Disaster-based budgeting in new public health policy of Thailand

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Abstract

The Public Health System (PHS) has been established under Ministry of Public Health but its financial practices have to abide by the regulations issued by the Comptroller General Department (CGD), which is responsible for legislating financial regulations for all government organizations to manage their allocated budget within a fiscal year starting from October 1 to September 30 of the following year. The budget is allocated each year for the PHS is a function-based budgeting system. It is mainly used for PHS’s regular works or its normal situations not for any disaster events. Should there be any disasters, an additional burden will fall to local public health staffs that live in those particular areas. To help solve this problem, a review and modification of the function-based budgeting system should be seriously considered and undertaken. This study focused on two main issues concerning the management of disaster budgeting system. The first one concentrated on an appropriate budget allocated for health management expenditure within seventy two hours after a disastrous occurrence based on Public Health Incident Command System (PHICS). The second one emphasized a practical management pattern for each disaster phenomena having occurred before 2016. Each site of disaster such as flood, landslide, and earthquake, etc. was surveyed for its severity and impacts. Based on the Incident Command System (ICS) management, interview and questionnaire were employed to obtain information. The data of disastrous area contexts and characteristics were integrated into a new financial strategy: preparation, protection, response and rescue (2R’s2P’s) for seventy-two hour disaster financial system. The 2R’s2P’s was classified into two levels, national level and local level, with limitations as follows: disaster unpredictability and local agencies’ capacity in collecting data. Consequently, an appropriate financial system was proposed in compliance with real situations.

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Peer-review under responsibility of the scientific committee of the 7th International Conference on Building Resilience.

Keywords: Budget, Disaster, Public Health, Incident Command System, Thailand.

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1. Introductions and backgrounds

The 1997 Thai constitution stated that basic health right of population shall be provided by the Ministry of Public Health of Thailand. The Ministry of Public Health has provided various health care system levels: provincial level, district level, and sub-district level. In general, the medical treatments in Thailand are classified into three health system groups; government employee group, general employee group, and population group. Nowadays, the new constitution, based on the country reformation process, states that during a disaster situation, everyone shall necessarily be provided with the health curing and treatment. Based on the report of Disaster Prevention and Mitigation Office, the Ministry of Interior, the three most devastating disasters in Thailand are floods, earthquakes, and landslides. Those three types of disasters have different characteristics. By integrating that differential characteristics into the management system, the budgeting system should be the flexible and effective system. The budgeting system in Thailand is based on regular duties or situation, thus disaster budget system has been improved to suit general characteristics of disasters. The old budgeting system created a lot of chaos and confusions. After disaster events, health staffs usually have faced with the financial disaster instead. Disaster situation induced unexpected expenditure. The exceeding expenditure depends on many factors, such as disaster severity, location of disaster area, hazardous area, and so on. Consequently, hospitals in risk area are prone to face future development problems. Two main objectives were focused in this study. The first objective concentrated on an appropriate budget allocated for health management expenditure within seventy two hours after a disastrous occurrence based on Public Health Incident Command System (PHICS). The second one emphasized a practical management pattern for each disaster phenomena having occurred before 2016.

### Nomenclature

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ICS</td>
<td>incident command system</td>
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<td>PHICS</td>
<td>public health incident command system</td>
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<td>PHS</td>
<td>the public health system</td>
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<td>SOP</td>
<td>standard of practices</td>
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<td>CGD</td>
<td>The Comptroller General Department</td>
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<td>2P2R</td>
<td>prevent, protect, response, rescue</td>
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<td>DPM</td>
<td>Disaster prevention and mitigation office, Thailand</td>
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2. Disaster Management in Thailand


Sendai Framework is the framework that Thai governmental organizations have adopted disaster risk reduction system. The Sendai Framework is the successor of Hyogo Framework for Action (2005-2015). The goal of Sendai Framework [5] is to prevent new and reduce existing disaster risk through the implementation of integrated and inclusive economic, structural, legal, social, health, cultural, educational, environmental, technological, political and institutional measures that prevent and reduce hazard exposure and vulnerability to disaster, increase preparedness for response and recovery, and thus strengthen resilience. Thailand has constantly modified the disaster management system. The new system is designed to centralize the management procedure in form of National Disaster and Mitigation Committee. This committee works under current national disaster and mitigation plan.

2.2. Structure of disaster management of Thailand

In general, Disaster Prevention and Mitigation office (DPM) [1] is the main organization and many government organizations participate in the management system to undertake designated duties as shown in figure 1[2]. Normally, designated duties are the same as their regular basis duties, excepting that, in a disaster situation, staffs may work outside the responsible area. The Ministry of Defense and The Ministry of Interior are included in the management
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