

AP

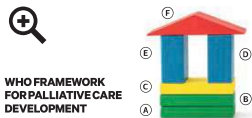


General data

POPULATION, 2023
71,702,435
SURFACE, KM², 2022
513,120
PHYSICIANS / 1,000 INH, 2022
0,558,58

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
Upper-middle
HUMAN DEVELOPMENT INDEX RANKING, 2021
66
GDP PER CAPITA (US\$), 2023
7182,03
HEALTH EXPENDITURE (% GDP), 2021
5,16
UNIVERSAL HEALTH COVERAGE, 2021
82



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

- Ⓐ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- Ⓑ POLICIES
- Ⓒ RESEARCH
- Ⓓ USE OF ESSENTIAL MEDICINES
- Ⓔ EDUCATION AND TRAINING
- Ⓕ PROVISION OF PC

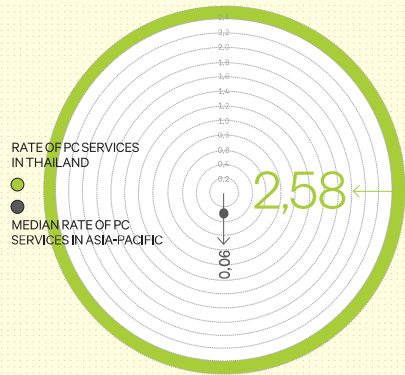


Thailand

F Provision of PC (Specialized Services)

Total number of Specialized PC services
1850*
* Note: More than
Rate of PC services per 100,000 inhabitants
2,58

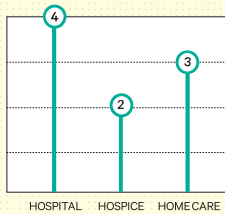
Thailand in the context of Asia-Pacific regions



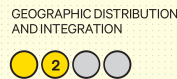
Geographic distribution and integration of PC services



Level of development of different types of PC services



Pediatric PC Services



TOTAL NUMBER
10

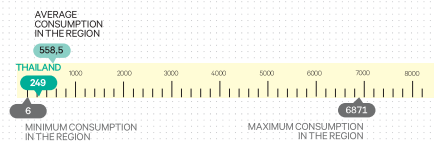
AP

Thailand

D Use of essential medicines

Opioids consumption (excluding methadone)
249
S-DDD/MILLIN HABITANTS/DAY

Thailand in the context of Asia-Pacific regions



Overall availability of essential medicines for pain and PC at the primary level



General availability of immediate-release oral morphine at the primary level



C Research

PC-related research articles
3

Existence of PC congresses or scientific meetings
4

National Association: Thai Palliative Care Society.
Consultants: Duenpen Horatanaruang, Jiraphan Naruepatr.

Data collected: June-September 2024.
Report validated by consultants: October - November 2024
Report sponsored by National Association: Yes
Edited by Atlantes Research Team University of Navarra (Spain)

E Education & Training

Medical schools with mandatory PC teaching
28/28

Nursing schools with mandatory PC teaching
38/95

Recognition of PC specialty
4

B Policies

National PC plan or strategy
4

Responsible authority for PC in the Ministry of Health
4

Inclusion of PC in the basic health package at the primary care level
4


A Empowerment of people and communities


Groups promoting the rights of PC patients
4

Advanced care planning-related policies
4

AP Thailand

People & Communities

<p>Ind1</p> <p>Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.</p>	 <p>Strong national and sub-national presence of palliative care advocacy and promoting patient rights (as a professional association of Palliative Care, i.e.)</p>	<p>Thailand has multiple organizations collaborating with the government and international bodies to enhance palliative care and advocate for patients and caregivers. The Thai Palliative Care Society (THAPS) promotes professional education, awareness, and policy reforms for better access to care. The Karunruk Palliative Care Center serves as a national training hub. Peaceful Death raises public awareness on dying, grief, and bereavement. The National Cancer Institute (NCI) integrates palliative care into oncology. The Buddhika Network Foundation addresses social issues through initiatives like 'Bed Beside Volunteers' and 'Happy Death Day.' The Chivamit Foundation educates the public on elderly well-being across multiple dimensions. Yen Yen Co. and the Palliative Care Nurses Association are also key organizations in the promotion of palliative care.</p>
---	--	--


<p>Ind2</p> <p>Is there a national policy or guideline on advance directives or advance care planning?</p>	 <p>There is a national policy on advance care planning.</p>	<p>Thailand's National Health Act (2007) introduced Advance Directives (AD) under Section 12, but physician adoption has remained limited. The National Health Commission Office (NHCO) oversees Advance Care Planning (ACP) and has appointed a steering committee for nationwide implementation. The Ministry of Public Health (MOPH) integrates ACP into health service plans and monitors its progress. Since 2016, ACP has been a key performance indicator (KPI) for health inspections. The Karunruk Palliative Care Center, with NHCO support, has provided ACP training for professionals. A national data centre allows hospitals to access ACP and AD records. In 2019, Thai Quality Standards for Palliative Care were established, with ACP as one of 11 key standards.</p>
---	---	--


Policies

<p>Ind3</p> <p>3.1. There is a current national PC plan, programme, policy, or strategy.</p>	 <p>Actualized in last 5 years, and actively evaluated or audited.</p>	<p>Thailand introduced its Palliative Care Policy in 2014, with its inclusion in the 2016 Health Service Plan playing a key role in system preparedness. The National Health Security Office (NHSO) has supported palliative home care since 2016 through e-claims, significantly expanding services. By 2019, 97.3% of regional/general hospitals and 96.1% of community hospitals had established palliative care programs. The Ministry of Public Health (MOPH) oversees the National Palliative Care Program, monitoring and evaluating its progress. A National Palliative Care Committee collaborates with academic institutions, the Food and Drug Administration (FDA), and the NHSO to expand services nationwide. This initiative is integrated into the National Cancer Strategy, long-term care, elderly care, and End-Stage Renal Disease (ESRD) program. Supported by national legislation, guidelines and indicators are in place to implement, monitor, and evaluate palliative care services across Thailand.</p>
<p>3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.</p>	 <p>Yes, there is a standalone national palliative care plan AND/OR there is national palliative care law/legislation/ government decrees on PC.</p>	

AP Thailand

Policies

<p>3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.</p>	 <p>The Indicators to monitor and evaluate progress are currently implemented.</p>	
--	---	--

<p>Ind4</p> <p>PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.</p>	 <p>Palliative care is included in the list of health services provided at the primary care level in the General Health Law.</p>	<p>The Thai Ministry of Public Health (MOPH) addresses health inequity through three major policies: Region-based health services improve resource sharing and referrals; Health Services Development Plan ('Service Plans') prioritizes primary and holistic care, family care teams, and long-term community support; District Health System (DHS) fosters multisectoral collaboration through the U-CARE approach, integrating palliative care into primary care since 2016. The National Health Security Office (NHSO) manages Universal Health Coverage (UHC), offering extensive benefits, including an additional budget for dependent older persons in 2024 under a long-term care (LTC) policy. Palliative and end-of-life care services fall under this target group, with local governments playing a co-management role, particularly in rural communities. Since 2015, Karunruk has trained nurses and doctors in palliative care, enhancing community services. The NHSO reimburses palliative home care and, by 2025, will support hospital-in-the-home care for dying patients, ensuring nationwide palliative care accessibility.</p>
--	---	--

<p>Ind5</p> <p>5.1. Is there a national authority for palliative care within the government or the Ministry of Health?</p>	 <p>The coordinating entity for palliative care is a well-defined and has a good structure (scientific & technical).</p>	<p>Thailand's Ministry of Public Health (MOPH) manages palliative care through various government organizations. The Department of Medical Services focuses on clinical and rehabilitation aspects, while the Department of Health ensures service implementation in community settings, creating a comprehensive system. The National Health Commission Office (NHCO) develops, implements, and evaluates palliative care policies, including advance care planning and directives. The National Health Security Office (NHSO) plays a crucial role in supporting long-term care (LTC) and palliative care funding. The Hospital Accreditation Institute incorporates palliative care indicators into hospital accreditation, while the Thai FDA ensures opioid availability. The Ministry of Social Development and Human Security and the Ministry of Interior focus on providing social welfare and integrating palliative care into local health systems. Additionally, NGOs contribute significantly, with the Thai Palliative Care Society promoting education, the Karunruk Palliative Care Center providing professional training, and Peaceful Death Group and Chewamit Social Enterprise raising public awareness.</p>
<p>5.2. The national authority has concrete functions, budget and staff.</p>	 <p>There are concrete functions, staff and budget.</p>	

AP Thailand

Research

Ind6

Existence of congresses or scientific meetings at the national level specifically related to PC.



At least one national conference specifically dedicated to palliative care every 3 years.

Thailand actively promotes palliative care through national and international conferences. The Department of Medical Services hosts the Annual National Palliative and Hospice Care Conference, first held in 2015. The National Health Commission Office (NHCO) organizes a biennial conference on palliative and end-of-life care to raise public awareness, strengthen networks, and promote understanding of Advance Directives under Section 12 of the National Health Act, for which NHCO is the lead agency. Additionally, the Thai Palliative Care Society holds an annual conference for health professionals, while the Karunruk Palliative Care Center organizes an Annual International Conference in Palliative Care. These conferences collectively enhance professional education, community engagement, and policy implementation in palliative care across Thailand.

Ind7

Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.



Represents a considerable amount of articles published.

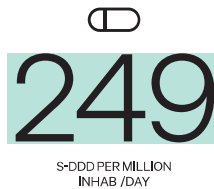
The Karunruk Palliative Care Research Collaboration Center (KPCRCC) was established in early 2024 with a mission to create a national research network for palliative care in Thailand, disseminate findings through academic publications and research training, provide consulting services for medical and public health professionals, and serve as a national research hub for palliative care. KPCRCC conducted a survey on published research in both Thai and English from 2019 to 2024, identifying 164 Thai manuscripts and 35 English manuscripts.

Medicines

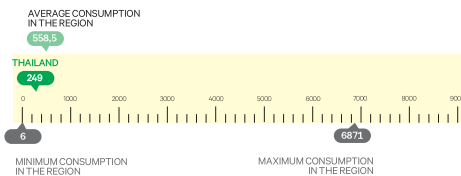
Ind8

Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.

Pain relief and palliative care in Thailand has significantly improved in recent years. Since 2009, the National Health Security Office (NHSO) has fostered networking between palliative care services in hospitals and their surrounding communities. In 2010, the Government Pharmaceutical Organization began producing immediate-release oral morphine tablets and liquid formulations, both approved by the Thai FDA. This development had a notable impact on annual morphine equivalent (ME) consumption, which increased from 3.96 mg per capita in 2010 to 5.85 mg per capita in 2015.



COUNTRY VS REGION



AP Thailand

Medicines

Ind9

9.1. Percentage of health facilities at the primary care level in urban areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.



Very good: Between 70% to 100%.

9.2. Percentage of health facilities at the primary care level in rural areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.



Very good: Between 70% to 100%.

Thailand's hospital system operates as a regional network, linking tertiary hospitals with primary healthcare facilities through 13 health region networks, with Bangkok managed separately by local authorities. Tertiary hospitals serve as flagship institutions, supported by district-level secondary hospitals and primary hospitals, ensuring an integrated referral system that includes community homecare services and medication access. According to the Ministry of Public Health (MOPH), district hospitals are crucial for community healthcare, though some primary hospitals lack essential WHO-recommended medications. Efforts are ongoing to improve access across provinces. A national survey by the Health Administration Division, MOPH, assessing 629 hospitals, found that between 37% and 98% of facilities had pain and palliative care medications listed in the WHO Model List of Essential Medicines.



PERCENTAGE OF HOSPITALS WITH PAIN AND PC MEDICINES AS DEFINED IN WHO MODEL LIST.

Ind10

10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).



Good: Between 30% to 70%.

10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).



Good: Between 30% to 70%.

The Health Administration Division, MOH conducted a national survey across 629 hospitals to assess opioid availability. The findings revealed that morphine syrup was available in 58% of facilities, while immediate-release morphine was accessible in 35.4% of hospitals.



PERCENTAGE OF HEALTH FACILITIES WITH ORAL MORPHINE AVAILABILITY.

AP Thailand

Education & Training

Ind11

11.1. The proportion of medical schools with **COMPULSORY** teaching in PC (with or without other optional teaching) over the total number of medical schools in the country

28/28



In Thailand, palliative care education is mandatory in all medical schools, integrated into Part 3 (Health Care System and Health Promotion) to meet the Medical Council of Thailand's national licensing competency criteria. This ensures 100% of medical students receive formal palliative care training. However, a recent study shows that teaching hours vary significantly (2–33 hours), with lectures and seminars being the primary methods and minimal clinical exposure. The lack of hands-on training leaves graduate doctors and nurses without essential palliative care skills, making post-graduate training crucial. Palliative care education is provided by Karunruk Palliative Care Center (Khon Kaen University) and the Thai Palliative Care Society (THAPS), led by Assoc. Prof. Srivieng Pairojkul. Among 95 nursing schools, 38 include compulsory palliative care training, and about ten schools offer a 16-week optional program accredited by the Thailand Nursing and Midwifery Council for nurses with at least one year of professional experience.

11.2. The proportion of medical schools with **OPTIONAL** teaching in PC...

0/28

11.3. The proportion of nursing schools with **COMPULSORY** teaching in PC (with or without other optional teaching) over the total number of nursing schools in the country.

38/95

11.4. The proportion of nursing schools with **OPTIONAL** teaching in PC...

10/95

Ind12

12. Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.



Palliative medicine is a speciality or subspeciality (another denomination equivalent) recognized by competent national authorities.

In Thailand, five medical schools provide a one-year full-time specialization in palliative care for physicians. Since 2017, the "Certificate in Palliative Care in Family Medicine" has been accredited by the Medical Council of Thailand and the Royal College of Family Physicians of Thailand, with physician training officially beginning in 2018 as a subspecialty within Family Medicine. Additionally, a two-year specialist training program in Palliative Medicine is set to be introduced in 2026.

AP Thailand

Provision of PC / Services

Ind13

13.1. There is a system of specialized PC services or teams in the country that has a **GEOGRAPHIC** reach and is delivered through different service delivery platforms.



Integrated provision: Specialized palliative care services or teams are systematically provided.

13.2. Are available in **HOSPITALS** (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.



Are part of most/all hospitals in some form.

13.3. Free-standing **HOSPICES** (including hospices with inpatient beds).



Ad hoc/ in some parts of the country.

13.4. **HOME CARE** teams (specialized in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.

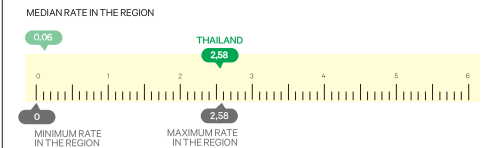


Found in many parts of the country.

13.5. Please enter the total number of specialized PC services or teams in the country.

The Ministry of Public Health has integrated palliative care into primary healthcare, with dedicated teams established in flagship tertiary and district-level hospitals. Primary-level hospitals rely on the collaborative "Health Region Network," where district hospitals act as central hubs connecting tertiary and local facilities. Approximately 900 hospitals provide PC services, and around 50 free-standing hospices exist, though these remain relatively new. Home-based PC is typically hospital-affiliated and coordinated through the Health Region Network, ensuring continuity of care. Currently, only one social enterprise operates independently to provide home-based PC. Thailand has at least 1,850 specialized palliative care (PC) services, corresponding to a rate of 2.58 services per 100,000 inhabitants.

RATE OF SPECIALIZED PC SERVICES/100,000 INH



1850*

← SPECIALIZED PALLIATIVE CARE SERVICES

Note: * More than

Ind14

14.1. There is a system of specialized PC services or teams for **children** in the country that has **geographic** reach and is delivered through different service delivery platforms.



Isolated provision: palliative care specialized services or teams for children exist but only in some geographic areas.

14.2. Please enter the total number of pediatric specialized PC services or teams in the country.

10

PPC TEAMS

Palliative care teams in several regions of Thailand provide services to both adults and children, though access to pediatric palliative care remains limited. Specialized pediatric palliative care teams are primarily found in children's hospitals and university-affiliated medical centres. In most cases, pediatric palliative care services are restricted to specific units, such as those for cancer or neurological diseases. The Karunruk Palliative Care Center is the only facility in Thailand offering a comprehensive perinatal and neonatal palliative care program.