

Changes in Health Care Utilization in Thailand

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ABSTRACT

The health care system in Thailand is pluralistic. Thais are generally involved with both modern and traditional health treatments and seek health care from many sources of government and private practices when they are ill. However, during a single illness episode, patients are more likely to change sources of health care, ranging from lay treatment to highly professional health care. Riley and Sermsri (1974) identified Thai behavior in seeking health care as a “switching health care pattern.” In the 1970s, government health services affiliated with modern medicine, were grossly under-utilized, while traditional health care was private and favored. By the end of the 1990s, government health care became preferable, particularly for the majority of the poor in rural areas and the use of traditional medicine faded. This paper overviews 30 years of health care utilization patterns in Thailand (1970-2000) with the findings that change in health utilization is clearly observed, shifting from a gross under-utilization to a preference for government health care services. This paper holds that the shift lies with the emphasis of health authorities within the domain of the Thai medical care system. The implications of this change are now assessed for further research and policy planning.

MODERN AND TRADITIONAL MEDICINE

In Thailand when one has an illness, he/she can obtain health treatment from several sources and forms of medical care including government health services, private practices and modern and traditional health treatment. It has been documented that during 26 years of modern health care utilization era in Thailand (1970-1996) the predominant source of health care was self-treatment and the use of drugstores (Table 1). The most common practice among Thais was to buy medicine from drugstores where both traditional and modern medicine are available without the requirement of a physician’s prescription. However, when Thais were asked to express their preferred mode of treatment, modern medical care was the most preferred. This modern health care is available within government health practices. Modern medicine is considered to provide more effective outcomes and to be superior to traditional health treatment. Riley and Sermsri (1974) had identified the superiority of modern medicine as due to three components of the health care system, namely, medicine, personnel and techniques of treatment. A recent study (Sawangdee et al., 2000) confirms that the expertise of modern health care providers and medical equipment in big hospitals attract many patients even though their illness is not severe. Good quality care is then dependent upon the availability of health specialists and technologies.