



National Health Examination Survey in Thailand

Looking to the Past to Build a Better Future

The evaluation of public health in Thailand is conducted via the National Health Examination Survey (NHES). This programme has been implemented since 1991 and serves as an important source of health data due to comprehensive and accurate medical examinations conducted by medical personnel – which are more precise than hospital reports or questionnaires completed by sample groups. An assessment of the NHES conducted by the Health Intervention and Technology Assessment Program (HITAP) in 2016-2017 concluded that the lack of governance and effective management resulted in many problems when conducting the survey, e.g. duplicate findings with other health surveys; survey results not being utilised to the fullest potential when drafting policies or conducting further studies; no plans for the long-term development of the survey in terms of regulations, research methods, tools, equipment, personnel, and the management of benefits. Therefore, the Ministry of Public Health (MoPH) and the Health Systems Research Institute (HSRI) should take the lead to address these issues and further develop the NHES by defining an appropriate strategy, creating tools to integrate various surveys, and coordinating with all relevant agencies.

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Relevance

The NHES's strength lies in the comprehensive analysis in terms of laboratory examinations, providing current health status, health behaviour, and risk factors for contracting diseases and health problems of national priority. This is of great importance in creating health policies and assessing various health intervention plans.



Problems and Challenges:

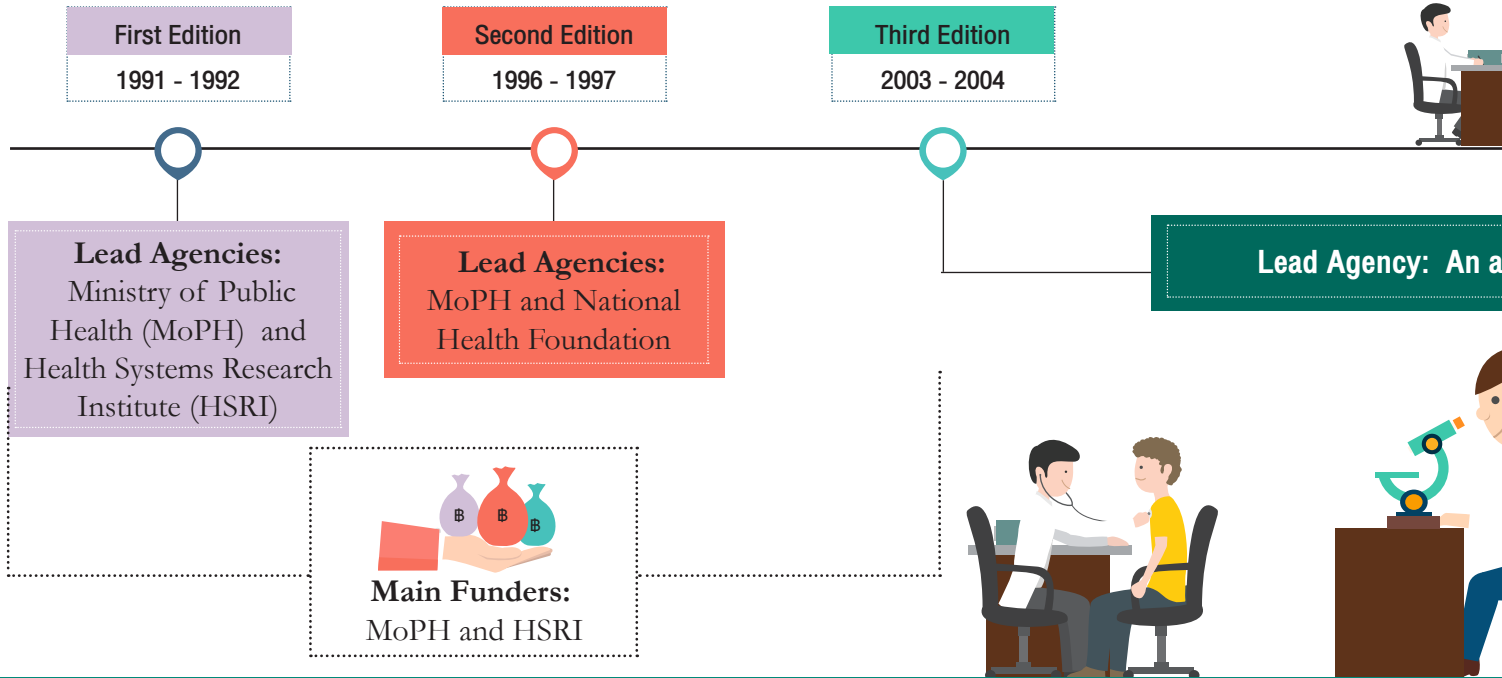
1. **Usage of health data and other information:** Health data and other information obtained from the NHES are not utilised to the fullest potential due to limitations resulting from the ineffective management of the agency responsible for conducting the NHES. Rules and regulations for the usage of health data and other information are vague and not relayed to researchers in other agencies.
2. **Managing the NHES:** Lack of governance and strategy in managing and developing the NHES in the long-term. As a result, this impacts the continuity of the NHES and its funding, the development of survey methodology, and capacity building for researchers and relevant agencies.



Policy Recommendations

1. The MoPH and HSRI should take charge in developing a governance structure and policies relevant to the NHES.
2. The HSRI should be responsible for managing the NHES while coordinating with all relevant agencies.

The evaluation of public health in Thailand was first conducted in 1991, with both central and regional agencies are involved in this project and receive funding.



Project Funding

The agencies tasked with implementing the NHES must develop a proposal and request for funding for each edition of the survey as there is no long-term budget allocation by the government for this project and its activities – which must be implemented continuously. These include developing/testing certain tools, developing and managing databases, preserving samples, building the capacity of researchers in agencies which produce and use the data, and knowledge management.

Project Strengths

- ✓ It is a population survey that covers a broad range of health problems and utilizes research methods that are internationally accepted.
- ✓ Implemented by a network of researchers in universities at both central and regional levels with vast expertise and experience.
- ✓ Defining issues and developing tools will provide a chance for agencies and relevant experts to participate.

Which research method did HITAP use for evaluation?

In 2016, the Thai Health Promotion Foundation assigned HITAP to conduct an evaluation of the survey because it had never been evaluated in a systematic manner since its conception. This assessment included evaluating the governance system, management, research methodology, benefits received from data utilization, and analyzing problems, obstacles, and various factors so that recommendations could be made to improve the survey in the future. This evaluation was conducted between September 2016 – April 2017, with data collection being done qualitatively, e.g.

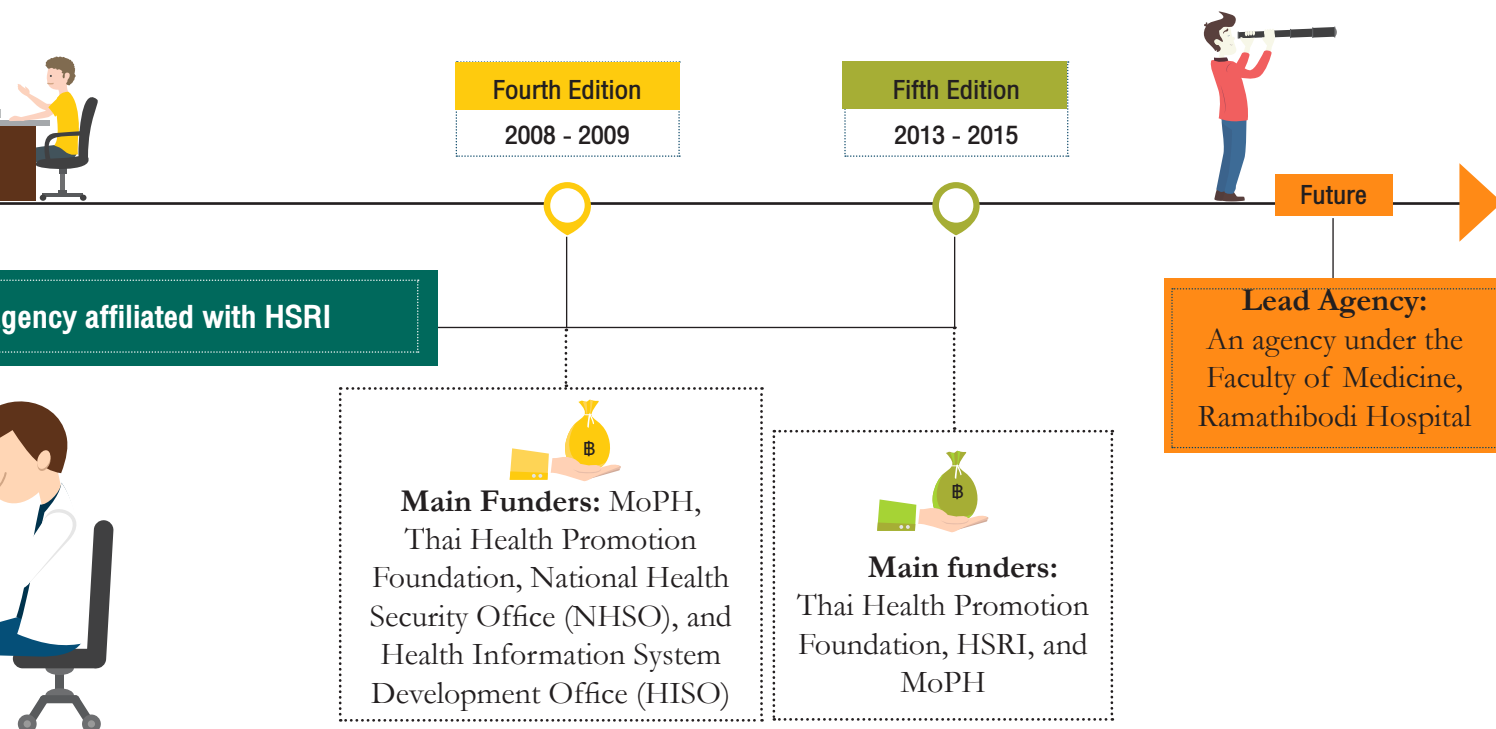
Reviewing documents (project proposals and health examination reports, articles published in academic journals), public information obtained from agency websites.

In-depth interviews with 26 personnel from various agencies (funders, those responsible for the evaluation, those utilizing survey results data, experts/researchers, and relevant agencies),

Self-evaluation surveys.

Health Examination Survey in Thailand

an update conducted every 5 years. Researchers, experts, and personnel from multiple agencies. For the 5th edition, the project received 60 million baht.



Problems Encountered

Although the NHES has been implemented for 25 years already, it...

- X** Has not yet been institutionalized
- X** Lacks continuity in terms of policy and the agency responsible for overseeing the survey.
- X** Lacks an effective system for management, and monitoring and assessing results.
- X** Lacks a long-term development plan regarding research methodologies, tools, personnel, and managing/adding value in utilizing the collected data.

Problems faced by

Agencies that want to Utilize the Data

Many problems have occurred such as...

- X** Implementing the survey every 5 years is not consistent with the objective of utilizing this data for the monitoring and assessment purposes of other agencies. As such, it results in duplicate
 - X** Surveys being conducted as these other agencies need to have more updated information.
- Researchers want to build capacity in order to understand the variables and factors involved so they can analyze the data in a manner that is appropriate with their agency's objectives.

Health Evaluation in the Thai Context

Many agencies in Thailand implement surveys related to public health on both larger and smaller scales, with the differences being the surveying period. However, these surveys still lack a governance system and strategy for surveying public health even though researchers and other resources are limited. The individual implementation of these surveys results in the lack of integration – particularly for priority-setting so that the appropriate resources can be allocated for health surveys, and surveying the same issue repeatedly, e.g. risk behaviours for non-communicable diseases, smoking, drinking, physical activity, reproductive health, and health issues in the elderly.

Policy Recommendations

1. The government should allocate public funds to the NHES, as well as any NHES-related activities and development activities. Moreover, agencies interested in utilising the NHES data should jointly invest in the surveying process. Communications tools should also be created to allow all funders to jointly monitor the NHES's progress.
2. The MoPH and HSRI should lead the development of a governing body and policy for the NHES, with the HSRI coordinating policy implementation, monitoring, and evaluation.
3. The HSRI should be the agency responsible for managing the NHES by collaborating with relevant agencies – NHES funders, users benefitting from the use of NHES data, and universities – to further develop the NHES and set priorities in addressing various issues, build capacity in personnel, support the use of NHES data in a beneficial manner, and create a long-term plan for the NHES.

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Access the full article at <http://www.hitap.net/en/research/167974>

This document is one part of the research project An evaluation of the National Health Examination Survey in Thailand by Dr. Sripen Tantivess, Dr. Udomsak Saengow, Dr. Jomkwan Yothasamut, Dr. Yot Teerawattananon, Ms. Wilailak Saengsri



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