient elderly people with a score of 47.

In the evaluation and number of indicators for important performance assessments in implementing the sustainable welfare system policy for the elderly in the northeastern region (Dimension 4: Organizational Development), the highest scores were in evaluating the promotion of sleep and brain exercise, nutritional delays in aging, and driving policy proposals and standards for environmental health to promote the good health of the elderly with a score of 88 and an average of 0.26. The second-highest score of 84 with an average of 0.23 was in the process of selecting, honoring, and celebrating exemplary elderly persons, such as community leaders and NSOs pioneers. The third-highest score of 83 with an average of 0.33 was in the development and promotion of a positive image of aging and retirement through media and communication channels.

Analysis of quality by interviewing data on the implementation of elderly welfare policy under the sustainable principle in the northeastern region of Thailand

The analysis of quality in the implementation of sustainable principles for the elderly welfare system in Thailand's northeastern region reveals significant demographic shifts. By 2022, Thailand has transitioned into a "complete elderly society," with individuals aged 60 and above comprising 20 percent of the total population. Projections indicate that by 2033, Thailand will become an "ultimate elderly society," with this demographic group constituting 28 percent of the total population. These demographic changes pose challenges, particularly for the workingage population, who will face increased responsibilities in caring for the elderly.

The evolving demographic landscape underscores the importance of addressing issues related to productivity and labor shortages. A shrinking workforce relative to the

elderly population could strain the economy, impacting government welfare programs and tac revenues. To counteract these challenges, there is a pressing need to enhance the quality of life for the elderly and bear-retirement individuals. The World Health Organization advocates for active aging, emphasizing good health, stability, and social engagement as pivotal components. Facilitating productive aging ensures that older individuals remain valuable contributors to the workforce, thereby alleviating labor shortage and promoting financial stability while reducing reliance on government support.

In the Northeastern region of Thailand, the phenomenon of elderly individuals living in poverty without adequate familial support in widespread. Economic and societal factors, particularly rural-to-urban migration among younger generations exacerbate this issue. As younger family members seek employment opportunities in urban areas, elderly relatives are left to shoulder caregiving responsibilities, often for grandchildren. This trend places a significant burden on the elderly, especially when financial support from adult children is lacking. Addressing these challenges requires comprehensive strategies to support elderly individuals and foster intergenerational solidarity within communities.

In a discussion among elderly individuals regarding services provided by local government organizations, the following key points were highlighted:

- 1) Healthcare and Medical Treatment: The elderly group unanimously agreed on the need for healthcare service units for home visits, volunteer caregivers, long-term care hospitals, and transportation services. They also emphasized the importance of community exercise equipment, centers for quality of life development, short-term care centers, and day care centers.
- 2) Income Support: Local government organizations should address the physical and mental health needs of the elderly while also providing income support. Suggestions included establishing elderly clubs for social activities and income generation, offering knowledge about available services, supporting elderly entrepreneurship, and encouraging businesses to hire elderly individuals.
- 3) Environment Care: Priority should be given to environmental care to ensure a healthy living environment for the elderly. This includes maintaining public

parks, addressing biohazards, improving lighting and cleanliness, and providing development activities for elderly housing.

- 4) Leisure Activities: Elderly clubs should be established as hubs for social activities, religious studies, and recreational activities. Efforts should be made to organize activities with youth groups and community members, and to visit and care for sick or disabled elderly individuals.
- 5) Social Stability and Family Care: Opportunities for continuous learning, access to information, legal services, and social support should be provided to ensure the safety and welfare of the elderly. Social service centers and village-based relief centers should be offer a range of services, and mobile units should be available for consultation and problem-solving.
- 6) Support Networks: Centers should be established to cater to the elderly, providing support for building mutual assistance networks within the community. Home visitation services, community care systems, and volunteer services should organized, along with training for caregivers and volunteers.
- 7) Education and Learning: Learning centers within the community should offer education on topics such as sustainable economics and organic agriculture. Local cultural centers should be established, providing vocational training and opportunities for the elderly to share their knowledge and experience.

These recommendations emphasize the importance of comprehensive support systems and service tailored to the needs of the elderly population, promoting their health, well-being, and social inclusion within the community.

Based on the information gathered from the interviews on sustainable development aspects of social welfare for the elderly conducted by government agencies, the following recommendations can be suggested:

- 1) Creating Income Security: Promote the national savings system to provide income security for the elderly who are currently working but lack financial stability for their old age. Provide retirement benefits to ensure financial support during their later years.
- 2) Expanding Employment Opportunities: Encourage elderly individuals to contribute their skills and experiences across various sectors such as production, service, and academia. Provide guidance, counselling, and opportunities for

volunteering and knowledge sharing. This can help address workforce shortages and utilize the valuable expertise of elderly citizens.

- 3) Developing Long-Term Care Systems: Focus on enhancing mechanisms for providing long-term care services to the elderly, particularly in urban and rural areas. Invest in training and development programs for both professional and volunteer caregivers to ensure high-quality care, especially for bedridden and immobile elderly individuals.
- 4) Creating Safe Facilities: Ensure that public places have appropriate and safe facilities for the elderly, raising awareness among the public and various sectors about the importance of creating age-friendly environments that benefit people all ages.
- 5) Capacity Building for Local Government Organizations: Strengthen the capacity of local government organizations to provide comprehensive care for the elderly. This includes providing resources, training, and education to staff and officials to enhance their understanding of elderly issues and improve their professional skills in elderly care.

Additionally, it is important to address the management structure that currently overlooks the potential and diversity of the area. Moving away from a top-down commend approach and embracing a more inclusive and responsive management style can help overcome obstacles and facilitate sustainable development in elderly welfare policies and practices.

In summary, the challenges and obstacles identified in the evaluation of the elderly welfare system include:

- 1) Separation of Social and Health Services: The division between social and health services results in a lack of continuity and strength in service delivery.
- 2) Political Changes Impacting Projects: Political changes have led to a lack of continuity in various projects related to elderly welfare.
- 3) Budget and Personnel Shortages: There is still a shortage of budget and qualified personnel with expertise in elderly care, particularly at the local level.
- 4) Inadequate Social Welfare: The social welfare provided by the state for elderly individual is insufficient and fails to fully meet their needs.

- 5) Dependency Reinforcement: The current welfare provided by the state reinforces a sense of dependency among the elderly rather than promoting pride and responsibility, leading to a lack of sustainable quality of life.
- 6) Lack of Awareness of Rights: Many elderly individuals are unaware of their rights as outlined in the Elderly Persons Act of 2003, hindering their access to government-provided services.
- 7) Lack of Community Participation: Insufficient involvement from the public and relevant agencies as problem owners has resulted in a lack of genuine cooperation in addressing elderly welfare issues.
- 8) Shifting Values of the Younger Generation: The younger generation's perception of aging as a natural process involving suffering and death, rather than something to be developed or improved, poses a significant obstacle to elderly care and preservation of traditional social values.

Addressing these challenges will be crucial for improving the welfare and quality of life for the elderly population.

The success factors for providing social welfare for the elderly, as identified through the implementation of policy plans, consist of eight key factors as follow:

- 1) Establishing an Elderly Database: Creating a database within local government organizations enables efficient decision-making and support provision for the elderly, particularly regarding pension disbursements.
- 2) Financial Readiness: Local government organizations with sufficient financial resources, generated through local taxes or other means can allocate budgets for elderly welfare programs effectively.
- 3) Elderly Welfare Committee: Forming committees comprising representatives from senior citizen groups, government officials, and community members fosters collaboration in delivering welfare services to the elderly.
- 4) Personnel Training and Volunteer Engagement: Providing training for personnel responsible for elderly care and encouraging volunteer participation in elderly clubs and associations contribute to the success of welfare programs.
- 5) Inter-organizational Collaboration: Collaboration among local government organizations enhances the network of welfare services for the elderly, leading to improved benefits and support.

- 6) Proactive Policy Making: Adopting a proactive approach to policymaking involves raising public awareness about the value of the elderly and transferring welfare responsibilities to local governments equipped with budgetary and expertise resources.
- 7) Commitment of Local Officials: Success in elderly welfare policies depends on the commitment of local government officials to drive initiatives aimed at enhancing the welfare of the elderly in their communities.
- 8) Community Involvement: Community leaders and residents play a vital role in shaping elderly welfare services, providing valuable input and feedback to develop effective and diverse welfare programs.

By addressing these factors, local governments can enhance their capacity to provide comprehensive and sustainable welfare services for the elderly, improving their overall quality of life.

#### 5.2 Discussion

The report on the analysis conducted for the first objective reveals several key findings regarding the demand for and implementation of elderly welfare systems:

Demand for Elderly Welfare Systems: The analysis indicates a high overall demand for elderly welfare (Mean = 3.64, Standard deviation = 0.43). Specially, safety in daily life (Mean = 3.90, Standard deviation = 0.53) and healthcare (Mean = 3.67, Standard deviation = 0.35) were identified as areas of particular concern, ranking highly. Education (Mean = 3.21, Standard deviation = 0.42) and housing (Mean = 3.17, Standard deviation = 0.50) were rated at a moderate level of demand.

Implementation of Elderly Welfare Polices: The implementation of elderly welfare policies was found to be at a high level overall (Mean = 3.95, Standard Deviation = 0.51). When examined in detail, opinions were highly favorable across all areas, including sustainable principles (Mean = 3.98, Standard Deviation 0.52), financial management (Mean = 3.97, Standard deviation = 0.53), community policy promotion (Mean = 3.94, Standard deviation = 0.56), and welfare system establishment (Mean = 3.92, Standard deviation = 0.55).

Additionally, findings from a study conducted by Rattana Inthsuk and Thanatha Rojantarakul (2021) in the Kamphaeng Din sub-district, Sam Ngam district, Phichit province, provided further insights:

- 1) Positive Opinions of the Elderly: Overall, the elderly individuals surveyed help largely positive opinions regarding the provision of social welfare for the elderly in the Kamphaeng Din sub-district. This suggests a general satisfaction with the existing welfare services and programs aimed at supporting the elderly population.
- 2) Consistent Opinions Across Different Factors: The study revealed that opinions regarding the social welfare system for the elderly did not vary significantly among the elderly population, even when considering different personal factors. This indicators a uniform perception and level of satisfaction with the welfare services, regardless of individual circumstances.
- 3) Recommendations for Improvement: The study proposed several recommendations aimed at enhancing the provision of social welfare for the elderly. These recommendations include:
- (1) Focusing on providing comprehensive care and assistance tailored to the specific needs of the elderly population.
- (2) Promoting self-development opportunities for the elderly, such as educational programs and skill-building activities, to empower them and enhance their quality of life.
- (3) Involving families, local government authorities, and community organizations in the provision of social welfare services to ensure a collaborative and holistic approach to elderly care.

These recommendations highlights the importance of addressing the diverse needs of the elderly population and fostering community involvement and support to create a more inclusive and effective social welfare system, for the elderly in the Kamphaeng Din sub-district.

The research findings presented here align with previous studies and provide valuable insights into the development of social welfare policies for the elderly. Here are some key points summarized for the research:

The research corroborates findings from previous studies, such as Chatchadaporn Chaisat's (2021) examination of the elderly's potential in the lower

northeastern region of Thailand. It underscores the need to enhance social welfare provision for the elderly across various sectors, including family, local government and community organization. The study emphasizes the importance of sustainable development in elderly welfare policies, particularly in terms of community-based health and welfare. It highlights collaborative efforts between government and private sector agencies to promote and plan for sustainable elderly care. The research identifies significant variations in the structure of elderly welfare integration, particularly in budgeting and management approaches. A comparative study with Singapore's elderly welfare system sheds light on potential efficient models for Thailand to consider. Drawing from Singapore's example, the research suggests initiatives that Thailand's government can adopt to improve elderly welfare. These include financial contribution from individuals, government support for home improvements, monthly allowances for the elderly, and supplementary benefits based on citizen or contributions to the country. The research presents findings from performance assessment of the elderly welfare system in the Northeastern region of Thailand across various dimensions. These assessments indicate high scores for effectiveness, quality of life, efficiency, and organizational development, reflecting successful efforts in promoting sustainable elderly welfare. The research underscores the importance of addressing the health needs of the elderly population, considering their significant demographic growth and associated healthcare costs. Promoting successful aging with happiness and health is deemed crucial for societal well-being.

In conclusion, the research contributes valuable insights into the development and evaluation od social welfare policies for the elderly, emphasizing the importance of sustainability, collaboration, and addressing health needs pro promoting the wellbeing of elderly individual in Thailand.

Method: This study employed a qualitative research design to investigate the viewpoints of the older adults and gain insights into their health requirements. A sample of 12 participants was chosen using a continuous sampling technique. Data collection involved conducting semi-structured interviews with the participants, and the collected data were analyzed using content analysis to extract and summarize the key findings.

Result: The study findings have delineated four facets pertinent to health needs: independence and autonomy, social connectedness, daily life structure and community

engagement and a sense of ownership. These categories exhibit interdependencies and exert substantial influence on each other.

Summary: A growing focus on community-based strategies can foster the development of nurturing environment conducive to well-being. Furthermore, initiatives such as nurse-led home visits, which concentrate on identifying health risks and addressing disabilities, could offer a promising avenue for efficiency supporting the elderly demographic. This approach entail the design and implementation of tailored programs and activities aimed at achieving particular objectives.

The study highlights a significant correlation between community involvement and social stability among the elderly population. Additionally, it suggests that focusing on healthcare risks and disabilities through burse-led home visits can be an effective strategy for supporting older adults. Moreover, the research indicates that activities tailored to older adults can serve as mechanisms for promoting continued learning and development.

Based on these findings, researchers advocate for Thailand to consider enacting legislation aimed at promoting the quality of life for the elderly, aligning with social care services. This approach, already implemented in countries like the United States, the United Kingdom, and Japan, involves the introduction of laws and measures to enhance elderly care. These measures often entail establishing dedicated organizational structures, funding systems, and social care frameworks, which may include specialized agencies and personnel responsible for social care management.

The study underscores the importance of integrating social care with healthcare services to provide comprehensive care for the elderly. While various countries, including Australia, the United Kingdom, the United States, and Canada, have explored integrated healthcare and social care funding models, social care funding for elderly care remains insufficient. In Thailand, multiple funds, such as social welfare funds, elderly funds, national savings funds, social security funds, and the National Health Security Fund (NHSO), are available foe elderly welfare. However, there is a need to reassess the integration of these funds to establish a sustainable long-term care system, for the elderly.

Developing a well-defined social care system linked to healthcare services would contribute to the establishment of an improved integration long-term care system for the elderly, ensuring comprehensive and effective support for this demographic.

The recent analysis of Objective 4 highlights the importance of sustainable measures in evaluating the success of policies for elderly welfare in Northeastern Thailand. Drawing insights from a study conducted by Sukamdi et al. (2020) on elderly care services in Indonesia, the analysis underscores the need for proactive initiatives to address the growing elderly population. The study emphasizes the emergence of home care services as a response to the demographic shift, with local leadership playing a crucial role in the implementation process.

Informed by principles from Germany's management practices, the policy of success in elderly welfare begins with government agencies' involvement and the allocation of central budgets to drive welfare management. Ket aspects of Germany's health insurance system of the elderly, such as disease-specific compensation, financial constraints, parallel financing, and consolidated funding sources, offer valuable insights for welfare reform efforts.

Moreover, collaboration between the central government and Ministry of Public Health is vital for promoting social welfare within the healthcare sector. Initiatives such as elderly patient assessment, treatment guideline development, compensation assessment, treatment development, and quality assurance treatment align with the study's focus on national health policy structures.

Drawing parallels with Australia's healthcare funding model, the analysis highlights the government's budget allocation to state hospitals based on a percentage calculation. Patients benefit from subsidies or other benefits, and those exceeding the health expenditure threshold are not subject to additional charges. Additionally, higher-income individuals are encouraged to participate in private insurance, with levied fees for those not opting for private coverage.

Overall, these insights provide a comprehensive framework for policymakers to enhance elderly welfare policies, emphasizing sustainable approaches and collaborative efforts between government agencies and healthcare stakeholders.

#### 5.2.1 Pharmaceutical Benefits Scheme (PBS) Initiative

The Pharmaceutical Benefits Scheme (PBS) initiative in a cornerstone of Australia's healthcare system, providing subsidized medications to residents based on doctor's prescriptions. This program ensures that Australians have affordable access to a wide range of essential medications, promoting patient involvement and safety. Key features of the PBS includes subsidization of cost of medications prescribed by doctors, making them more affordable for patient. PBS legislation includes a safety net threshold to reduce out-of-pocket expenses for patients and their families. Once the threshold is reached within a calendar year, patients become eligible for further subsidies. General patients receive medications at a subsidized price after reaching the safety net threshold. Patients eligible for the safety net receive PBS medications at no cost for the remainder of the year. The PBS ensures that essential medications are accessible to all Australians, regardless of their financial situation, promoting equitable healthcare access. The PBS safety net operates separately from the Medicare system, providing additional financial protection for patients specially related to medication costs. Overall, the PBS initiative play a crucial role in improving healthcare affordability and accessibility for Australians, contributing to better health outcomes and quality of life for patients across the country.

## 5.2.2 Benefits of the Pharmaceutical Benefits Scheme Program

The Pharmaceutical Benefits Scheme is a vital government-funded initiative in Australia that subsidized and provided access to essential medications for its residents. Initially established as part of the broader healthcare policies under the Health Insurance Act of 1973, the PBS is managed by the Australian government's health insurance agency, formerly known as the Health Insurance Commission.

Prior to the establishment of the government's comprehensive health insurance scheme in 1948, healthcare policies primarily focused on medical care. However, the introduction of the PBS marked a significant shift towards ensuring affordable access to medications for all Australians.

Under the PBS, medications are subsidized by the government, making them more affordable for patients. This program plays a crucial role in improving healthcare

outcomes by ensuring that individuals have access to medications they need to manage their health conditions effectively.

Additionally, the PBS considers pharmacoeconomic factors to ensure that the allocation of medications provides optimal benefits for empowered individuals. By subsidizing essential medications, the PBS contributes to the overall well-being and quality of life of Australians, promoting equitable access to healthcare resources.

## **5.2.3** Mutual Health Care Agreements

While PBS subsidies are specific to residents in Australia, individuals from certain foreign countries also have entitlements under mutual healthcare agreements. These agreements ensure healthcare coverage between Australia and the United Kingdom, New Zealand, Malta, Italy, Sweden, the Netherlands, Finland, Norway, and Slovenia.

#### 5.2.4 Public Healthcare in Australia

Public healthcare in Australia operates under a framework governed jointly by private and governmental entities. Oversight of the sector is primarily managed by the central government, under the leadership of the Ministry of Health, currently Peter Dutton, who formulates health policies through Department of Health. The provision of healthcare services, encompassing activities such as hospital management, is predominantly executed by government-operated institutions. Financing for healthcare initiatives, notably the Medicare program, is primarily sourced from variety of channels. This includes a 1.5 percent levy imposed on eligible taxpayers, exempting those falling within the low-income bracket, and supplemented by general government revenues. Additionally, a one percent levy is levied on high-income earners lacking private health insurance. Government-backed health insurance extends to encompass the Pharmaceutical Benefit Scheme, a cornerstone program offering subsidized medications. The funding framework elucidates the central role of political and governmental influences in shaping Australia's healthcare policies. Nonetheless, the intricate administrative structure and perceived deficiency in national-level coordination have been subject to criticism, citing sluggish responsiveness and operational inefficiencies as notable concerns.

In conclusion, the efficacy of healthcare policies hinges upon robust collaboration among governmental bodies, aimed at enhancing efficiency in delivering services tailored to the needs of older adults across all tiers of healthcare provision. It is imperative for authorities to synchronize expenditure plans with budget allocations to optimize resource utilization and achieve desired outcomes in elder care.

## 5.3 Recommendations

- 1) Social Network Development: It is incumbent upon management to actively engage in strategic planning and budgetary allocation to facilitate the realization of objectives. Public sector entitles are obligate to adhere to development frameworks and social welfare mandates, ensuring that budget assessments are conducted transparently and securely. Furthermore, the establishment of a fair and inclusive service delivery system is imperative, encompassing collaboration among local governmental entities, private sector stakeholders, and the general public.
- 2) Sustainable Development Plan: The longevity and resilience of the development plan can be gauged through rigorous evaluation and testing procedures, ensuring that resources are managed and dispensed in a sustainable manner for future generations.

#### **5.4 Future Research Recommendations**

- 1) The evaluation process ought to encompass all essential facets, necessitating the establishment of the collaborative network comprising both public and private entities to periodically assess the implementation of the plan.
- 2) Systematic qualitative research methodologies should be employed to scrutinize the implementation process, with a focus on evaluating outcomes based on predefined indicators. This approach is pivotal in fostering the sustainability of the plan execution endeavors.
- 3) Deliberative processes must adhere to ethical norms and incorporate political structures to foster mutual comprehension and consensus-building across all

tiers of governance. This inclusive approach is instrumental in advancing collective endeavors toward realizing future goals and plans.



#### **BIBLIOGRAPHY**

- Avery, M. (1981). Building united judgment: A handbook for consensus decision making. Madison, Wisconsin: The Center for Conflict Resolution.
- Boonphadung, S. (2011). Developing the quality of life for the elderly in the locality by using schools as a base based on the sufficiency economy principle (Phase 1).

  Research report of the Master of Public Administration. (Public Management Administration) Suan Sunandha Rajabhat University.
- Chitmontri., N &; Thayansilp., S. (2009). Research report on the model of good elderly care for families and communities in urban and Bangkok areas. Bangkok:

  Foundation of Thai Gerontology Research and Development Institute.
- Chang, Y. N., & Campo-Flores, F. (1980). *Business policy and strategy: Text and cases*. Santa Monica: Goodyear.
- Caldwell, C. K. (1970). Policy for land. Boston: Way Lanham
- Considine, M. (1994). Public policy: *A critical approach*. South Melbourne, Australia: MacMillan
- Department of Elderly Affairs. (2022). *Measures to drive the National Agenda on the Elderly Society*. Bangkok: Amarin Printing and Publishing.
- Dye, T. R. (1984). *Understanding public policy* (5th ed). Englewood Cliffs. New Jersey: Prentice-Hall.
- Erikson, E. H. (1963). Childhood and society. New York: Norton
- Eliopoulos, C. (1995). Manual of gerontological nursing. St. Louis: Mosby Year Book.
- Eulau, H., & Prewitt, K. (1973). Labyrinths of democracy. Indianapolis: Bobbs Merrill.
- Friedlander, W. A., & Apte, R. Z. (1980). *Introduction to social welfare*. Englewood Elight, N.S.: Prentice Hall.
- Friedrich, C. J. (1963). Constitutional government. New York: McGraw Hill.
- Gordon, D., & Spicker, P. (1999). The international glossary on poverty. London: Zed.
- Heclo, H. H. (1972). Review article: Policy analysis. *British Journal of Political Science*, 2(1), 83-108.
- Jacob, C. E. (1966). Policy & bureaucracy. New York: Princeton.
- Krejcie, R. V. & Morgan, D. W. (1970). *Determining sample size for research* activities. Educational and Psychological Measurement, 30(3), 607-610.

- Khamhom., R. (2011). *Social welfare and Thai society*. Bangkok: Faculty of Social Work, Thammasat University.
- King, J. A., Stevahn, L., Ghere, G., & Minnema, J. (2001). Toward a taxonomy of essential evaluator competencies. *American Journal of Evaluation*, 22, 229-247.
- Knezevich, S. J. (1984). *Administration of public education (4<sup>th</sup>ed.)*. New York: Harper and Row.
- McNichols, T. J. (1977). *Policy-making and executive action* (5<sup>th</sup> ed). New York: McGraw-Hill.
- Maneerot, P. (2015). Public. Simple things that are difficult to understand. Retrieved from http://www.oknation.net/blog/DrPatom/2009/02/01/entry-1
- Nimpanich., J. (2009). *Policy evaluation: Principles and concepts and application*. Nonthaburi: Sukhothai Thammathirat Open University
- Nawaka., J. (2012). The needs are met. for the welfare of the elderly in the Ao Luek Tai Subdistrict Administrative Organization, Ao Luek District, Krabi Province (Independent Research). Phathum Thani: Valaya Alongkorn Rajabhat University.
- Onchuenjit, S., & Tritrong, R. (2006). *Home health care service*. Songkhla: Prince of Songkhla University.
- PhochanukulSuzuki., P. (2009). Literature periscope and social construction.

  knowledge of "Welcome to Chumu People in Thailand" Project to enhance learning for a happy community (Sor. Sor.). Bangkok: Publishing House.
- Parliamentary Budget Office. (2020). Academic report of the budget Office of the National Assembly, No. 5/2019. Bangkok: Guidelines for Budget Management of Social Welfare Expenditures for Elderly Care
- Rod-aram., J. (2011). Satisfaction of the snake fighters. the organizations social Welfare District Administration, Khlong Kio Subdistrict, Ban Bueng District, Chonburi Province (Unpublished master's thesis). Burapha University, Chonburi.
- Sophaphan Ratnai. (2012). *Handbook of elderly care*. Bangkok: Saeng Dao.
- Statistics of the Elderly in Thailand. (2022). *Demographics of the elderly in Thailand*. Bangkok: Statistics of the Elderly in Thailand.

- Sharkansky, I. (1970). *The policy scientist and policy analysis*. In I. Sharkansky (Ed.), *Policy analysis in political science* (pp. 15). Chicago, Illinois: Markham Publishing.
- Taweebutr, S. (1997). Comparison of consensus building results and the level of cooperation of experts between using the conventional Delphi technique used to assess needs. Bangkok: Chulalongkorn University.
- Vanderwood, W. A. (1993). *Educational research* (2<sup>nd</sup> ed.). Eaglewood Cliffs: Prentice-Hall.
- Wamsley, G. L., & Zald, M. N. (1976). *The political economy of public organization*. Bloomington, IN: Indiana University.
- Wannmai, I. (1998). Building social capital. In J. Franklin (Ed.), *Social policy and social justeice*. Oxford: Polity Press.
- Wasikasin., W. (2010). Knowledge about the social welfare and welfare buses in Bangkok. Bangkok: Thammasat University Press.
- Yodphet., S. (2007). Welfare for the elderly. Bangkok: Printing House of Chulalongkorn University.





### Questionnaire

## Success of the Implementation of Elderly Welfare System Policy Under Sustainability Principles in the Northeast of Thailand

#### **Explanation**

This questionnaire has been crafted to investigate efficacy of implementing the elderly welfare system policy within the sustainability framework in the Northeastern region of Thailand. In order to yield the most effective outcomes, we kindly request that respondents provide truthful responses to the questionnaire. Accurate and factual information is crucial for gaining insights that inform the development of study results, facilitating their application in future tasks and endeavors. Your cooperation in this regard is greatly appreciated.

There are four parts of the questionnaire as follows:

- Part 1: Personal information;
- Part 2: Questionnaire on the needs of the elderly welfare system;
- Part 3: Opinion questionnaire on the implementation of the elderly welfare policy;
- Part 4: Questionnaire on the opinions regarding the development of the elderly welfare system policy under the sustainability principles in the northeast of Thailand to be applied as a future development plan.

Your information will be kept confidential. The researcher would like to thank your organization for your cooperation.

Much appreciation
Researcher

## **Part 1: Personal Information Inquiry**

## **Explanation: Please answer the following questions**

| 1. Gender                                 |                                   |
|---|-----------------------------------|
| ☐ Male                                    | ☐ Female                          |
| 2. Age year                               |                                   |
| 3. Education                              |                                   |
| ☐ Under bachelor's degree                 | ☐ Bachelor's degree               |
| ☐ Master's degree                         | ☐ Higher than Master's degree     |
| 4. Status                                 |                                   |
| ☐ Live alone                              | ☐ Live with family                |
| ☐ Live with others                        | ☐ Others (please specify)         |
| 5. Occupation                             |                                   |
| ☐ Retired civil servant / pensioner       | ☐ State enterprise employees      |
| ☐ Freelancer                              | ☐ Personal business               |
| ☐ Unemployed                              | ☐ Others (e.g. farmers)           |
| 6. Family's income per month (Baht)       |                                   |
| 7. Source of income (You can provide more | than one answer)                  |
| ☐ Own occupation                          | ☐ Elderly pension provided by the |
|   | government                        |
| ☐ From family                             | ☐ Supplementary occupation        |
| ☐ Others (Please specify)                 |                                   |

## Part 2 is a questionnaire on the needs of the elderly welfare system.

Explanation: Please mark \( \overline{\pi} \) the level of opinion that is most relevant to you.

Opinion Level 5 = Highest Demand

Opinion Level 4 = High Demand

Opinion Level 3 = Moderate Demand

Opinion Level 2 = Minor Demand

Opinion Level 1 = Minimal Demand

| Needs of Eldouly Welfore Systems   | Demand Level |     | Level |        |   |
|--|--------------|-----|-------|--------|---|
| Needs of Elderly Welfare System  | 5            | 4   | 3     | 2      | 1 |
| Health   |              |     |       |        |   |
| 1. Healthcare free of charge   | M            | 4   |       |        |   |
| 2. Special treatments and services to facilitate elderly   |              |     |       |        |   |
| 3. You have a need for convenience with a health facility near your home.  | 1            | 6   |       |        |   |
| 4. You want to have a home visit consultation for health care advice by a health worker.   |              |     |       |        |   |
| 5. You want public and private services to provide general counseling services to the elderly thoroughly.                              | M            |     |       | (S)(S) |   |
| Education  |              |     |       |        |   |
| 1. You have a need for appropriate knowledge especially on matters directly sponsored by the government for other rights and benefits. | บร           | 500 |       |        |   |
| 2. You have a desire to acquire appropriate  |              |     |       |        |   |
| knowledge through broadcasting through radio,  |              |     |       |        |   |
| television, newspapers, and knowledgeable  |              |     |       |        |   |
| personnel.   |              |     |       |        |   |

| Needs of Elderly Welfare System                  | Demand Level |               |     |      |     |
|--|--------------|---------------|-----|------|-----|
| Needs of Enderry Wehate System                   | 5            | 4             | 3   | 2    | 1   |
| 3. You want to receive age-appropriate           |              |               |     |      |     |
| vocational training for the elderly for creative |              |               |     |      |     |
| activities.                                      |              |               |     |      |     |
| 4. You want to participate and contribute in     |              |               |     |      |     |
| social activities such as sharing wisdom and     | 121          | 7             |     |      |     |
| knowledge.                                       |              |               |     |      |     |
| 5. You want to have a campaign to raise          |              |               |     |      |     |
| awareness of the value and dignity of the        |              |               |     |      |     |
| elderly.   |              | $\mathcal{A}$ |     |      |     |
| Residential                                      |              |               |     |      |     |
| 1. You want a nursing home for the elderly at    |              | 8             |     |      |     |
| the sub-district level.                          |              |               |     |      |     |
| 2. You want the government to provide welfare    |              | 10            |     |      | 000 |
| for the elderly for free.                        |              | 9             |     |      |     |
| 3. You want to live in a nursing home for the    |              |               |     |      |     |
| elderly.   |              |               |     | 7/4, |     |
| 4. You have a need for a low-interest loan       |              |               |     | / 5  | 7/1 |
| source program for housing for the elderly.      |              |               |     | 18   |     |
| 5. You have a need for housing and an in-        |              |               |     |      |     |
| house medical facility for treatment.            |              |               | 1,9 |      |     |
| Safety   |              |               |     |      |     |
| 1. You have a need for peace and safety          | 218          | ישה           |     |      |     |
| management for the elderly in public buildings.  | 0            |               |     |      |     |
| 2. You want to have government and private       |              |               |     |      |     |
| agencies responsible and support elderly that    |              |               |     |      |     |
| are in danger of being abused and being          |              |               |     |      |     |
| exploited unlawfully and abandoned.              |              |               |     |      |     |
| 3. You have a need for on-site amenities public  |              |               |     |      |     |
| for the elderly such as corridors and toilets.   |              |               |     |      |     |

| Needs of Elderly Welfare System              | Demand Level |   | Level |   |   |
|--|--------------|---|-------|---|---|
| recus of Elderry Welfare System              | 5            | 4 | 3     | 2 | 1 |
| 4. You have a need for treatment services at |              |   |       |   |   |
| every step.                                  |              |   |       |   |   |
| 5. You have a desire to establish an elderly |              |   |       |   |   |
| service unit in every community.             |              |   |       |   |   |

# Part 3 is an opinion questionnaire on the implementation of the elderly welfare policy.

Explanation: Please mark ☑ the level of opinion that is most relevant to you.

Opinion Level 5 = Highest Demand

Opinion Level 4 = High Demand

Opinion Level 3 = Moderate Demand

Opinion Level 2 = Minor Demand

Opinion Level 1 = Minimal Demand

| Opinion on the Implementation of the   | Demand level |   |   |   |    |
|--|--------------|---|---|---|----|
| Elderly Welfare Policy   | 5            | 4 | 3 | 2 | 1/ |
| Defining the welfare system  |              |   |   |   |    |
| 1. You have a good understanding of the pension project.   |              |   |   | 5 |    |
| 2. You have a plan for using welfare for the elderly.  | 1/2          |   | 5 |   |    |
| 3. You have a management process to create an understanding of the welfare system for every project. |              |   |   |   |    |
| 4. You agree with the integration of long-term welfare programs for the elderly.                     |              |   |   |   |    |

| Opinion on the Implementation of the            | Demand level |   |     |       |   |
|---|--------------|---|-----|-------|---|
| Elderly Welfare Policy                          | 5            | 4 | 3   | 2     | 1 |
| 5. You have an opinion on the promotion of the  |              |   |     |       |   |
| government to promote the welfare of the        |              |   |     |       |   |
| elderly in a new way.                           |              |   |     |       |   |
| - 1517 >  |              |   |     |       |   |
| <b>Promotion of Community Public Policy</b>     |              |   |     |       |   |
| 6. You have learned policy plans from           |              |   |     |       |   |
| community agencies to support elderly welfare   |              |   |     |       |   |
| projects.                                       |              |   |     | 5     |   |
| 7. You are assisted by the community in         |              | 7 |     |       |   |
| implementing flexible program rules to          |              | 4 |     |       |   |
| facilitate welfare management.                  |              |   |     |       |   |
| 8. You are given the opportunity to comment     |              |   |     |       |   |
| on the offering of assistance to the elderly.   |              |   |     |       |   |
| 9. You think that networking in elderly welfare |              | P |     |       |   |
| management can be easily implemented such as    |              |   |     |       |   |
| reimbursement of living expenses.               |              |   |     | // 4, |   |
| 10. You think that the management system in     | W            |   |     | 1/5   |   |
| the community should be up-to-date and there    |              |   |     |       |   |
| should be an understanding of the community     |              |   |     |       |   |
| for knowledge and strengthening the use of      |              |   | 1,9 |       |   |
| welfare.  |              |   | (2) |       |   |
| Sustainability                                  |              |   |     |       |   |
| 11. You think that social aspect of the elderly | 9            |   |     |       |   |
| can improve well-being in the future through    |              |   |     |       |   |
| the help of agencies.                           |              |   |     |       |   |
| 12. You think that the welfare system           |              |   |     |       |   |
| development policy plan strengthens the         |              |   |     |       |   |
| community and the elderly.                      |              |   |     |       |   |

| <b>Opinion on the Implementation of the</b>    | Demand level |     |     |      |     |
|--|--------------|-----|-----|------|-----|
| Elderly Welfare Policy                         | 5            | 4   | 3   | 2    | 1   |
| 13. You think that the cooperation of external |              |     |     |      |     |
| networks in organizing welfare system will     |              |     |     |      |     |
| help the elderly.                              |              |     |     |      |     |
| 14. You think the welfare promotion process    |              |     |     |      |     |
| should be managed in a modern way to ensure    | 1            | 7   |     |      |     |
| stability and uniformity for all projects.     |              |     |     |      |     |
| 15. You think that government agencies should  |              |     |     |      |     |
| continually provide protection of rights.      |              |     |     |      |     |
| <b>Budget management process</b>               |              |     |     |      |     |
| 16. You think that the elderly care budget     | M            | 4   |     |      |     |
| should be allocated in accordance with the     |              |     |     |      |     |
| welfare program.                               |              |     |     |      |     |
| 17. You think there should be an allocation of |              |     |     |      |     |
| income during old age that is suitable for the |              | 9   |     |      |     |
| target audience.                               |              |     |     |      |     |
| 18. You think that a fund system should be     |              |     |     | 7/4, |     |
| planned with a distribution based on the       |              |     |     |      | ?// |
| specified objectives for audit purposes.       | 10           |     |     |      |     |
| 19. You think that the community welfare       |              |     |     |      |     |
| savings system can create stability for the    |              |     | 1,9 |      |     |
| elderly.                                       |              |     | (2) |      |     |
| 20. You think that the integrated plans of     | 245          | 100 |     |      |     |
| government agencies can manage and allocate    | U            |     |     |      |     |
| expenditure budgets thoroughly.                |              |     |     |      |     |

Part 4: What is your opinions about the development of the elderly welfare system policy under the sustainability principles in the northeast of Thailand to be applied as a future development plan.

.....





# **Interviewee Information**

| AgeOrganization   |
|---|
| 1. What do you think the current senior welfare management system is? Please analyz |
| the following situations?   |
| 1.1 The situation of the elderly in the country                                     |
|   |
|   |
| 1.2 Determination and public planning of welfare for the elderly                    |
|   |
|   |
|   |
| 2. How should the guidelines for implementing policies in the management of the     |
| elderly welfare system in the northeast of Thailand be a process or a form of       |
| determination?  |
| 2.1 Determine the welfare system and the political system consensus of the          |
| parliament  |
|   |
|   |
| 2.2 Promote the community policy with the people as the center                      |
|   |
|   |
| 2.3 Using the context of sustainability development goals principles                |
|   |
|   |
| 2.4 Financial system and budget management process                                  |
|   |
|   |

| implementation under sustainability principles for future integration and for the             |
|---|
| stability of the policy plan for successful management?                                       |
| 3.1 Budget allocation   |
|   |
|   |
| 3.2 Training of government officer  |
|   |
|   |
| 3.3 Social participation  |
|   |
| /   |
| 3.4 Database structure  |
|   |
|   |
|   |
| 4. What are your improvement guidelines for implementing the elderly welfare system           |
| policy plan in practice under sustainability principles to generate stability in the future's |
| <i></i>   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

### **BIOGRAPHY**

Name-Surname Saratsanun Unnopporn

**Academic Background** Master of Arts (International Commerce)

Graduate School of International Studies

Korea University, Seoul, Republic of Korea, 2011-2013 Bachelor of Arts (Hotel and Tourism Management) Bangkok University International College, Bangkok,

Thailand, 2006-2009

**Experience** 2013-2015

Economic Analyst, Embassy of the Republic of Korea in

Thailand 2017-Present

Managing Director (Oil and Retail Business)

2019-Present

Member of Parliament