



SITUATION OF THE THAI OLDER PERSONS

2024

Cover: Mr. Dhanin Clearavanont

National Older Person of the Year 2024



SITUATION OF THE THAI OLDER PERSONS

2 0 2 4



Situation of the Thai Older Persons, 2024

National Library of Thailand Cataloging in Publication Data

Department of Older Person Ministry of Social Development and Human

Situation of Older Persons 2024.-- Bangkok: Department of Older Person

Ministry of Social Development and Human Security, 2025.

143 p.

1. Old age assistance. 2. Older persons -- Government policy. 3. Older persons -- Health and hygiene.

I. Title.

362.63

ISBN 978-616-331-178-8

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First printing	October 2025	
Number of copies printed:	300	
Compilation by	Institute for Continuing Education and Human Resources collaboration with faculty of Social Administration, Thammasat University	
Produced by	Department of Older Persons, Ministry of Social Development and Human Security	
Cover design by	Khanitha Poontavee	
Arts by	Puvich Chaipoopirat, Arinpak Kraivichien	
Translator	Anthony Bennett	
Printed by	Gogo Print (Thailand) Co., Ltd. 188 Spring Tower Building, 11th Floor Room 11-110 Phaya Thai Road, Thung Phaya Thai Subdistrict Ratchathewi District, Bangkok 10400 Tel: 02-026-3147	



บทอาศิริราษฎร์

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มหานครป่าสักคำลันท์ โดย ชิต บุรหัต

เนื่องในโอกาสทางมงคลเฉลิมพระชนมพรรษา 72 พรรษา วันที่ 28 กรกฎาคม พ.ศ. 2567
พระบาทสมเด็จพระปรมินทรมหาธิรบดีคริสตินกรมหาบีรลงกรณ พระบีรเกล้าเจ้ายิ่หัว

Foreword

Director-General of the Department of Older Persons

According to the Act on the Elderly, B.E. 2546 (2003), as amended (No. 2) B.E. 2553 (2010), Article 9 (10), the National Commission on Older Persons is required to submit a report on the situation of older persons in the country to the Cabinet at least once a year. In this regard, the Department of Older Persons, as a member and secretary of the National Commission on Older Persons, has prepared the Situation of Older Persons Report 2024.

The Situation of the Thai Older Persons Report 2024 highlights 'Ageing in Place' as a key theme, reflecting the contextual realities surrounding older persons in communities. It presents facts, goals, and gaps through the components of the Ageing in Place concept. It serves as a guideline for policymaking to promote ageing in place, for planning comprehensive health and social services, and for ensuring service provision that covers all aspects conducive to the lives of older persons and long-term care. This report will be disseminated to academic institutions, organizations, agencies, and civil society for use in advancing work on ageing issues, as well as for other purposes that will benefit the people, communities, society, and the nation as a whole.

In 2024, the Department of Older Persons assigned the Thammasat University Research and Consultation Institute, through the Institute for Further Education and Human Resources, to complete the 2024 Older Person Situation Report. Sincere thanks are extended for the dedication and cooperation of all agencies and individuals involved from the public, private, and civil society sectors.

It is strongly hoped that this report will play a part in driving forward efforts on ageing issues, leading to a better quality of life for older persons in the future.



Thanasunthorn Swangsa Lee

Director General, Department of Older Persons
Committee Member and Secretary of the National
Commission on Older Persons

Preface

The Institute for continuing Education and Human Resources, through the Research and Consultancy Institute of Thammasat University, has been assigned by the Department of Older Persons for the second consecutive year to prepare the Situation Report of Older Persons which, in this edition, is for 2024. The objectives are as follows: (1) To present information and statistics related to older persons as a reference for decision-making by policymakers in planning and formulating policies on ageing, as well as to serve as a systematically-compiled source of annual key data reflecting developments in ageing-related work; (2) To provide policy recommendations to government agencies and organizations involved in ageing affairs for use in planning and policy formulation; and (3) To disseminate knowledge to educational institutions, central/regional/local government agencies, the private sector, civil society, and the general public so that the information can be applied in work, study, and daily life in keeping with current circumstances.

This report has received strong support from the editors and the panel of experts, who not only carefully reviewed the draft report but also provided valuable recommendations to the research team. Most importantly, the working group—consisting of executives, representatives, practitioners, and stakeholders from government, private, and civil society sectors—generously provided essential data. Without such cooperation, the completion of this report would have been extremely difficult.

On behalf of Thammasat University, we extend our sincere gratitude to all individuals, groups, and organizations for their contributions, and we hope that this 2024 edition of the Situation Report of Older Persons will be of significant benefit for policymaking, planning, and academic advancement.



Prof. Dr. Supasawad Chardchawarn

Rector Thammasat University

Executive Summary

The 2024 Situation Report on the Thai Older Persons contains data on ageing population statistics, reports on operations, and the situation of older persons in Thailand in 2024, intended for policymakers, executives, academics, and the general public to utilize.

1.

General Situation



In 2024, the world had an older population of 1,184,998,534 people, accounting for 14.52 percent of the total. It is projected that by 2050, the number of older persons will reach 2,105,309,356, and in another 50 years, by 2100, the figure will rise to 3,019,571,493. The global average life expectancy at birth is 73.32 years. In

every country, females have a higher life expectancy than males, at 76.02 years compared to 70.71 years. Thailand ranks 103rd in global life expectancy, but its average is higher than the global rate, at 76.56 years. For females, the figure is 80.98 years, while for males, it is 72.34 years.

In ASEAN, Thailand and Singapore are the two countries where the older population already outnumbers the child population. Thailand has been facing a population crisis of deaths outnumbering births continuously since 2021. The transition into an ageing society in Thailand is both ongoing and rapid. In the next 16 years, or by around 2040, it is projected that the child population will decline to only 12.79 percent of the total, the working-age population will drop to 55.83 percent, while the older population will increase to 31.34 percent—over twice as high as the child population.

2.

Context



For this 2024 edition of the Report, the research team has selected the concept of ageing in place as the context. “Ageing in place” is the idea of enabling individuals to live throughout their lifespan in their home or community of choice, in order to promote independence, safety, and a good quality of life in a familiar environment with supportive services. Ageing in place consists of three

key components: 1) Place, 2) Service system, 3) Management system

2.1 Place – Housing chosen voluntarily by older persons, which may be their original home, locality, or community with which they are familiar, or a new location selected by the older person according to their preference.

2.2 Service system – Services encompassing health, social support, housing, transportation, and the environment, such as home and environmental modifications, in-home healthcare services, risk management services, and guardianship to protect the rights of older persons.

2.3 Management system – Focuses on integrating efforts across sectors, including government, private sector, civil society, and local administrative organizations, to ensure continuity of services and comprehensive care for older persons. This includes establishing national, regional, and local strategies and action plans with clear systems and guidelines for holistic and continuous eldercare, supporting local volunteer work, and developing systematic data management and monitoring and evaluation systems.

3.

Implementation of Older Persons Policies in Thailand



3.1 Situation of Ageing-Related Activities in 2024

According to the Third Phase of the Action Plan on Older Persons (2023–2037) and the first 5-Year Urgent Action Plan (2023–2027), it was found that multiple agencies are implementing the activities outlined in each sub-plan. However, there has been no monitoring or evaluation of the plans to determine the models and methods of implementation that align with the needs of older persons and the benefits they provide, both quantitatively and qualitatively.

3.2 The 3rd Phase of the Action Plan on Older Persons (2023–2037): First 5-Year Urgent Phase (2023–2027) consists of four sub-plans, namely:

Sub-Action Plan 1 Preparing the Pre-Ageing Population

- Promoting savings for future economic security through the National Savings Fund project, aiming to provide financial security and encourage continuous saving.
- Enhancing knowledge, understanding, and awareness of the value of older persons through over 1,900 health, economic, social, and environmental awareness campaigns, alongside mobilizing 505 preparedness networks. Key activities include retirement preparation courses, signing MOUs on welfare and quality of life, National Day of Older Persons events, and workshops on cultivating saving discipline.
- Expanding preparedness for an ageing society through financial discipline training and online public awareness campaigns.
- Developing digital technology and innovation skills via programs such as Coding for Older Persons and digital courses including ChatGPT for Productivity, Google Workspace, Canva, Excel, Power BI, as well as digital content creation and affiliate marketing.
- Strengthening health knowledge and occupational health systems by implementing pilot projects linking workplaces with health systems similar to hospitals and promoting the Health Charter.

Sub-Action Plan 2 Enhancing the Quality of Life of Older Persons in All Dimensions Equitably

- Reforming the old-age security system to be integrated and sustainable, ensuring sufficient, inclusive, and fair coverage for older persons, such as the Retirement Savings Lottery Project and the Older Persons Economic Stimulus Project by the Ministry of Finance.

- Developing a health system that accommodates an ageing society, tailored to the needs of different groups of older persons and suitable for local contexts, such as the Home and Community Based Health Protection System for Dependent Older Persons, the Health Promotion and Care Model for Older Persons and Dependent Individuals in Prisons, and the Religious Leaders in Holistic Health Promotion Project by the Ministry of Public Health.

- Promoting the participation of older persons as social contributors, such as recognizing Outstanding Older Persons' Wisdom Repositories and registered older persons sharing knowledge with the public, including documenting valuable local wisdom.

- Promoting modifications to older persons' housing both inside and outside the home, such as adapting environments and facilities to be safe and suitable for older persons by the Department of Older Persons, repairing or improving homes for disabled older persons by the Department of Empowerment of Persons with Disabilities, and upgrading housing for low-income and destitute older persons by the National Housing Authority.

Sub-Action Plan 3 Reforming and Integrating Administrative Systems to Support a Quality Ageing Society

- Enhancing the capacity of community/local organizations and community leaders in developing and managing older persons's programs.

- Increasing incentives and recognition for local administrative organizations with outstanding performance in ageing-related services.

- Developing systems to protect the rights of older persons, especially those in high-risk, vulnerable, or dependent groups, whether as service recipients, welfare beneficiaries, or consumers.

Sub-Action Plan 4 Enhancing Research, Technology, and Innovation to Support an Ageing Society

- Promoting research and innovation related to older persons to develop their potential and quality of life. Budgets have been allocated to support research and innovation on ageing and ageing society issues by the Thailand Science Research and Innovation (TSRI) and the Foundation of Thai Gerontology Research and Development Institute (TGRI)

4.

Outstanding Older Thais and Related Events of 2024



2nd Lieutenant Priyanan Suntornjamon

Mr. Sutheesak Phakdeetewa, also known as Kru Jo The Star

Associate Professor Banjong Kosalwat

Other distinguished individuals include those recognized for excellence in Thai language and local dialects. This year also highlighted outstanding agricultural sages of the nation and recipients of the Narathip Phongphran Award, demonstrating the valuable contributions of older persons to society and serving as exemplary figures for others.

Outstanding Events

The report presents the Healthy Ageing Prize for Asian Innovation (HAPI), an international award granted to organizations in Asian countries with outstanding achievements in ageing-related issues across various domains. In 2024, Thailand received awards for three projects: “Retire with Excellence” by the College of Lifelong Education, Chiang Mai University – awarded the Grand Prize in the category of supporting older persons’ self-reliance. “Ready Senior” by the Ageing Business and Community Development (ABCD) Centre, Faculty of Commerce and Accountancy, Thammasat University – awarded an Honorable Mention for developing a platform integrating lifelong learning spaces, marketplace spaces, and job matching areas for people aged 50 and above. “YoungHappy Plus” by YoungHappy Plus Co., Ltd. – awarded an Honorable Mention in the Technology and Innovation category for developing an online platform to enhance the quality of life of older persons in urban areas.

Creative Media and TMF Awards 2025

The Creative Media and TMF Awards 2025, organized by the Safe and Creative Media Development Fund, honor individuals and organizations that produce safe and creative media. This year, a total of 32 works across 10 award categories were recognized. The online drama series “Jamjai Soongwai Wow” by Khun Porjai Poonnarat won the first prize. This series is an educational media set for older persons, presented through 18 drama episodes, using content from the Knowledge Series for Empowered Ageing taught in senior citizen schools.

National Innovation Awards 2024

The National Innovation Agency (Public Organization) presented an honorary award to Dinsaw Mini, a companion robot for monitoring older persons, produced by CT Asia Robotics Co., Ltd. This innovation was developed to meet the daily living needs of older persons.

Presentation of Honors and Achievements of Older Persons through the National Recognition Program. The National Older Person of 2024 is Mr. Dhanin Clearavanont.

National Artists for 2023:

Visual Arts (4 persons):

Professor Emeritus Kanya Charoensupkul

Mrs. Wiphawadee Phattanapongpiboon

Second Lieutenant Tawee Buranakhet

Mr. Sutsakorn Chaisame

Literature (2 persons):

Mr. Prasatphon Phususingthorn

Mr. Wasin Inthasara

Performing Arts (6 persons):

Mr. Sombat Kaewsujarit

Mr. Chaiya Thangmeesri

Mr. Pichet Iamchawana, also known as Na Yong Chernyim

5.

Innovations for Thai Older Persons



The innovations presented are categorized into six main areas according to the government innovation development framework established by the Office of the Public Sector Development Commission (OPDC):

Service Innovation – Examples include a meal and nutrition management system for older persons, the “Lucky Thai Sweets” game for age 60+, and balance training mats.

Service Delivery Innovation – Examples include the remotely operated delivery vehicle “Aree” and a job-matching application for retirees.

Administrative/Organizational Innovation
Examples include the CareCamera for monitoring patients and older persons at home, and a pressure ulcer prevention system.

Conceptual Innovation – Examples include globally recognized medical engineering research programs.

Policy Innovation – Examples include “UD HOUSE,” housing designed for older persons with disabilities.

Systemic Innovation – Examples include preventive detection systems and digital health platforms.

6.

Research on Thai Older Persons



The 15 research studies presented met the selection criteria and comprised 5 studies in the medical/health field, 7 in the social sciences, and 3 in economics. The selected studies were chosen based on four criteria established by the organizing committee:

- Relevance or the ability to expand knowledge and understanding of the content in the respective chapter.
- Research scope covering a large population, representing other studies, and reflecting the overall issues.
- Active promotion of the work to advance national level policy recommendations.
- Research results that have been reviewed or certified for quality by reputable institutions.

7.

Summary and Policy Recommendations



The transition to a “Complete Aged Society” in Thailand presents complex, multidimensional challenges that directly impact older persons and extend to the responsibilities of families, the working-age population, and government service systems.

The concept of “Ageing in Place” has thus emerged as a key strategic approach to enhancing the quality of life for older persons and mitigating the long-term challenges of public sector operations. Studies have found that although the government and related partners have implemented initiatives to support and improve the quality of life of older persons, there remain gaps in advancing

the “Ageing in Place” concept at multiple levels from households and communities to bureaucratic systems.

It is therefore necessary to establish policies based on empirical data, integrating mechanisms and resources systematically, particularly by strengthening the role of local administrative organizations as the primary mechanism at the community level, to ensure strong, sustainable policy implementation and reduce inequalities among older persons.

7.1 Key Policy Recommendations on the Concept of Ageing in Place

- 7.1.1 Elevate the concept of Ageing in Place as a core national policy. The government should designate “Ageing in Place” as a principal policy for driving an ageing society.
- 7.1.2 Develop physical infrastructure and environments that are age-friendly for older persons.
- 7.1.3 Promote welfare technology or assistive technology services to enable older persons to live with quality, independence, and safety.
- 7.1.4 Revise the decentralization of budgets and administrative management for local administrative organizations to enable effective, concrete implementation.
- 7.1.5 Strengthen strategic networks by encouraging private sector participation in service provision.
- 7.1.6 Develop and improve monitoring and evaluation systems for policies and services to reflect the actual benefits to older persons.

7.2 Recommendations for Action

- 7.2.1 Expand day care and home care services to cover all areas, especially remote locations and communities with a high proportion of older persons. This expansion will help reduce family caregiving burdens and increase confidence in caring for older persons.
- 7.2.2 Enhance capacity by recruiting personnel with expertise in older person care and developing the skills of care staff to meet standards, including continuously building new knowledge and skills.
- 7.2.3 Promote systematic lifelong learning for caregivers through knowledge-sharing forums, study visits, and new skill development.
- 7.2.4 Apply research and innovation findings to develop care models suitable for the Thai context.
- 7.2.5 Consider providing internet welfare support for vulnerable older persons.



Definition of Terms

Related to the Report on the Situation of Thai Older Persons: 2024

1. Older Person



refers to an individual age 60 years or older with Thai nationality [Older Persons Act B.E. 2546 and its Amendment (No. 2) B.E. 2553, Article 3].

The Thai terms “older persons” and “elderly or aged”

The word “older persons” (age) comes from Pali, meaning “the vital force that sustains life.” The word “elderly” (or aged) refers to “decline or deterioration.” Therefore, it is recommended to use the term “older persons” to signify “an individual advanced in life with the sustaining force of vitality,” rather than “elderly or aged”, which carries a negative connotation of decline and deterioration (Somdet Phra Buddhakosajarn (Por Piyadhammo), cited in Buntoo Siriphanich, 2017).

Older persons, or individuals age 60 years or older, are classified into four major groups:

The Young Old: age 60–69 years

The Middle Old: age 70–79 years

The Oldest Old: age 80 years or older

Centenarians: age 100 years or older



2. Aged Society



refers to a society in which the proportion of older persons is very high.

2.1 Levels of an Aged Society in Situation of the Thai Older Persons (2015-2023) are divided into three levels:

Aged Society: A society where the population age 60 years or older exceeds 10% of the total population (or the population age 65 years or older exceeds 7% of the total population).

Complete-Aged Society: A society where the population age 60 years or older exceeds 20% of the total population (or the population age 65 years or older exceeds 14% of the total population).

Super-Aged Society: A society where the population age 60 years or older exceeds 28% of the total population (or the population age 65 years or older exceeds 20% of the total population).

2.2 Levels of Ageing Society According to the United Nations (UN) are divided into three levels as follows:

Ageing Society: A society in which the population age 60 years or older exceeds 10% of the total population (or the population age 65 years or older exceeds 7% of the total population).

Aged Society: A society in which the population age 60 years or older exceeds 20% of the total population (or the population age 65 years or older exceeds 14% of the total population).

Super-Aged Society: A society in which the population age 60 years or older exceeds 28% of the total population (or the population age 65 years or older exceeds 20% of the total population).

3. Population ageing

refers to the demographic phenomenon occurring in countries worldwide over the past decade. That is, the population in each area from communities and administrative districts to countries and regions is getting older, in absolute and relative terms. This can be observed from the increasing proportion of older persons in the closed population or in populations not accounting for migration. Population ageing is caused by declining birth rates and longer life expectancy.

4. Older person rate

refers to the percentage of older persons of the total population.



5. Sex ratio

refers to the ratio of males to females or females to males in a population group, typically expressed as the number of males per 100 females.

6. Total fertility rate (TFR)

refers to the average number of children a woman (or 1,000 women) can give birth to over her reproductive lifetime.

7. Life expectancy

refers to the number of years a person is expected to live from birth until death. It is calculated using a life table.

8. Life expectancy at age 65

refers to the average number of additional years a person age 65 is expected to live.



9. Barthel Index



is an assessment tool for evaluating the ability to perform activities of daily living (ADL) to categorize older persons based on their level of self-dependence. It is divided into four groups:

- Group 1: Barthel ADL score greater than 12 – independent.
- Group 2: Barthel ADL score 9–11 – moderately dependent.
- Group 3: Barthel ADL score 5–8 – severely dependent.
- Group 4: Barthel ADL score 0–4 – completely dependent.

10. Ageing index, old-age dependency ratio, and support ratio

are defined as follows:



10.1 Ageing index is an indicator comparing the relative size of the older population (age 60 years or older) to the child population (under 15 years old). It is calculated as the number of people age 60 years or older per 100 people under 15 years old.

10.2 Old-age dependency ratio is an indicator showing the burden of supporting older persons on the working-age population. It is calculated as the number of older persons the working-age population must support per 100 working-age people. Specifically, it is the number of people age 60 years or older per 100 people age 15–59 years.

10.3 Support ratio is an indicator showing the number of working-age people available to support one older person. It is calculated as the number of people age 15–59 years relative to the number of people age 60 years or older.

Abbreviations

Used in the Report on the Situation of the Thai Elderly, 2024

UN	United Nations
NSF	National Savings Fund
DOP	Department of Older Persons
MSDHS	Ministry of Social Development and Human Security
TGRI	Foundation of Thai Gerontology Research and Development Institutue
SHPH	Subdistrict Health Promoting Hospital
NRC	National Research Council of Thailand
CQOP	Center for Quality of Life Development and Occupational Promotion for the Elderly
NESDC	Office of the National Economic and Social Development Council
NHSO	National Health Security Office
NSTDA	National Science and Technology Development Agency
NSO	National Statistical Office
ThaiHealth	Thai Health Promotion Foundation
SDHSV	Social Development and Human Security Volunteer
LCV	Local Care Volunteers
VHV	Village Health Volunteers
VHV (BMA)	Bangkok Public Health Volunteers

Agencies

Contributing Data for the 2024 Report

1. Office of the Prime Minister

- 1.1 Office of the National Economic and Social Development Council
- 1.2 Office of the National Health Commission

2. Ministry of Finance

- 2.1 Comptroller General's Department
- 2.2 National Savings Fund

3. Ministry of Tourism and Sports

- Department of Physical Education

4. Ministry of Social Development and Human Security

- 4.1 Office of the Permanent Secretary, Ministry of Social Development and Human Security
- 4.2 Department of Social Development and Welfare
- 4.3 Department of Women's Affairs and Family Development
- 4.4 Department of Older Persons
- 4.5 Department of Empowerment of Persons with Disabilities
- 4.6 National Housing Authority

5. Ministry of Higher Education, Science, Research and Innovation

- 5.1 National Research Council of Thailand
- 5.2 National Science and Technology Development Agency

6. Ministry of Transport

- Department of Land Transport

7. Ministry of Natural Resources and Environment

8. Ministry of Digital Economy and Society

- National Statistical Office

9. Ministry of Interior

- Department of Local Administration Promotion

10. Ministry of Justice

- Department of Rights and Liberties Protection

11. Ministry of Labour

- 11.1 Department of Employment
- 11.2 Department of Skill Development
- 11.3 Department of Labour Protection and Welfare
- 11.4 Social Security Office

12. Ministry of Culture

13. Ministry of Public Health

- 13.1 Office of the Permanent Secretary, Ministry of Public Health
- 13.2 Department of Mental Health
- 13.3 Department of Disease Control
- 13.4 Department of Health Service Support
- 13.5 Department of Medical Services
- 13.6 Department of Health
- 13.7 Bureau of Elderly Persons Health
- 13.8 Somdet Phra Sangharaja Yan Sangwon Institute of Geriatric Medicine

14. Bangkok Metropolitan Administration

- 14.1 Department of Medical Services
- 14.2 Department of Social Development

15. Thai Health Promotion Foundation

16. National Health Security Office

17. Royal Thai Police

- Technology Crime Suppression and Analysis Division

18. National Innovation Agency (Public Organization)

19. The Thai Older Persons' Council Association under the Royal Patronage of Her Royal Highness Princess Srinagarindra

20. Thai Institute for Gerontology Research and Development Foundation

21. State-Supervised Higher Education Institutions

- 21.1 Chulalongkorn University
- 21.2 Thammasat University

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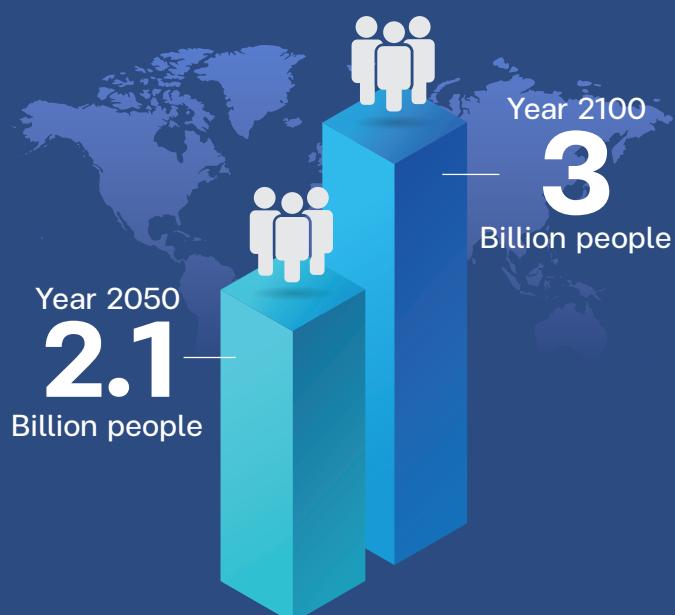
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1

General Situation



The world currently has a population of over 8 billion people, of which approximately 1.18 billion are aged 60 years and over. The increasing older persons population has resulted in a change in the world's population structure, as the global fertility rate tends to decrease while the older persons population increases. The United Nations (UN) predicts that in 2050 the world will have a population of 2.1 billion older persons, and in another 50 years, in 2100, the older persons population will be over 3 billion.

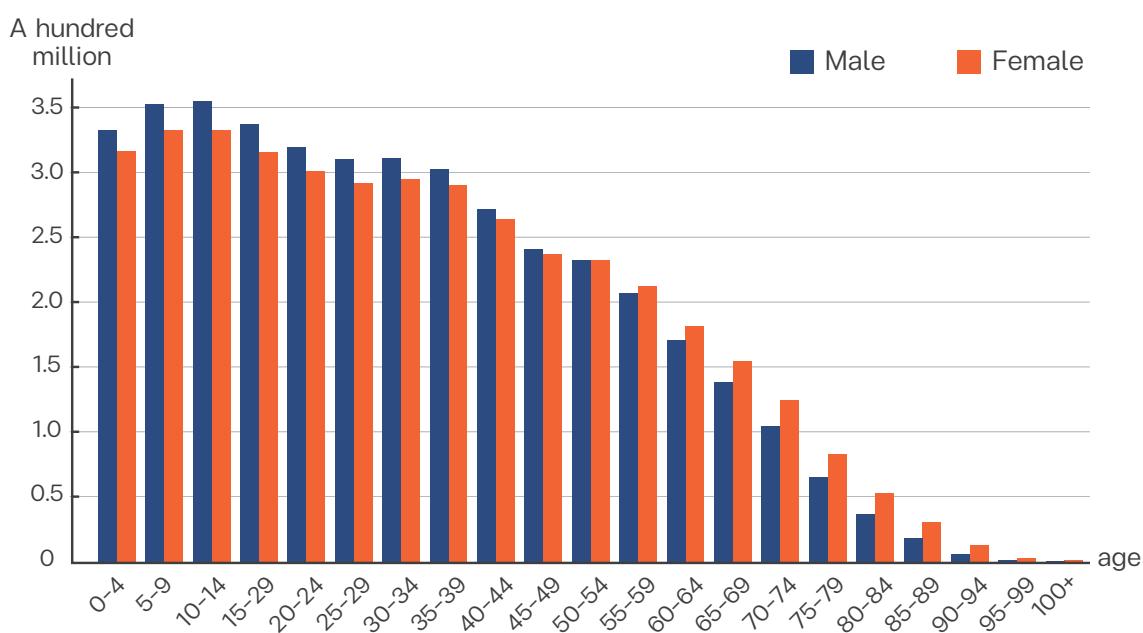
1.1

World Population Ageing 2024

1.1.1 World population age structure 2024

Total world population **8,161,972,573 people**

	Male	Female
4,103,612,213 people (50.28%)		



World population size and proportion in 2024, classified by age group

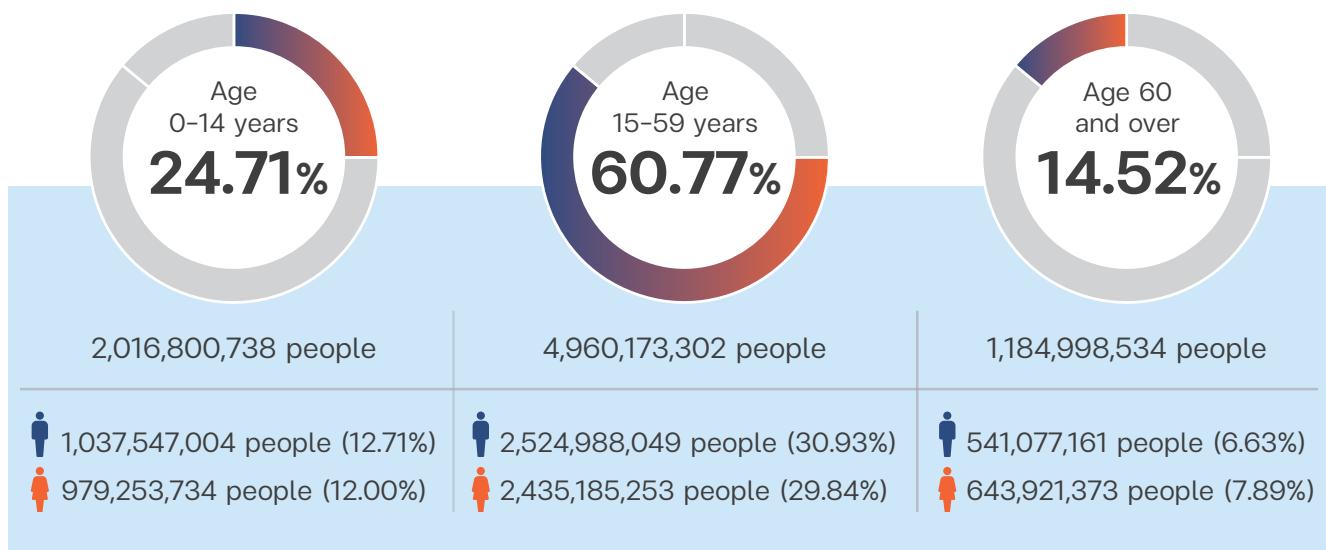


Figure 1 Age and sex structure of the world population, 2024

Source: United Nations, World Population Prospects 2024

1.1.2 Ageing by region of the world, 2024 and projections for 2050 and 2100

In 2024, the world had 1,184,998,534 older persons. It is projected that in 2050 there will be 2,105,309,356 older persons, and in another 50 years, by 2100, the number of older persons will reach 3,019,571,493. Africa will have the fastest growth rate of older persons, while Oceania will have the slowest growth rate.

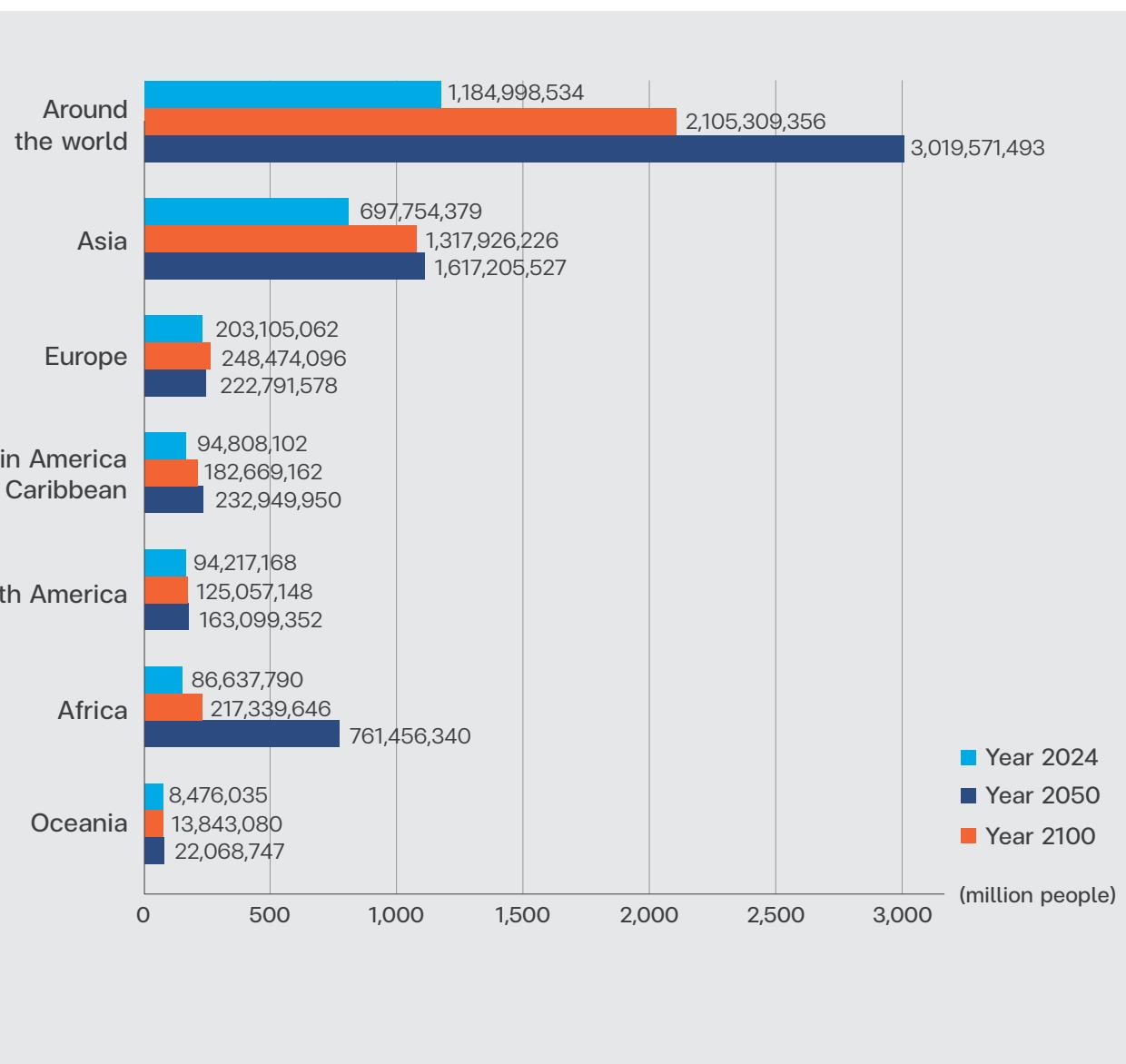


Figure 2 Ageing by region of the world, 2024 and projected for 2050 and 2100

Source: United Nations, World Population Prospects 2024

1.1.3 Top 10 countries with the highest and the lowest older population rates

Vatican City is the country with the highest proportion of older persons, with 246 older persons, accounting for 49.65% of the total population. In contrast, Zambia has the lowest proportion of older persons, with 712,430 older persons, accounting for 3.34% of the total population.

Table 1 Top 10 countries with the highest and the lowest older population rates

Top 10 countries with the highest ageing rates ↑			Top 10 countries with the lowest ageing rates ↓		
Country	Number of older persons	Proportion of older persons	Country	Number of older persons	Proportion of older persons
1 Vatican City	246	49.65%	1 Zambia	712,430	3.34%
2 Monaco	16,790	43.46%	2 Qatar	105,440	3.46%
3 St. Helena	1,887	36.02%	3 Uganda	1,738,007	3.47%
4 Japan	44,439,962	35.91%	4 Chad	712,417	3.51%
5 Martinique	117,607	34.27%	5 Central African Republic	194,480	3.65%
6 Italy	19,020,402	32.05%	6 Mali	907,592	3.71%
7 Guadeloupe	120,119	32.02%	7 United Arab Emirates	413,491	3.75%
8 Puerto Rico	1,030,455	31.78%	8 Afghanistan	1,644,974	3.86%
9 Portugal	3,286,547	31.52%	9 Burundi	543,112	3.87%
10 Hong Kong	2,306,461	31.11%	10 Malawi	866,326	4.00%

Source: United Nations, World Population Prospects 2024

1.1.4 Life expectancy of the world population

The world's average life expectancy at birth is 73.32 years. For females, it is 76.02 years, and for males, 70.71 years. At age 65, the global life expectancy is 17.70 years. This means that when people reach age 65, they are expected to live, on average, about 17.70 more years. Females have a life expectancy of 19.08 years at this age, higher than males at 16.18 years.

Table 2 Life expectancy of the world population

	Life expectancy	Overview	Male	Female
1	Life Expectancy at Birth	73.32	70.71	76.02
2	Life Expectancy at Age 15	61.60	59.07	64.20
3	Life Expectancy at Age 65	17.70	16.18	19.08
4	Life Expectancy at Age 80	8.41	7.57	9.01

Source: United Nations, World Population Prospects 2024

1.1.5 Top 10 countries by highest life expectancy at birth and Thailand

Monaco has the highest life expectancy at birth at 86.50 years. San Marino and Hong Kong have similar life expectancies at birth, 85.82 and 85.63 years, respectively. Likewise, Japan and South Korea also have very similar life expectancies. In all countries, females have a higher life expectancy at birth than males. Thailand ranks 103rd in the world, with a life expectancy at birth above the global average, at 76.56 years overall — 72.34 years for males and 80.98 years for females.

Table 3 Top 10 countries with the highest life expectancy and Thailand

Rating	Country	Overview	Male	Female
1	Monaco	86.50	84.56	88.63
2	San Marino	85.82	84.32	87.22
3	Hong Kong	85.63	82.97	88.26
4	Japan	84.85	81.83	87.88
5	South Korea	84.43	81.32	87.28
6	Saint-Barthélemy	84.40	81.57	86.92
7	French Polynesia	84.19	81.90	86.62
8	Andorra	84.19	82.26	86.24
9	Switzerland	84.09	82.17	85.95
10	Australia	84.07	82.28	85.85
103	Thailand	76.56	72.34	80.98
	Worldwide average	73.32	70.71	76.02

Source: United Nations, World Population Prospects 2024

1.2

Ageing of the ASEAN Population in 2024

In 2024, Thailand has the highest proportion of older persons in ASEAN at 20.83%, followed by Singapore, Vietnam, and Malaysia, respectively. Laos has the lowest proportion at 7.49%. Thailand and Singapore are the only two ASEAN countries where the older population outnumbers the child population.

Total population **689,432,596** people

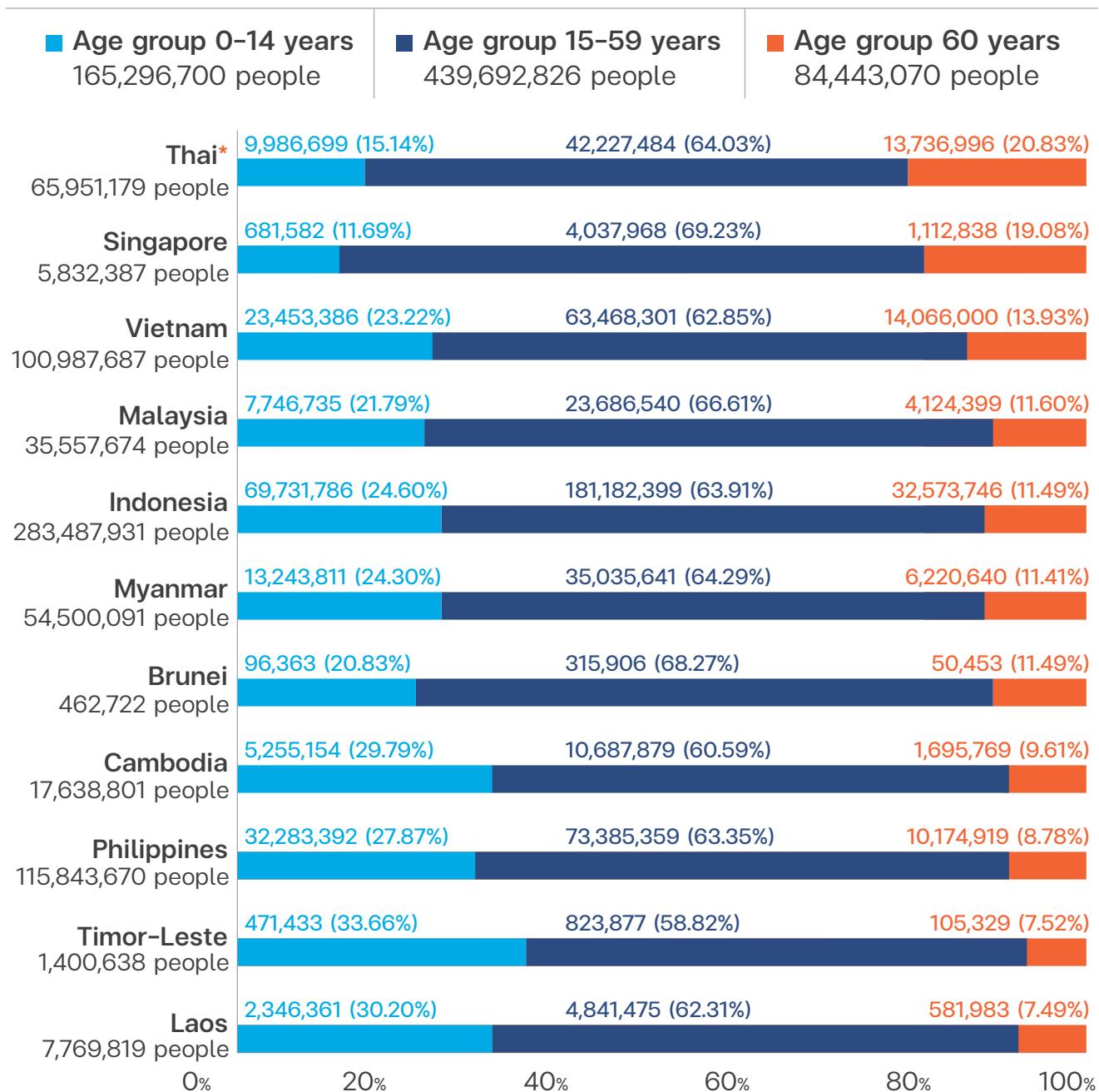


Figure 3 Ageing of the ASEAN population in 2024

Source: United Nations, World Population Prospects 2024

*Thailand information comes from the Department of Provincial Administration, Ministry of Interior, as of December 31, 2024.

1.3

Ageing of the Thai Population

1.3.1 Thai population structure 2024

In 2024, Thailand had a population of about 65.9 million, of which around 13.7 million were older Thais (age 60 years or over), accounting for 20.83%. Among them, 11.60% were 'young old' (age 60–69), 6.29% were 'middle old' (ages 70–79), and 2.94% were 'oldest old' (age 80+). The population of older Thais exceeded the child population by 3.75 million.

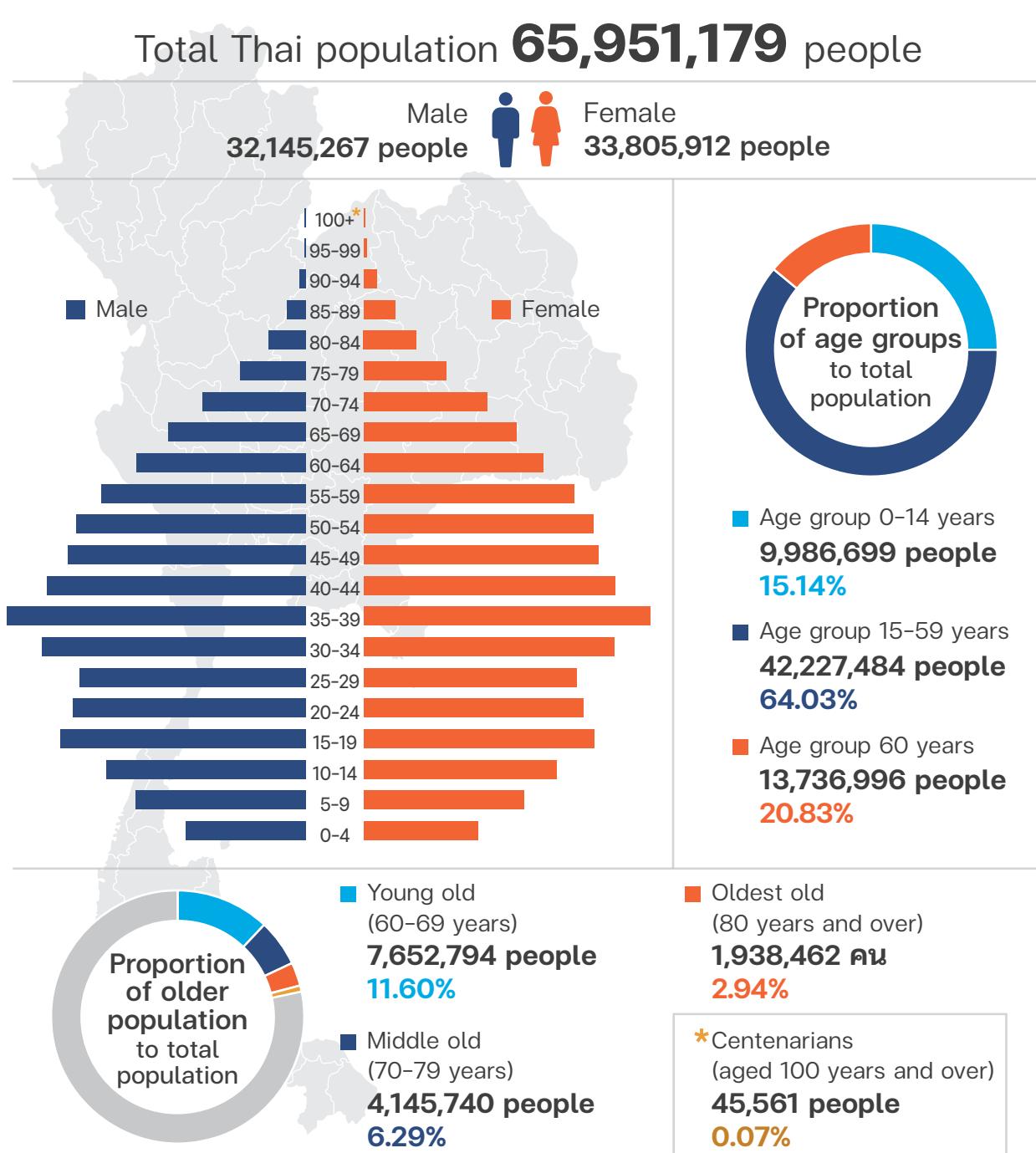
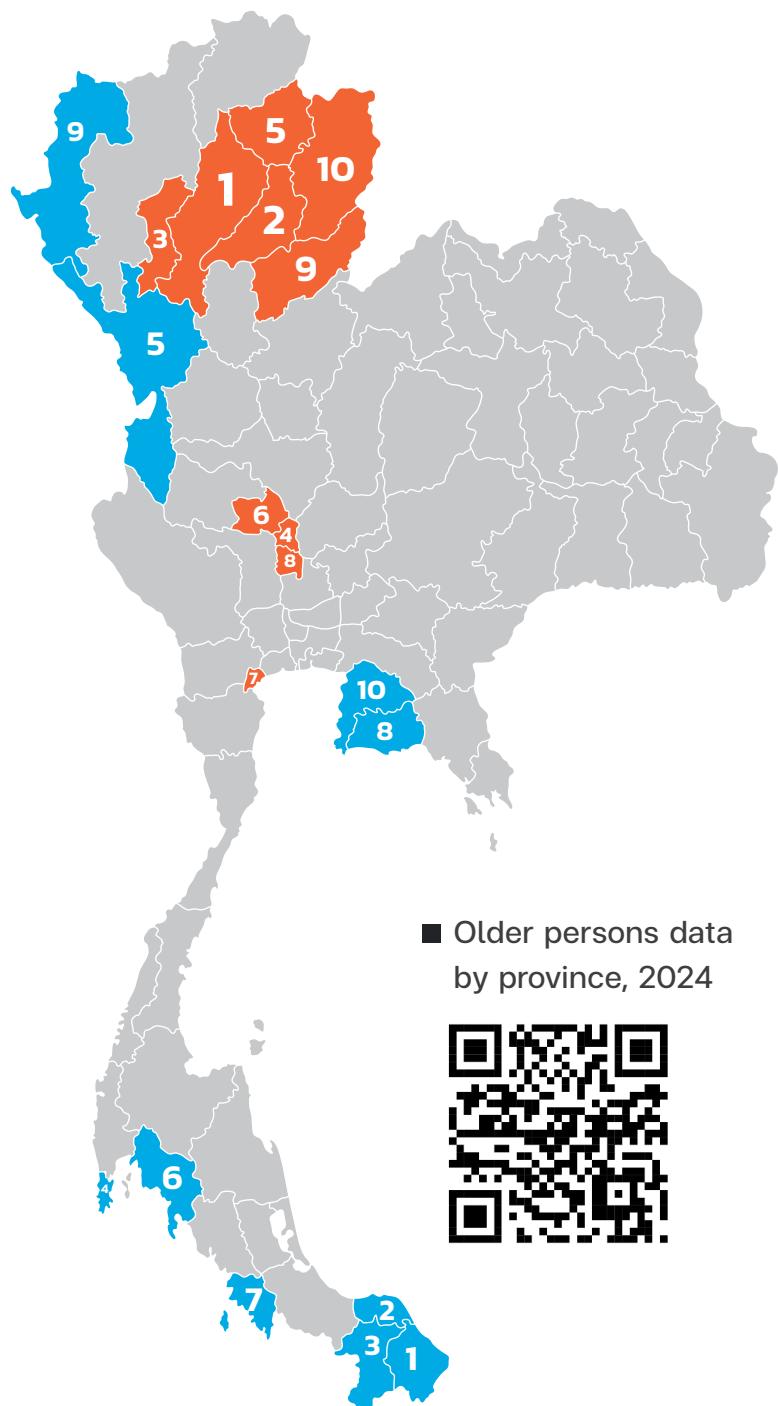


Figure 4 Thai population structure

Source: Department of Provincial Administration, Ministry of Interior, on December 31, 2024

1.3.2 The 10 provinces with the highest and the lowest older population

The top 10 provinces with the highest elderly population rates are in the northern and central regions, with the top 3 being Lampang, Phrae, and Lamphun. Meanwhile, the top 10 provinces with the lowest elderly population rates are mostly in the southern region, with the top 3 being Narathiwat, Pattani, and Yala.



Top 10 provinces with the highest older population rates ↑

1	Lampang	29.31%
2	Phrae	28.74%
3	Lamphun	28.32%
4	Singburi	28.13%
5	Phayao	27.32%
6	Chainat	26.94%
7	Samut Songkhram	26.56%
8	Ang Thong	26.21%
9	Uttaradit	26.07%
10	Nan	25.17%

Top 10 provinces with the lowest older population rates ↓

1	Narathiwat	13.48%
2	Pattani	13.54%
3	Yala	13.98%
4	Phuket	14.30%
5	Tak	14.38%
6	Krabi	15.05%
7	Satun	15.59%
8	Rayong	15.68%
9	Mae Hong Son	15.72%
10	Chonburi	16.47%

Figure 5 Top 10 provinces with the highest and the lowest older persons population rates

Source: Department of Provincial Administration, Ministry of Interior, on December 31, 2024

1.3.3 Thai births and deaths for the decade from 2015-2024

Thailand is facing an ongoing demographic structural crisis. In 2024, there were only 462,240 births, the lowest in a decade, while the number of deaths reached 571,646—exceeding births by 109,406. This reflects a population imbalance, as Thailand has recorded more deaths than births continuously since 2021.

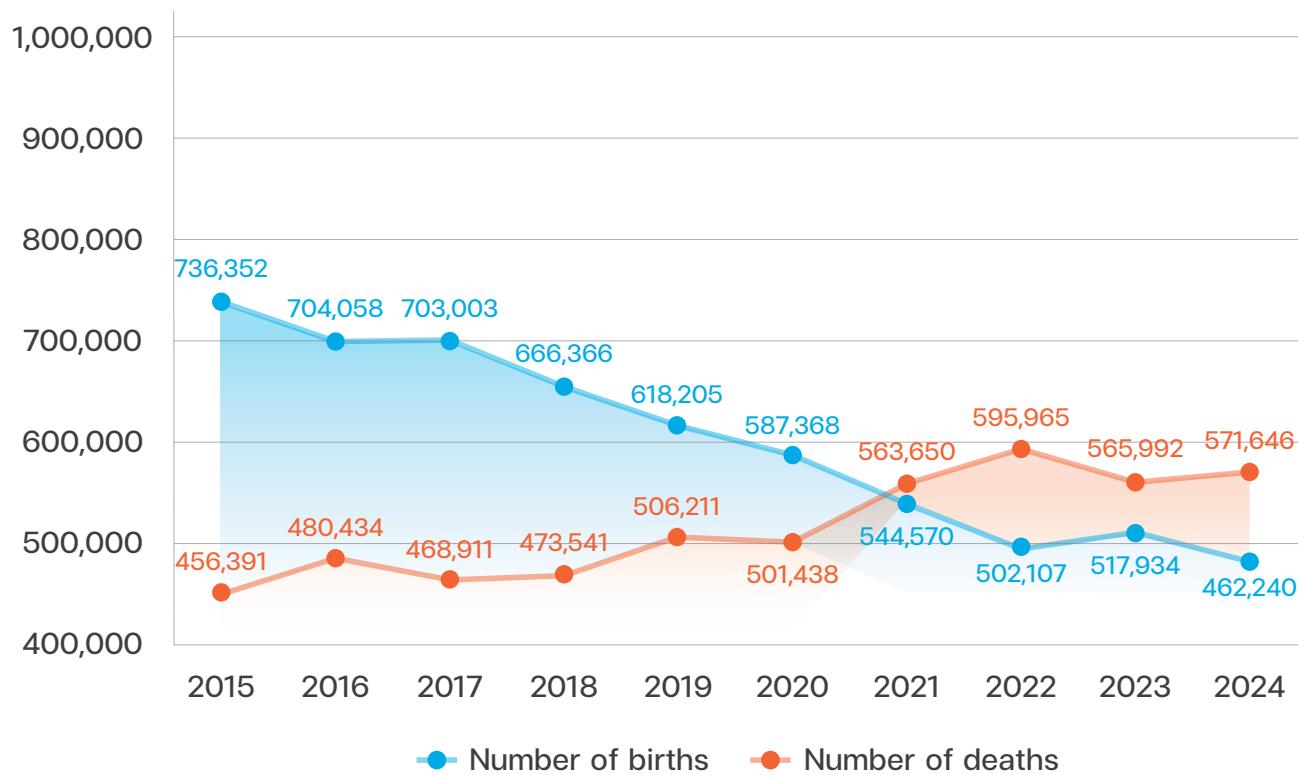


Figure 6 Number of Thai population born and died in the past 10 years (2015-2024)

Source: Office of Civil Registration, Department of Provincial Administration, Ministry of Interior

1.4

Situation of the Older Persons in Thailand, 2024

1.4.1 Marital status of older Thais

In 2024, the majority of older Thais remained married (62%). The next largest group were widowed, divorced, or separated (32%), while only 6% were single.

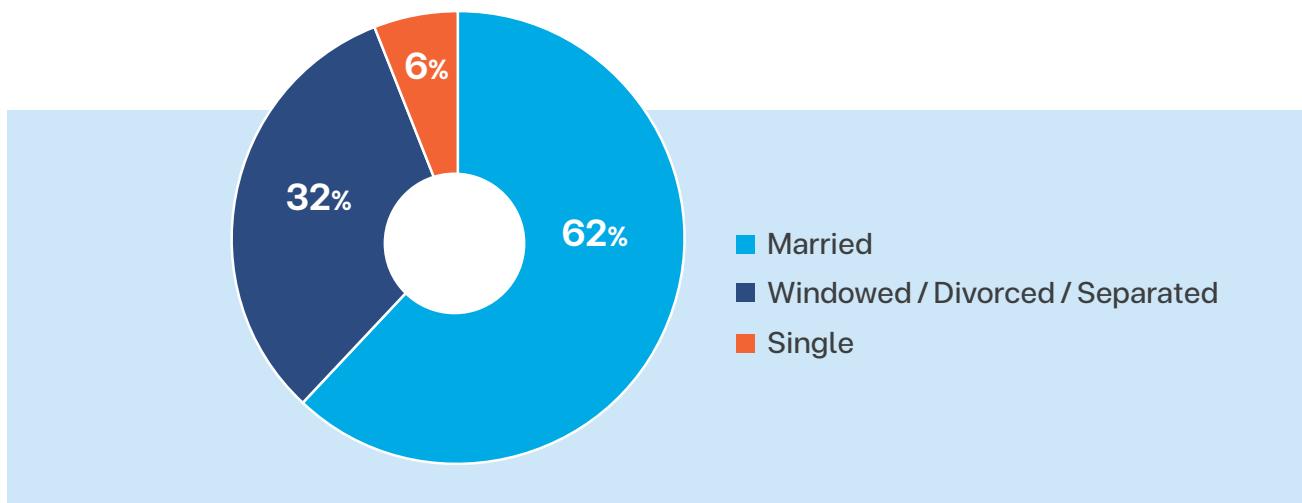


Figure 7 Marital status of the older person

Source: National Statistical Office, The 2024 Survey of the Older Persons in Thailand

1.4.2 Health status of older Thais

The results of the overall physical health assessment show that most older Thais were in good health (45.3%), followed by those in moderate health (41.5%), poor health (8.6%), very good health (3.5%), and the smallest group in very poor health (1.0%). The assessment also indicated that older men reflected the overall trend, while older women tended to be assessed as being in moderate health (43.5%) and good health (42.8%).

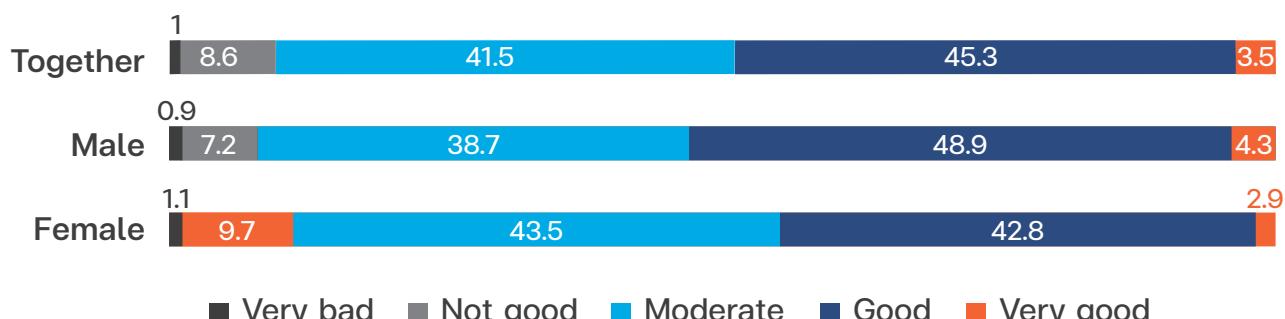


Figure 8 Percentage of older people classified by overall health status from assessment and gender, 2024

Source: National Statistical Office, The 2024 Survey of the Older Persons in Thailand

1.4.3 Desirable health behaviors

Individuals with desirable health behaviors are those who exercise, eat fresh vegetables and fruits, drink at least eight glasses of clean water daily, refrain from consuming alcohol, and do not smoke. Only 26.2% of older Thais have such desirable health behaviors. The proportion is higher among women (29.9%) than men (21.0%). Older people in Bangkok show the best health behaviors (35.8%), followed by those in the south and central regions.

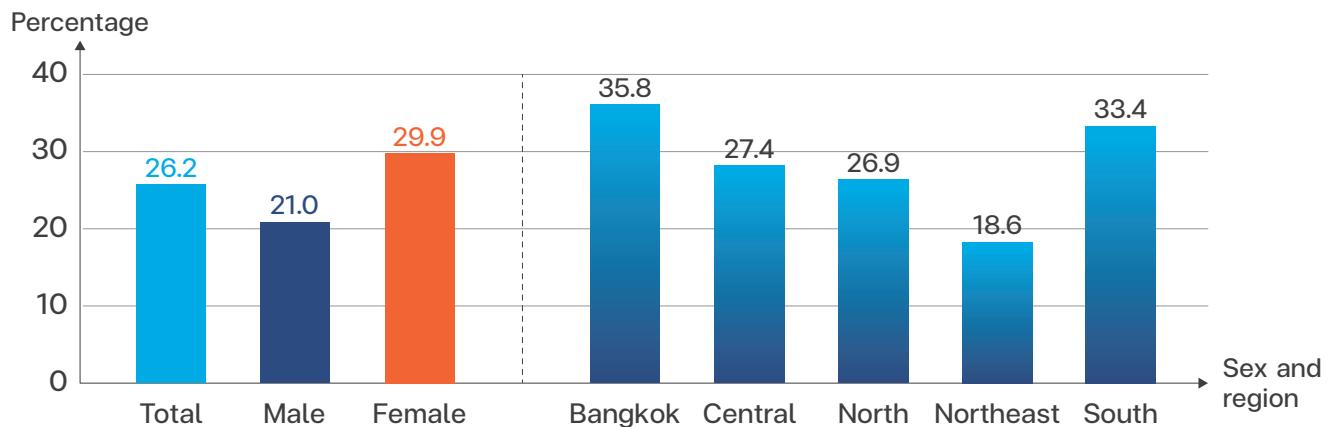


Figure 9 Percentage of Older Thais with Desirable Health Behaviors by Gender and Region, 2024

Source: National Statistical Office, The 2024 Survey of the Older Persons in Thailand

1.4.4 Health promoting behavior and health risk behavior

Most older Thais already engage in good health-promoting behaviors, with 87.4% consuming vegetables and fruits, 89.2% drinking at least eight glasses of clean water daily, and 37.9% exercising regularly. Risky health behaviors, such as alcohol consumption and smoking, were observed in 3.3% and 7.9%, respectively, reflecting that older Thais generally take good care of their health.

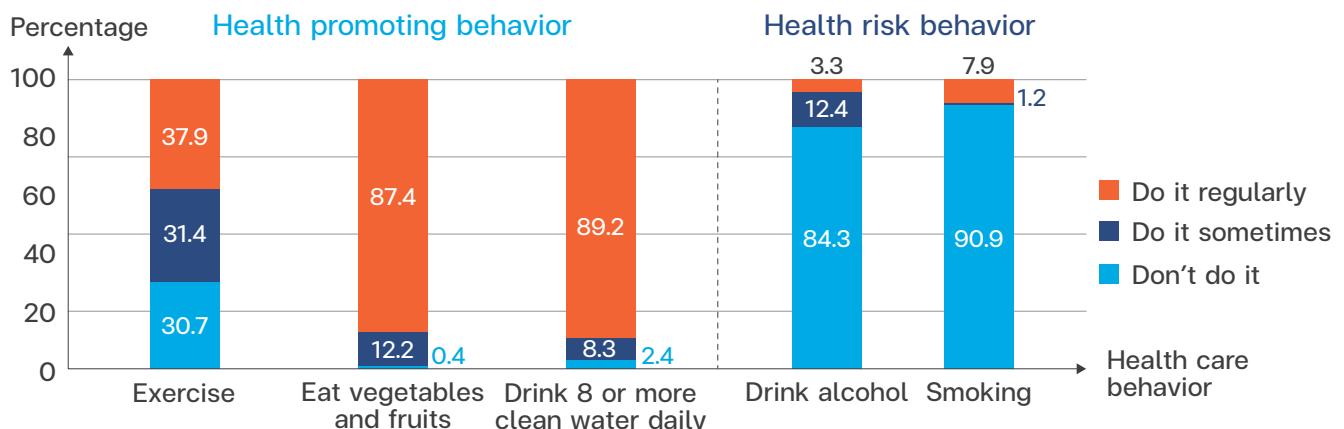


Figure 10 Percentage of Older Thais by Health Care Behavior, 2024

Source: National Statistical Office, The 2024 Survey of the Older Persons in Thailand

1.4.5 Level of happiness of older Thais

Changes in older age affect economic, social, and mental roles. According to a survey on happiness level among older Thais, 57.1% reported being ‘quite happy,’ and 14.3% reported being the ‘happiest.’ Men reported higher happiness levels than women, while Bangkok had the highest proportion of older people assessing themselves as ‘very happy’ (23.3%), followed by the south and north regions.

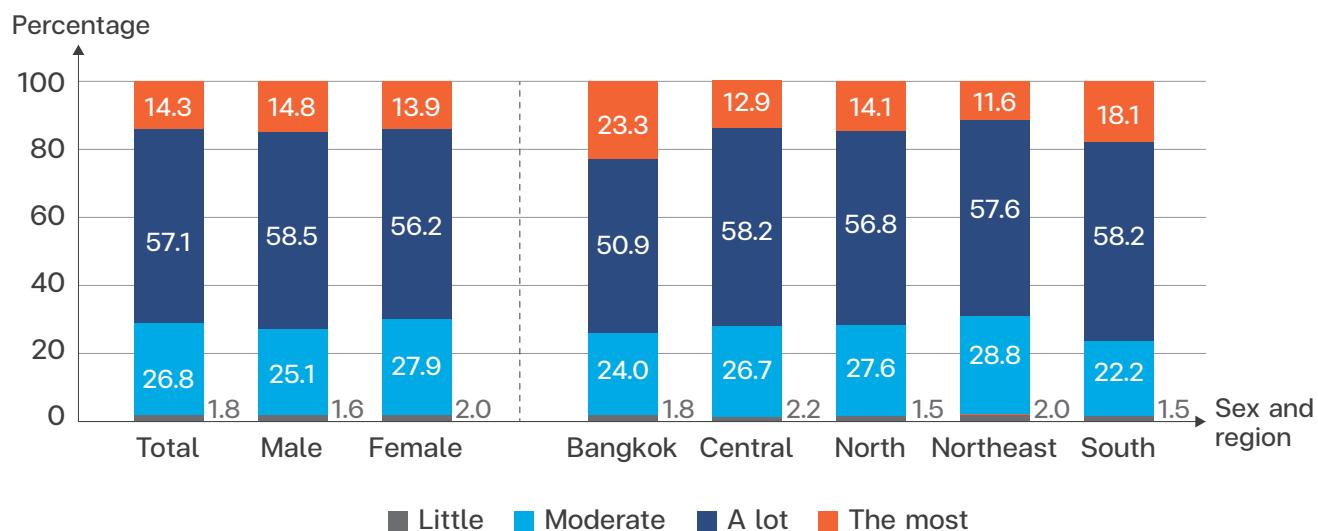


Figure 11 Percentage of Older Thais by Happiness Level in the Three Months Prior to the Interview, 2024

Source: National Statistical Office, The 2024 Survey of the Older Persons in Thailand

1.4.6 Literacy of older Thais

Among older Thais, 89.56% were literate, 10.43% were illiterate at the time of the survey.

Table 4 Literacy of older Thais

Able to read and write	%
Yes	89.56
No	10.43
Unspecified	0.01

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

1.4.7 Educational attainment of older Thais

Among older Thais, 60.82% had an education below the primary level, 32.67% had education above the primary level, and 6.31% had no formal education. This reflects past limitations in access to education, and highlights the need to promote lifelong learning.

Table 5 Educational attainment of older Thais

Educational attainment	%
No formal education	6.31
Some primary	60.82
More than primary	32.67
Other	0.15
Unspecified	0.05

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

1.4.8 Employed older Thais

At the time of the survey, 38% of the elderly were still working, while 62% were retired (or unemployed). Among those who still worked, 58.66% were in the agricultural sector and 41.31% were in the non-agricultural sector.

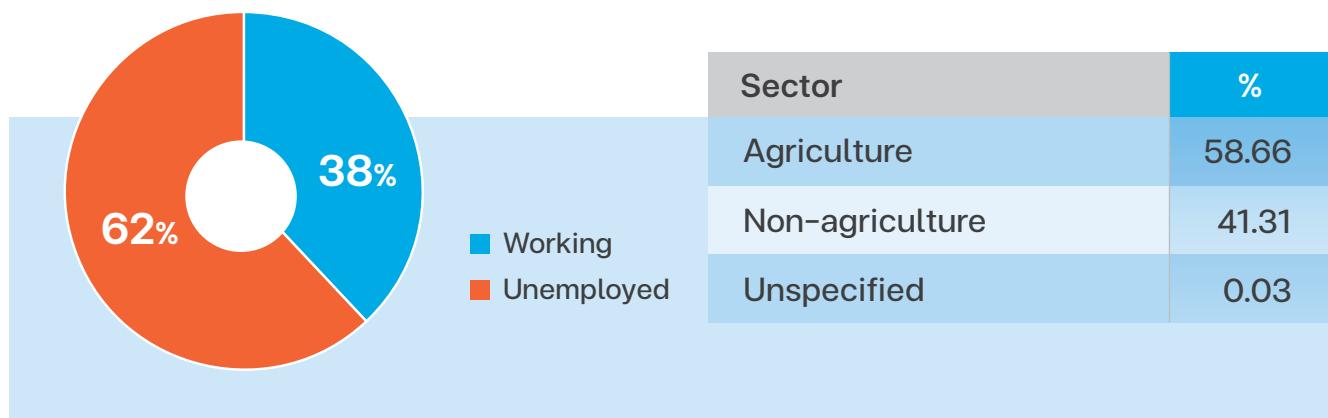


Figure 12 Employed Older Thais

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

1.4.9 Employed older Thais by gender, age group, and average income

The 'young old' Thais are the group with the highest employment rate (47.1%). Men work more than women and also have a higher average annual income. One out of five (21.6%) of older Thais have an average annual income of 30,000–49,999 baht, with 'young old' earning more on average than other age groups.

Percentage of older Thais who are working by gender and age group (2024)

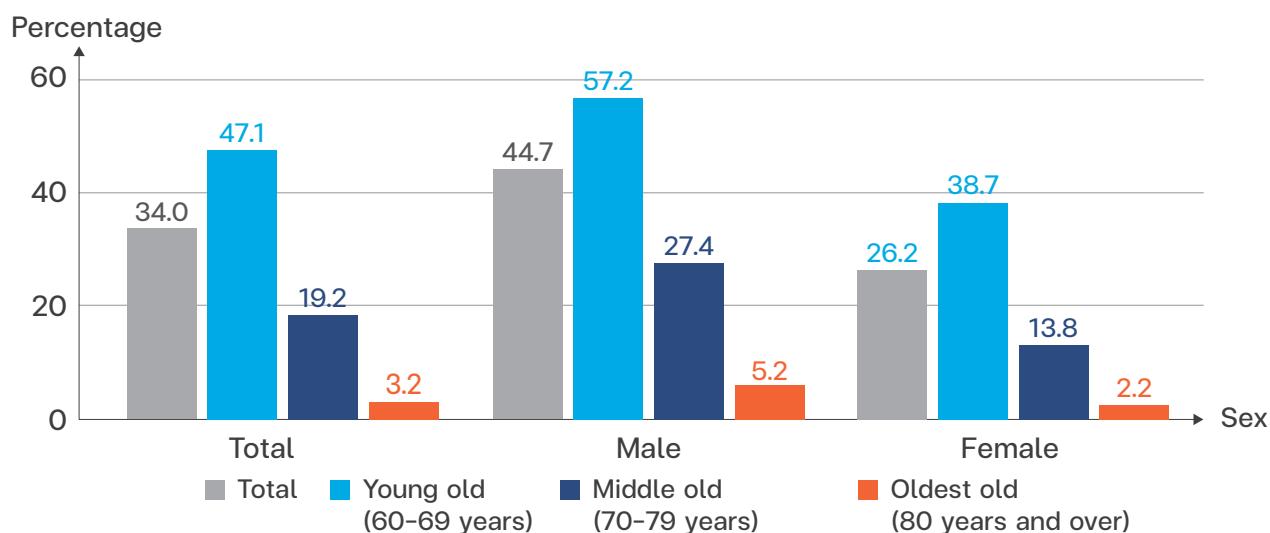


Figure 13 Percentage of older Thais who are working by gender and age Group: 2024

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

Percentage of older people with income classified by average annual income, gender and age group (2024)

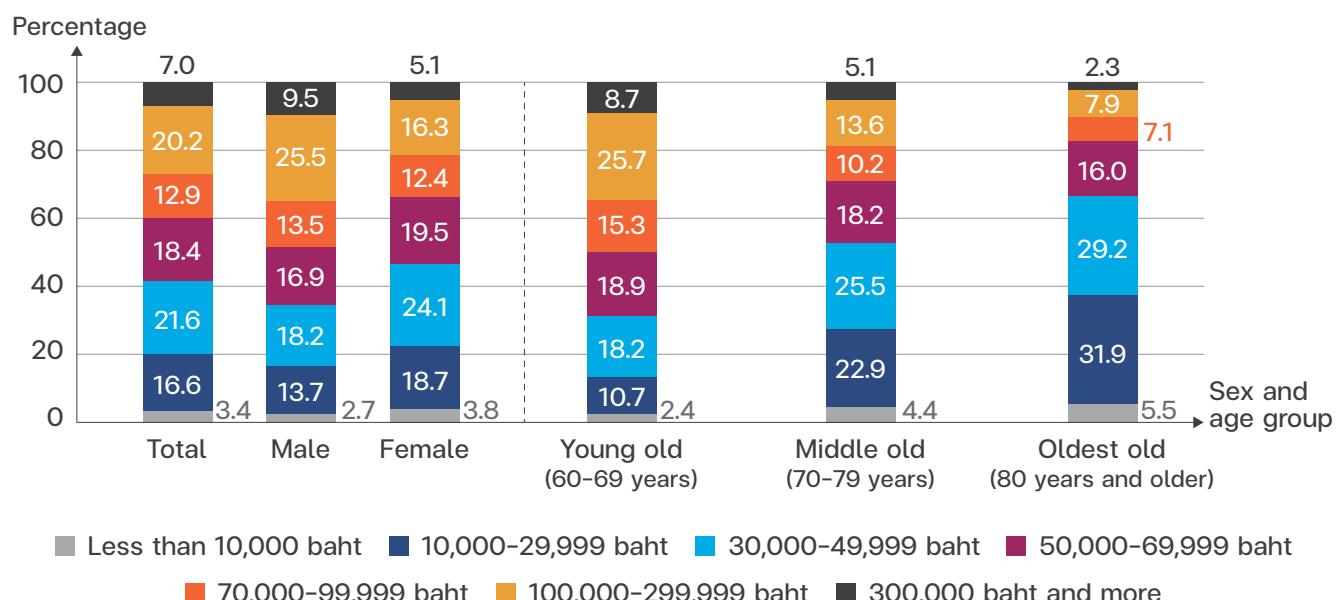


Figure 14 Percentage of older people with income by average annual income, gender and age group (2024)

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

1.4.10 Principal source of income for older Thais

The main source of income for older Thais comes from their children (35.7%) and from working (33.9%). Older men primarily earn income from work (45.8%), while older women primarily earn income from their children (41.7%).

Table 6 Main sources of income of older Thais by gender, 2024

Main source of income	Total	Male	Female
Children	35.7	27.3	41.7
Work	33.9	45.8	25.3
Subsistence allowance from government	13.3	10.4	15.4
Pension	6.8	9.4	5.0
Spouse	5.6	2.6	7.8
Interest from savings	1.6	1.7	1.6
other ¹	3.0	2.7	3.2

¹ Including income from siblings/relatives, social security fund, parents, friends and rental income (such as land, residence, etc.)

Note Percentage of income is calculated based on income amount.

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

1.4.11 Participation in groups/clubs and types of groups/clubs of Thai older persons, 2024

In the 12 months prior to the survey, regarding participation in community activities, older Thais most frequently participated in funeral groups (53.54%). Age-related groups, such as Elderly group, had participation at the level of 29.05%. Participation in Vocational groups, housewife groups, Cooperative groups, volunteer groups, and other activity groups was below 20%, indicating that the social role of older Thais in creative activities or other socio-economic participation is limited.

Table 7 Participation in groups/clubs in the 12 months prior to the interview, types of groups/clubs of older Thais, 2024

Type of community group	Membership in the group/club		
	Is a member	Not a member	Unsure
1 Funeral group	53.54%	42.61%	3.85%
2 Elderly group	29.05%	64.96%	5.98%
3 Cooperative group	17.46%	75.05%	7.49%
4 Housewife group	6.72%	83.86%	9.42%
5 Volunteer group	6.26%	85.52%	8.22%
6 Vocational group	5.17%	83.57%	11.26%
7 Get together to do activities	4.99%	80.03%	14.99%
8 Civil boy scout group	1.00%	80.02%	18.99%

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

1.4.12 Number of technological crime cases against older persons

In 2024, 35,971 older Thais were defrauded or became victims of a scam, with estimated damages amounting to over 13,044,915,591 baht. The most common cases involved “fraudulent purchase or sale of goods or services not organized as a criminal syndicate,” and older women were more often victims than men.

Table 8 Number of technology-related crime cases among older Thai victims, 2024

1/3/2022 – 15/2/2025		
Total number of cases 38,546 cases	Total number of victims 35,996 people	
Damage value 13,050,674,746 baht		
Number of male victims 16,438 people (45.67%)		Number of female victims 19,686 people (54.69%)
Case type	Number of crime cases	
Deceiving others into buying or selling goods or services that are not part of an organized scheme	5,642	
Deceiving people into installing system drivers on the phone	4,125	
Impersonating to borrow money	2,906	
Deceive into investing through computer systems	2,813	
Using telephone threats to instill fear and deceive the victim into transferring money	2,677	
Deceiving into transferring money in exchange for an award or other purposes	2,162	
Deceiving into transferring money in exchange of earning extra income through side jobs	1,092	
Fraudulently inducing to obtain a loan in a manner of fraud, extortion, blackmail	1,039	
Deceiving others into buying or selling goods or services that are part of an organized scheme	504	
Deceiving someone into making an investment that constitutes an offense under the Emergency Decree on Borrowings	485	
Romance Scam	386	
Digital asset scams	285	
Illegally access a computer system or data (hacking) to commit fraud, extortion, or blackmail	184	
Total	23,740	

Source: Technology Crime Investigation Division, Royal Thai Police, 2025

1.5

Projected Size of the Child, Working-age and Older Thai Population: 2025-2040

Thailand is continuously and rapidly entering a super-aged society. In the next 16 years, the child population will decrease to only 12.79% of the total, the working-age population will decline to 55.83%, while the older population will increase to 31.37%, or 2.45 times the size of the child population.

Table 9 Projected size of the child, working-age and older Thai population: 2025-2040

Year	Total population	Number of population by age group					
		0-14 years (children)		15-59 years (working-age)		60+ years (older)	
		N	%	N	%	N	%
2025	67,088,996	10,637,212	15.86	41,917,127	62.48	14,534,657	21.66
2026	67,143,295	10,496,011	15.63	41,582,935	61.93	15,064,349	22.44
2027	67,176,478	10,354,072	15.41	41,224,714	61.37	15,597,693	23.22
2028	67,187,640	10,210,624	15.20	40,851,797	60.80	16,125,220	24.00
2029	67,175,923	10,064,987	14.98	40,475,762	60.25	16,635,174	24.76
2030	67,140,539	9,916,612	14.77	40,105,230	59.73	17,118,697	25.50
2031	67,080,785	9,765,102	14.56	39,745,593	59.25	17,570,090	26.19
2032	66,996,035	9,612,719	14.35	39,393,970	58.80	17,989,346	26.85
2033	66,885,740	9,459,286	14.14	39,046,110	58.38	18,380,344	27.48
2034	66,749,444	9,304,746	13.94	38,694,668	57.97	18,750,030	28.09
2035	66,586,786	9,149,160	13.74	38,334,858	57.57	19,102,768	28.69
2036	66,397,497	8,992,687	13.54	37,965,092	57.18	19,439,718	29.28
2037	66,181,405	8,835,561	13.35	37,589,125	56.80	19,756,719	29.85
2038	65,938,454	8,678,083	13.16	37,213,725	56.44	20,046,647	30.40
2039	65,668,704	8,520,603	12.98	36,848,184	56.11	20,299,917	30.91
2040	65,372,337	8,363,327	12.79	36,498,965	55.83	20,510,045	31.37

Source: Population Projections for Thailand, 2010-2040 (Revised Edition), Office of the National Economic and Social Development Council

2

Context: Ageing in Place



At present, most societies are facing significant demographic changes, namely the rapid increase in the number of older persons, which brings both new challenges and opportunities in managing the quality of this population group (World Health Organization [WHO], 2018). One of the most prominent concepts in older population quality management is ageing in place, which emphasizes enabling older persons to continue living in their own home without having to move to a nursing facility or retirement home (AARP Public Policy Institute, 2014). This concept focuses on maintaining independence, enhancing quality of life, and fostering psychological security for older persons within a familiar and safe environment.

Supporting older persons to remain in their own home is important for promoting independence, reducing care expenses, and maintaining social relationships with family and neighbors (Greenfield, 2016). In addition, the expanding ageing society necessitates the development of policies and measures that facilitate home living for this population group, including the integration of technology and health services such as telehealth systems and home safety monitoring systems (Lecovich, 2014). Therefore, promoting the concept of “ageing in place” is a sustainable option that is vital for building a caring and elder-friendly society.

In Thailand, the concept of “ageing in place” was concretely addressed following the adoption of the Madrid International Plan of Action on Ageing in 2002. Since then, studies, knowledge expansion, and continuous community-level implementation have taken place, and continues up to the present. Therefore, the definition of “ageing in place” in Thailand refers to **the idea that throughout a person’s life course, individuals should be able to live in their own home or original community as they wish. This is to enhance independence, safety, and quality of life within familiar surroundings, supported by various services** (definition by the Editorial Board).

Its implementation consists of three components: (1) Place (2) Service System and (3) Management System (Sasipat Yodpet and Natthaphat Sarobon, 2025, p. 15).

These components serve as the framework for explaining the implementation of the ageing in place concept in 2024, as illustrated in the following diagram.



Figure 15 Diagram of the Components of Ageing in Place

Source: Sasipat Yodpet and Natthaphat Sarobon, 2025, p. 15

2.1

Relevance and Urgency of the Issue

The issue of having a care network and the ability to live independently within the family is a key indicator of the necessity for establishing service systems in line with the ageing in place concept. When examining data on older persons in Thailand, the following key aspects need to be considered.

2.1.1 Ageing index, old-age dependency ratio, and support ratio

The value of Thailand's Ageing Index has been continuously increasing, reaching 137.55% in 2024. The old-age dependency ratio, which reflects the extent to which the working-age population is responsible for supporting older persons, stands at 32.53%. This means that 100 working-age individuals support about 32 older persons. Meanwhile, the support ratio, or the number of working-age people available to support one older person, is 3.07%. In other words, about three working-age individuals are required to support one older person.

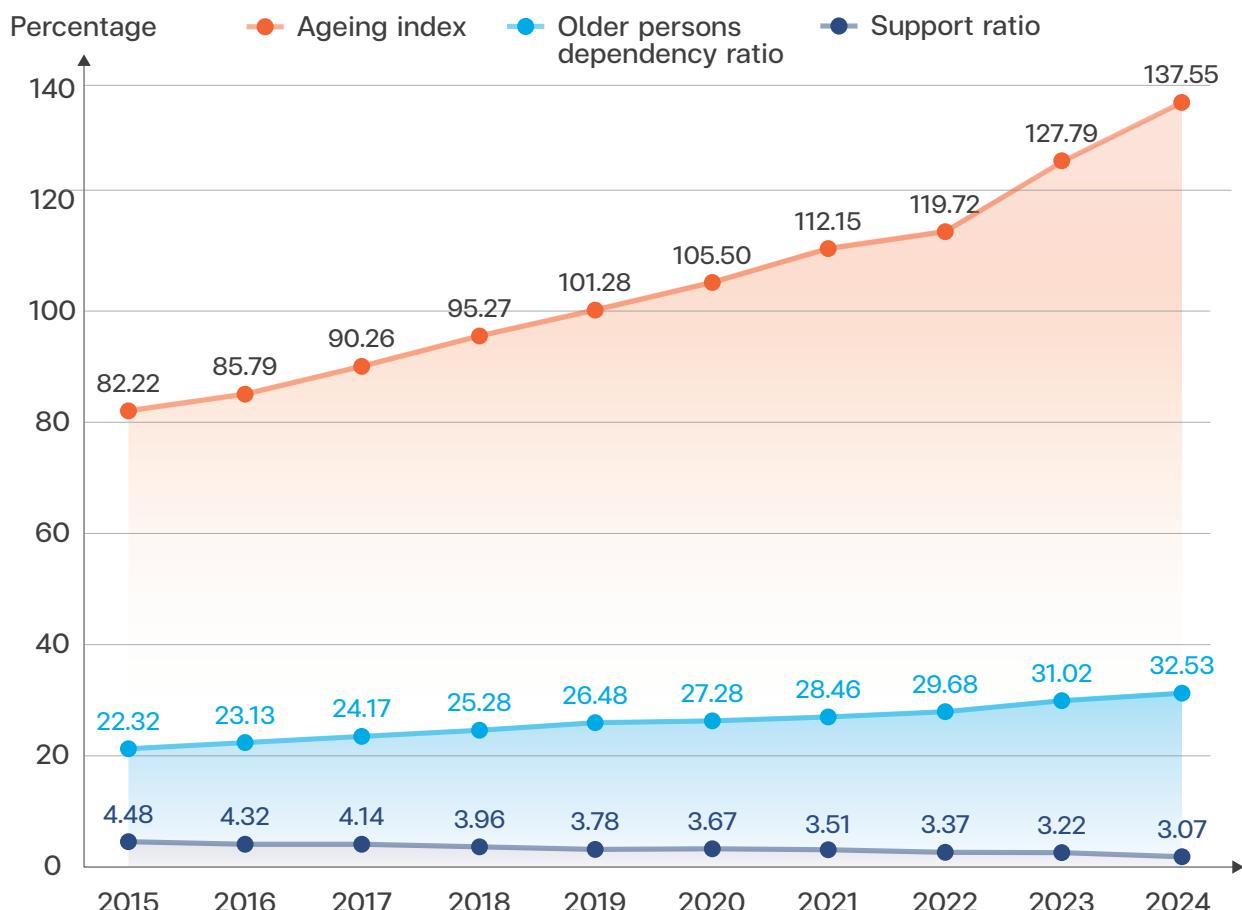
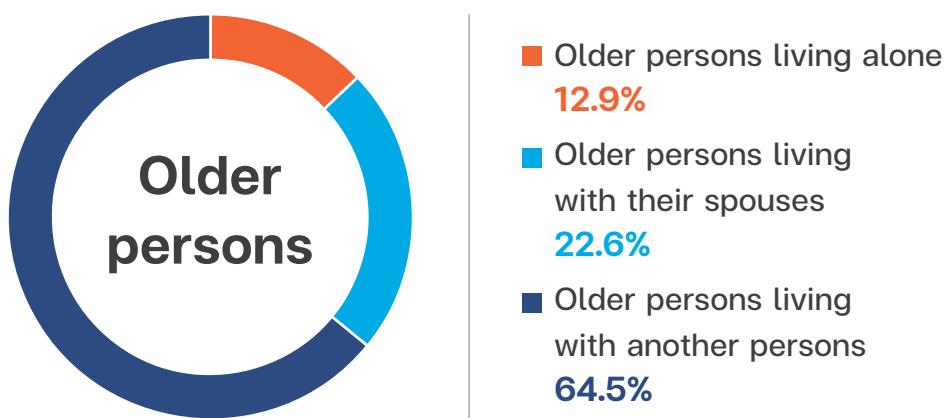


Figure 16 Index of ageing, older persons dependency ratio and support ratio, 2024

Source: The Bureau of Registration Administration, Department of Provincial Administration, Ministry of Interior

2.1.2 Household living arrangements

The household living arrangements of Thai older persons can be divided into two types: older persons living alone, accounting for 12.87%, and older persons living with others, accounting for 87.13%. Among older Thais living alone (12.87%), when combined with those living only with a spouse (22.59%), the remainder live with other family members or non-relatives. In the group living with others (including children, relatives, and non-relatives) “children” are the most significant co-residents, appearing across four different household categories. However, older persons living solely with their children represent only 7.78%, reflecting changes in family structures in Thailand.



Other individuals living with older persons		%
1	Spouse	22.59
2	Spouse, children and relatives	15.18
3	Spouse and children	12.03
4	Children and relatives	11.77
5	Relatives	8.69
6	Spouse and relatives	8.08
7	Children only	7.78

Figure 17 Household living arrangements of Thai older persons

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

2.1.3 Increase in the number of Thai older persons living alone

Data on Thai household living arrangements indicate that the proportion of older persons living alone has steadily increased, from 3.6% in 1994 to 12.9% in 2024.

Percentage

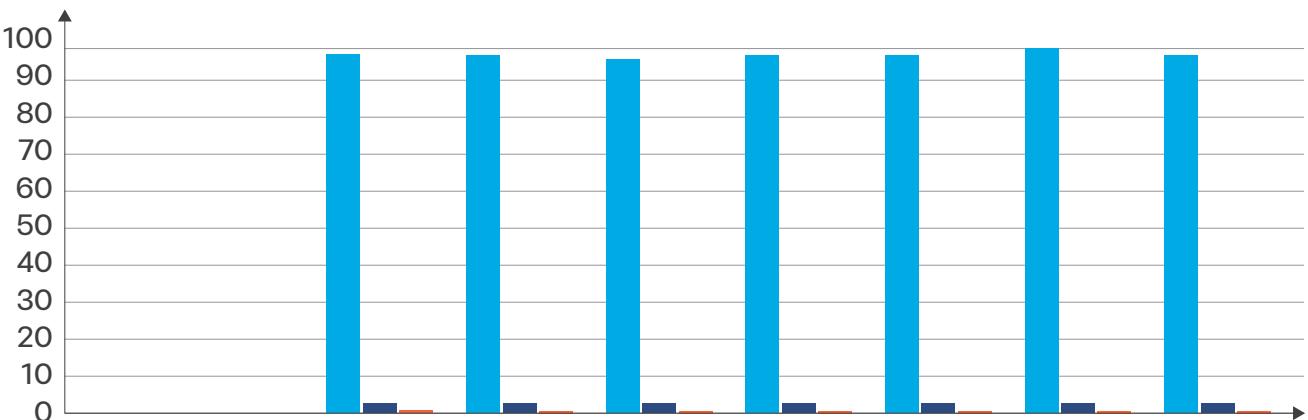


Figure 18 Percentage of older persons living alone in households, 1994-2024

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

2.1.4 Ability to perform daily activities

In 2024, nearly all Thai older persons, 96.86%, were able to perform activities in daily living (ADL) independently, although this proportion has declined since 2018. Meanwhile, the group with moderate to severe dependency slightly decreased, from 2.49% in 2018 to 2.4% in 2024. The group with increasing dependency rose from 0.55% in 2018 to 0.63% in 2024.



Levels of Ability and Dependency	Year 2018	Year 2019	Year 2020	Year 2021	Year 2022	Year 2023	Year 2024
Have potential, doesn't want to be dependent	96.95	96.87	96.95	96.75	96.83	98.86	96.86
Have severe to moderate dependency	2.49	2.53	2.48	2.66	2.62	2.53	2.4
Dependent	0.55	0.6	0.57	0.59	0.55	0.61	0.63

Figure 19 Percentage of older persons by assessment of ability to perform daily activities

Source: Annual Report 2024, Health Promotion and Environmental Health Surveillance, Department of Health, Ministry of Public Health

2.1.5 Health risk among Thai older persons

From the screening of nine dimensions of health of older persons, it was found that they face moderate health risks. The top three highest risk areas are hearing at 27.07%, cognitive function at 25.45%, and malnutrition at 17.39%.

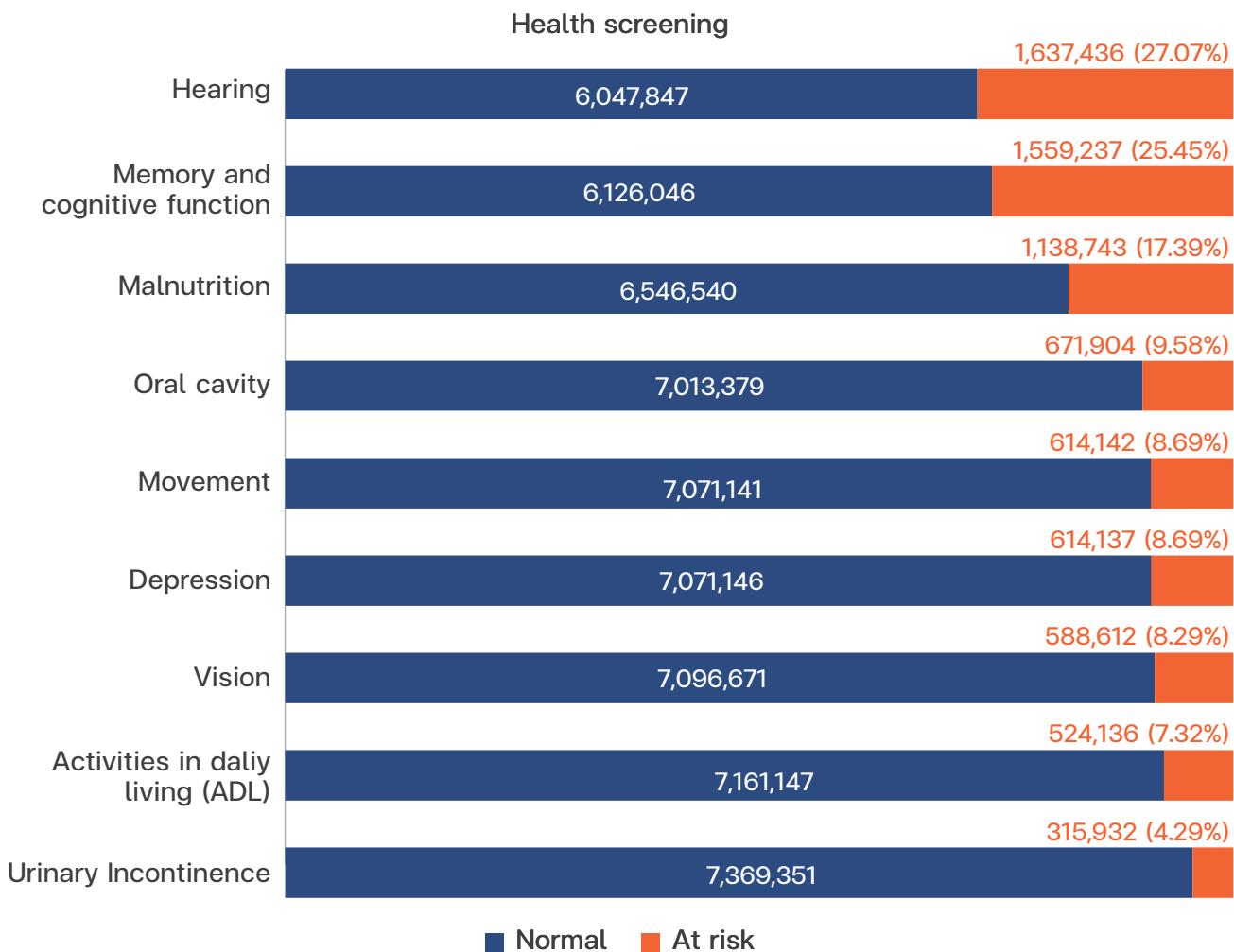


Figure 20 Screening of nine dimensions of health of Thai older persons

Source: Annual Report 2024, Health Promotion and Environmental Health Surveillance, Department of Health, Ministry of Public Health

2.1.6 Age-friendly household environment

Across Thailand, only 7.09% of older persons live in homes with an elder-friendly environment. By region, older persons in the central region live in homes with the most suitable environments at 8.65%, similar to Bangkok. In contrast, older persons in the southern region live in a home with the least suitable environment, at only 4.61%.

Table 10 Living in a home with age-friendly environmental conditions by gender, age group, administrative area, and region, 2024

Characteristics of the older persons		Percentage of older persons living with age-friendly environment	
		Elder-friendly	Not elder-friendly
Whole Kingdom		7.09	92.89
Sex	Male	6.1	39.52
	Female	7.81	53.37
Age group (years)	60-69	4.72	56.52
	70-79	9.3	27.03
	80+	13.96	9.35
Area of residence	Urban	8.66	39.16
	Rural	5.9	53.73
Region of residence	Bangkok	8.37	9.52
	Central	8.65	24.6
	North	6.01	19.52
	Northeast	6.96	27.98
	South	4.61	11.27

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

When classified by administrative area, older persons living in a municipal area reside in a more suitable environment than those living outside a municipality. By age group, the oldest-old (80+ years) live in the most age-friendly environment, at 13.96%, whereas young-old (60-69) live in the least suitable environment, at 4.72%.

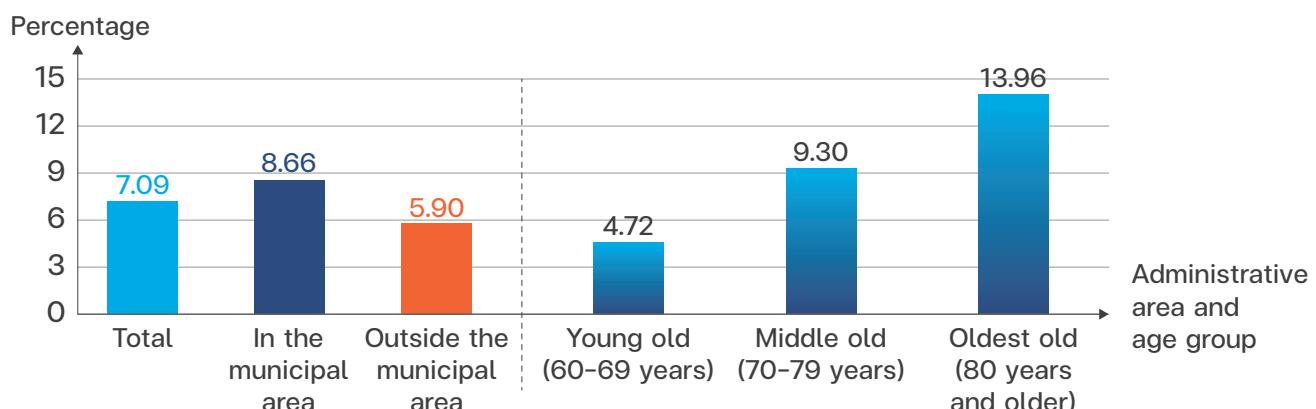


Figure 21 Older persons living in home with elder-friendly conditions, by administrative area and age group, 2024

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

2.2 Place

In preparing this section, the focus is on living in one's original home and community, as well as the surrounding environment.

2.2.1 Original home

Convenience, safety, and independence are the key principles in adapting homes for older persons. Indicators of a suitable home for older persons include the presence of handrails on stairs and in bathrooms/toilets, bedrooms located on the ground floor or in a single-story house, bathrooms/toilets inside the house, and seated toilets with footrests (Department of Health, Ministry of Public Health, 2015).

(1) Older persons living in elder-friendly homes

Survey results show that the majority of Thai older persons live in single-story houses (51.74%) which have stair handrails (50.15%), but only 2.72% have handrails in the bedroom. Seated toilets with footrests are present in 71.62% of homes, and 89.37% of homes have toilets indoors. A very small proportion of homes lack toilets entirely. Overall, it can be said that Thai older persons live in suitable homes.

Table 11 Components of an age-friendly home

Components of a house		Percentange (%)
Location of the bedroom	Upper floor	15.85
	Ground floor	32.40
	Single-story house	51.74
Bars for hand-holds	On the staircase	50.15
	In the bedroom	2.72
	In the bathroom/shower	15.48
Type of toilet in the household	Sit-down without foot rest	71.62
	Squat	25.59
	Sit-down and squat toilet	2.77
	Pit latrine / tank toilet / toilet discharging into rivers or canals, or other types of toilets, with a partitioned room	0.01
	No indoor toilet	0.0046
Location of toilet/bathroom	In the house	89.37
	Outside but connected to the main house	8.96
	Outside and separate from the main house	1.67

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

(2) Older persons experience the most falls inside the home

Based on the concept of living in a suitable and safe home, ensuring safety is essential for older persons to carry out daily life at home. However, 2024 data show that older persons of all genders most frequently experienced their last fall within the home itself, at 50.5%. Older women accidentally fell more often than older men. By age group, older persons of all age ranges also most commonly fell within the home.

Table 12 Location of older persons' most recent accidental fall, by gender and age group

Sex and age group		Place of last fall		
		Inside the house	Around the house	Outside the house
Sex	Total	32.4	50.5	17.1
	Male	29.0	47.8	23.2
	Female	34.3	51.9	13.8
Age group	Young old (60-69 years)	28.9	47.8	23.3
	Middle old (70-79 years)	30.0	55.2	14.8
	Oldest old (80 years and older)	47.4	49.0	3.6

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

(3) Causes of accidental falls among Thai older persons

The survey on the most recent falls among older persons revealed that the three leading causes were tripping (46.5%), slipping (29.5%), and uneven surfaces (10.8%), respectively. Other causes included dizziness or faintness (6.5%), poor vision (2.1%), inadequate lighting (1.1%), falling down stairs (1.0%), and other causes (2.4%).

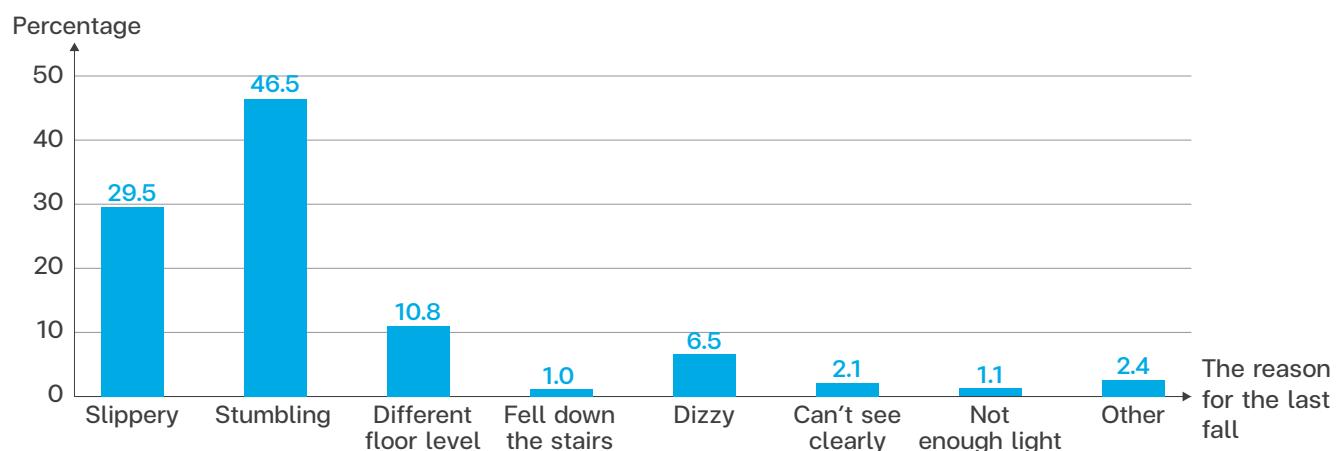


Figure 22 Causes of accidental falls among Thai older persons

Source: National Statistical Office. The 2024 Survey of the Older Persons in Thailand

2.2.2 Community and environment

The community and environment refer to the surroundings of older persons that facilitate daily living, particularly in terms of safety, from the home to public streets, as well as mental well-being. Therefore, the community must play a key role in supporting older persons to live happily, participate in society, and have access to effective and easily-reachable health services.

Increase in elder-friendly and disability-friendly communities

Currently, the number of communities that are elder-friendly and accommodating for persons with disabilities has increased. In 2022, there were 90 age-and disability-friendly communities. This number rose to 126 in 2023 and 370 in 2024.

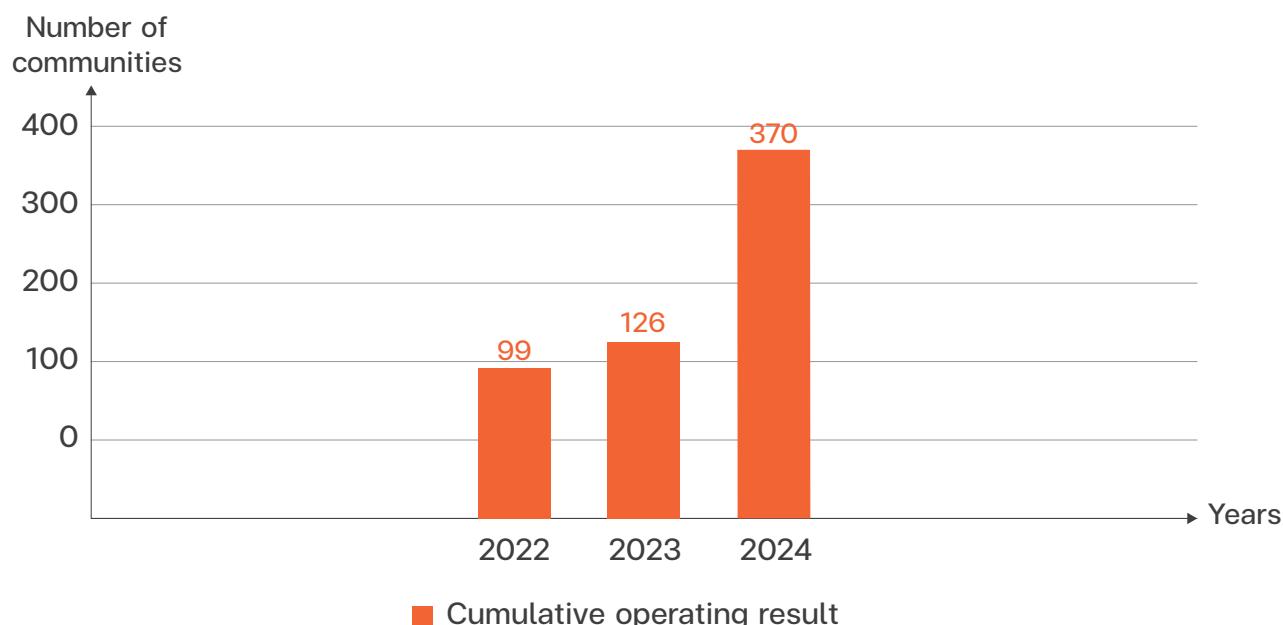


Figure 23 Number of communities that are age-friendly and disability-friendly

Source: Annual Report 2024, Health Promotion and Environmental Health Surveillance, Department of Health, Ministry of Public Health

2.3

Service System

The care service system for older persons in local communities refers to comprehensive and diverse service mechanisms that enable older persons to maintain well-being in their own homes and communities for as long as possible. The government and relevant agencies must develop service models that cover basic needs and support local administrative organizations (who are closely connected to the people) in providing services in their areas independently, according to the specific context of each locality. In 2024, the following actions were carried out:

2.3.1 Housing and environmental improvements

- **The National Housing Authority** carried out housing improvements for low-income and indigent older persons, totaling 71 units, accounting for 88.75% across six provinces: Phichit, Phayao, Trat, Chaiyaphum, Prachuap Khiri Khan, and Satun.
(Source: National Housing Authority)
- **The Department of Older Persons** improved the environment and facilities to be suitable and safe for older persons (home repairs), totaling 11,238 units, amounting to 442,094,417.06 baht. (Source: Department of Older Persons)
- **The Department of Empowerment of Persons with Disabilities** carried out housing improvements/repairs for older persons with disabilities, totaling 2,161 units, accounting for 51.42%.
(Source: Department of Empowerment of Persons with Disabilities)

2.3.2 Health services in housing

Health services in residences are provided by volunteers caring for older persons as follows:

- **Social Development and Human Security Volunteers (specializing in older persons):**
Total volunteers: 1,921 Older persons receiving care: 28,815
(Source: Department of Older Persons)
- **Local Care Volunteers in Local Administrative Organizations (LCV-LAOs):** Total volunteers: 11,760. Older persons with dependency receiving care: 136,100
(Source: Department of Local Administration)
- **Home visits for older persons and dependent individuals under benefit packages:**
Services include home-based health care to assess and address health issues, as well as rehabilitation to help older persons and dependent individuals improve daily living activities. According to health zone data, Zone 13 (Bangkok) had the highest coverage, with 94.01% of older persons accessing services and receiving home visits under benefit packages. This was followed by Zone 7: 86.13%, Zone 3: 85.82%, and Zone 10: 85.39%, respectively.
(Source: Bureau of Elderly Health)

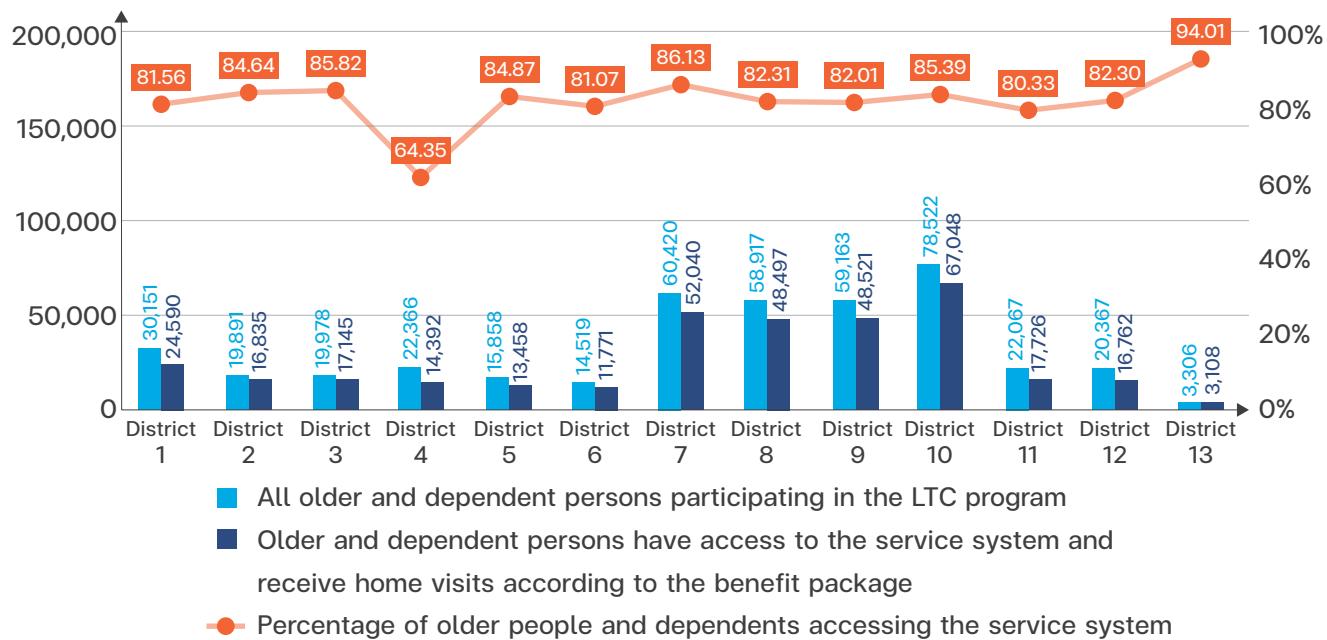


Figure 24 Older persons and dependent individuals accessing services and receiving home visits under benefits packages

Source: Bureau of Elderly Health Annual Report 2024

2.3.3 Social services in homes and communities

Social services in homes and communities aim to support older persons in living safely and comfortably in the homes and communities of their choice. These services include:

(1) Foster care for older persons by “Foster Families”: This program assists older persons who are poor, lack caregivers, or have caregivers unable to provide adequate care. The Comptroller General’s Department has set the assistance rate for foster families at 2,000 baht per person per month. In cases with reasonable justification, assistance may be provided up to a maximum of 3,000 baht per month per family. Number of older persons assisted: 1,107. (Source: Department of Older Persons)

(2) Provision of care and rights protection for older persons in the community or Well-being and Life Protector Project in the community: Well-being and Life Protector project were operated in 12 pilot provinces covering 19 areas. Number of Well-being and Life Protectors or caregivers: 35; older persons receiving social care and protection: 24,340. (Source: Department of Older Persons)

(3) Home-based services for dependent older persons: Services aim to facilitate daily living and promote health for dependent older persons, with a system of health protection in homes and communities as follows:

- Local Government Organizations (municipal level): City and town municipalities issue policies and budgets to enhance implementation in accordance with the Ministry of Public Health’s announcement on regulatory measures for home-based care services for older persons (2021). Implementation rate: 23.11% (Target: 25%)
- Innovation and academic outputs in health promotion and care for older persons and dependent individuals: Implemented in at least 13 health zones. (<https://shorturl.asia/EdZwu>)

2.3.4 Promotion and development of quality of life

- **Older Persons Clubs:**

- In 2024, there were 29,774 older persons clubs affiliated with the Senior Citizens Council of Thailand Under the Patroage of Her Royal Highness Princess Srinagarindra, with a total of 4,269,594 members.

- Distribution by region: Northern: 9,668 clubs, Northeastern: 13,604 clubs, Central: 3,815 clubs, Southern: 2,236 clubs, Bangkok: 451 clubs

(Source: Senior Citizens Council of Thailand Under the Patroage of Her Royal Highness Princess Srinagarindra)

However, survey data show that only 29.05 % of older persons actually join are members of older persons clubs.

(Source: National Statistical office, The 2024 Survey of the older persons in Thailand)

- **Older Persons Schools:**

- Total schools: 3,257

- Distribution: Northeastern: 1,349 schools, Northern: 965 schools, Central: 544 schools, Southern: 387 schools, Bangkok: 12 schools

- Total older students nationwide: 213,910

(Source: Department of Older Persons)

- **Centers for Quality of Life Development and Occupational Promotion for Older Persons:**

- Total centers: 2,193

- Distribution: Northeastern: 791 centers, Northern: 572 centers, Central: 454 centers Southern: 376 centers

- Centers meeting standard criteria: 1,555 (70.90%)

- Number of older persons participating in center activities: 216,379

(Source: Department of Older Persons)

2.3.5 Rights protection services

- In 2024, legal assistance was provided to 4,596 individuals age 60 years or over.

- Cases related to life and bodily harm were the most common, totaling 1,331 cases.

- Assistance provided to older persons by the Complaints Management Group, Rights and Liberties Protection Division, totaled 67 cases, with debt cases being the highest at 26 cases. (Handled by the Legal Counseling and Rights Promotion Group and the Complaints Management Group, Rights and Liberties Protection Division, Ministry of Justice)

- Financial assistance to victims and defendants in criminal cases involving older persons in 2024 (Jan 1–Dec 31) totaled 71,789,852 baht, broken down as follows:

- Older persons applying as victims: 1,204 people, 71,421,836 baht

- Older persons applying as defendants: 27 people, 365,016 baht

(Handled by the Rights and Liberties Protection Division, Ministry of Justice)

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(Handled by the Rights and Liberties Protection Division, Ministry of Justice)

2.3.6 Development of a system for protecting and safeguarding the rights of older persons

Particularly for at-risk, vulnerable, and dependent groups, including service recipients, welfare beneficiaries, or consumers:

- **Labor protection for older persons:** Older employees receiving labor protection: 3,406 (Data from Jan–Dec 2024)
- **Older persons without support or caregivers:** Placed in Social Welfare Development Centers for Older Persons: 2,016 (Data from Jan–Dec 2024)
- **Older persons receiving care from Social Development and Human Security Volunteers (specializing in older persons):** Number of older persons cared for: 28,815
- **Older persons receiving protection and services at Bang Khae Home for the Aged 2:** Number of older persons served: 137 (Data from Jan–Dec 2024)



2.4 Management System

The ageing-in-place management system refers to a structured mechanism and process established to plan, implement, coordinate, control, monitor, and evaluate various services that support Thai older persons. Its goal is to enable older persons to live in their own communities with quality of life, dignity, and maximum self-reliance within their specific context. This management system in Thailand has key characteristics emphasizing integration across multiple sectors, including government, private sector, civil society, and local government organizations. Its objective is to ensure continuity of services and comprehensive care for older persons across all dimensions. In 2024, the system was implemented as follows:

2.4.1 Formulation of strategies and action plans at national, regional, and local levels, ensuring holistic and continuing provision of care service for older persons

Strategies and action plans have been established with clear systems and guidelines for providing holistic and continuous care services for older persons. Municipalities have issued policies and budget measures to enhance implementation in accordance with the Ministry of Public Health's announcement on regulatory measures for home-based care services for older persons (2021), with an implementation rate of 23.11% (Target: 25%).

2.4.2 Support for volunteer work in local areas

This involves providing caregivers and volunteers to assist older persons, supplementing or replacing family members who may lack knowledge, expertise, financial resources, or time. The number of care volunteers for older persons thus reflects a key aspect of the health care support system.

2.4.3 Provision of volunteers for older persons care

- **Village Health Volunteers (VHV):**
 - Total: 885,267
 - Data from 12 health zones, excluding Bangkok

(Data as of Oct 2, 2024; Source: Department of Health Service Support, Ministry of Public Health)
- **Bangkok Health Volunteers (BHV):**
 - Fiscal year 2025: 13,274 volunteers
 - Covering 50 districts and 69 health service centers

(Data as of Oct 1, 2024; Source: Department of Health, Bangkok Metropolitan Administration)
- **Social Development and Human Security Voluteers (specializing in older persons):**

Total: 1,921 (Source: Department of Older Persons)

- **Local Care Volunteers in Local Government Organizations (LCV-LGO):**
 - Total volunteers: 11,760
 - Providing care to 136,100 dependent older persons
(Source: Department of Local Administration)
- **Care Managers (CM):**
 - Total in the system: 18,949
 - Cumulative data as of Dec 31, 2024 (Source: Department of Health)
- **Care Givers (CG):**
 - Total in the system: 111,172
 - Cumulative data as of Dec 31, 2024 (Source: Department of Health)

2.4.4 Efficient management of personnel and resources

- **Project for Developing a Health Protection System for Dependent Older Persons at Home and in the Community**

Objectives:

- Develop the capacity and competencies of health personnel according to professional standards across all areas.
 - Train and develop the skills of Care Managers: 1,695 persons (Target: 1,096)
 - Develop and rehabilitate Care Managers: 2,629 persons (Target: 1,455)
 - Develop and rehabilitate Caregivers: 6,167 persons (Target: 6,058)

- **Project for Developing a Long-Term Care (LTC) Health Promotion and Care System for Older Persons**

Key activities:

- Develop a long-term care system for older persons and dependent individuals
- Develop academic knowledge in health promotion and innovative care for older persons
- Promote palliative care for terminally ill patients within the community
- Develop mechanisms to implement the Ministry of Public Health's announcement on regulatory measures for home-based care services for older persons (2021)

2.4.5 Development of a systematic data and monitoring & evaluation system

- Development of a Central Data System for Health Promotion and Care of Older Persons
 - To ensure that older persons and dependent individuals receive health promotion, disease prevention, and equitable access to community-level health services, thereby enhancing equality, improving well-being, and sustainably reducing health service costs.
- Creation of a Centralized Long-Term Health Care Data System for Older Persons
 - Seamlessly linked at the community level into a single integrated system.
- Development of Innovations and Academic Outputs in Health Promotion and Care for Older Persons and Dependent Individuals covering at least 13 health zones

3

Implementation of Older Person Policies in Thailand



The drafting committee used the 3rd National Plan of Action on Older Persons (2023-2037): First 5-Year Urgent Phase (2023-2027) as the framework for the presentation, and supplemented it with other issues implemented by relevant agencies to ensure the most comprehensive coverage of the latest activities in support of the older population in Thailand.

3.1 Sub-Action Plan 1

Preparing the Pre-ageing Population



Sub-Action Plan 1 focuses on preparing the ageing population, with the target group being individuals age 25–59 years. This differs from the target group of the Report on the Situation of Older Persons in Thailand 2024, which mainly compiled information related to older persons age 60 years or over. Nevertheless, the drafting committee has chosen to present an example of preparation for the ageing population (age 25–59 years) from the Integrated Plan for Preparing for an Ageing Society, Fiscal Year (FY) 2024, as follows:

Measure 1	Encourage the population aged 25–59 to accelerate preparations for old age in the economic dimension
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National savings fund project (Support Mission): Members are encouraged to save and to maintain continuous savings. The number of participants is 2,637,000 people.

Implementing agency: National Savings Fund

Measure 2	Enhance knowledge and understanding of the ageing process, foster awareness of the value and dignity of older persons, and promote responsibility toward them
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(1) Public relations project on preparing for an ageing society: Production and dissemination of information on preparation for an ageing society in the dimensions of health, economy, society, and environment through various media:

- Television and radio broadcasting: 107 times
- Radio broadcasting: 1,270 times
- Digital media: 528 times
- Management-related media: 2 times
- Total: 1,907 times

Implementing agency: The Government Public Relations Department

(2) Project to promote network partnerships for quality preparation for an ageing society:

- Number of networks: 505
- Number of participants: 24,972

Activities carried out include:

- Integrating Pre-Retirement Planning Seminar training in an online format via Zoom Cloud Meeting.
- Signing of a Memorandum of Understanding (MOU) on cooperation to promote welfare and develop the potential of older persons for the enhancement and improvement of their quality of life, between the Department of Older Persons, Ministry of Social Development and Human Security, and the Retired Civil Servants Association, Ministry of Public Health (MOPH).
- Organizing the National Older Persons Day and Family Day 2024 on Friday, April 5, 2024.
- Organizing activities to raise awareness of the value and importance of older persons and to encourage intergenerational social participation, held at 76 provincial National Older Persons Day events between January and May 2024.
- Training on Promoting Learning Organizations and Driving Organizations toward Sustainability on July 18, 2024, at the Expressway Authority of Thailand.
- A workshop on knowledge management and cultivating saving discipline for readiness in old age on July 24, 2024.
- Pre-retirement seminars for MSDHS personnel in 2024 (2 Classes)
- Production of public relations media under the theme “Gain Knowledge, Prepare Before Old Age” to disseminate knowledge to government agencies, private organizations, partner networks, and the pre-elderly population.

Implementing agency: Department of Older Persons

(3) Expansion of preparation for an ageing society:

- Number of participants: 3,363,453
- Activities carried out include:
- Training to promote financial discipline for improving quality of life among personnel, in collaboration with the Muang Thai Yim Foundation and the Stock Exchange of Thailand.
- Promoting knowledge and disseminating public information to prepare for an ageing society through various online communication channels of the Department of Older Persons during FY 2024 (October 2023 – September 2024).

Implementing agency: Department of Older Persons

Measure 3

Promote the continuous development of knowledge and personal potential, enabling individuals to understand and effectively utilize information and digital technology.

Coding for older persons project: Design and development of a curriculum, content scope, learning process guidelines, and training formats suitable for older persons, including both general workers and small business owners. The curriculum focuses on developing digital skills, such as ChatGPT for Productivity, Influencers and Digital Content, Google Workspace for Productivity, Canva on Mobile for Your Product, Excel and Power BI, Affiliate Marketing, and advanced skills for professional expertise.

Number of participants: 400

Implementing agency: Digital Economy Promotion Agency

Measure 4

Accelerate the promotion of health literacy

(1) Pilot project on occupational health for older workers toward healthy ageing:

Connects health systems virtually to workplace hospitals.

Number of participants: 12,256

Activities include:

- Activity 1: Seminar on developing occupational health systems in workplaces in the eastern area of Bangkok.
- Activity 2: Training for health teams—leaders in health literacy for older workers—and implementation of virtual hospital-connected health systems in workplaces, conducted 7 times.
- Activity 3: Contracting to produce academic content and online media related to promoting health literacy.

Implementing agency: Department of Medical Services

(2) Project on promotion collaboration for participatory public policy development to support an ageing society: This project applies participatory public policy development processes to advance policies for preparing for an ageing society. Activities include the implementation of local health charters in 56 areas, with 15,600 participants.

Implementing agency: National Health Commission Office.

3.2 Sub-Action Plan 2

Enhancing the Quality of Life of Older Persons in All Dimensions Equitably and Inclusively



Measure 1 Enhancing the economic quality of life of older persons

1.1 Reform the old-age security system to be integrated and sustainable, covering older persons inclusively and equitably

1.1.1 Savings lottery project for a retirement nest egg

Promote savings among members of the National Savings Fund (NSF) for retirement through the Savings Lottery for Retirement, also known as the “Retirement Lottery.” Eligible participants include current NSF members, Article 40 insured persons, self-employed individuals, and informal workers age up to 60 years.

Implementing agency: Ministry of Finance.

1.1.2 Economic stimulus project through older persons

Build confidence and stimulate spending, alleviate living expenses, and increase employment opportunities, with priority given to vulnerable groups. The target group is estimated at no more than four million people. The Comptroller General’s Department will begin gradually disbursing 10,000 baht per person, with the first payment expedited by January 2025.

Implementing agency: Ministry of Finance

1.2 Promote work participation of older persons in both the formal and informal labor sectors

1.2.1 Provide job placement services for older persons: 1,393 people participated, 1,156 people successfully employed.

Implementing agency: Department of Employment

1.2.2 Job placement through the “Thai Mee Ngan Tum” website and application: 4,698 positions offered.

Implementing agency: Department of Employment

1.2.3 Promote employment in the private sector and civil society by providing jobs for older persons: 1,373 people participated, 1,136 people successfully employed.

Implementing agency: Department of Employment

1.2.4 Support occupational funding from the **Older Persons Fund**, providing loans to 4,261 people.

Implementing agency: Older Persons Fund

1.3 Enhance skills and working opportunities by expanding learning channels for early older persons

1.3.1 Develop skills for older persons through 88 training courses, with 3,798 participants completing the training.

Implementing agency: Department of Skill Development

1.3.2 Train in professional standards and qualifications for “Senior Friends”, in collaboration with the Thailand Professional Qualification Institute (Public Organization), with 79 participants completing the training (as of September 2024).

Implementing agencies: Department of Older Persons and Thailand Professional Qualification Institute (Public Organization)

1.3.3 Conduct workshops for the energetic seniors network to leverage soft power for entrepreneurs, with 248 networks and 1,275 participants (as of September 30, 2024).

Implementing agency: Department of Older Persons

1.3.4 Promote employment and income generation for older persons.

- (1) Knowledge Management Project to Promote and Develop the Quality of Life of Older Persons
 - Older persons participating: 2,500 people
 - Implementing agency: Community College Institute
- (2) Income Generation Project for Older Workers at the Older Persons Quality of Life and Occupational Promotion Centers (OPQOP) in 3 key areas and 4 Age-Friendly City areas in Chiang Rai Province, upgrading OPQOP to serve as a community daytime care center for older persons
 - Older persons participating: 280 people
 - Implementing agency: Chiang Rai Rajabhat University
- (3) Training Project on Producing Smart Large-Size Giant Freshwater Prawn Condo Systems for Older Persons
 - Older persons participating: 250 people
 - Implementing agency: Udorn Thani Rajabhat University

1.4 Provide knowledge on financial planning and entitlements

1.4.1 Provide knowledge on financial planning and benefits of being an NSF member, and develop the “NSF Application” for members, NSF representatives, and the general public to enhance financial literacy skills. 672 members participated in 10 courses.

Implementing agencies: National Savings Fund (NSF) and Stock Exchange of Thailand (SET)

1.4.2 Provide knowledge on the benefits of being an NSF member to encourage continuous savings among members in four districts of Nakhon Sawan Province, with 100 participants.

Implementing agency: National Savings Fund (NSF) and partner networks

1.5 Financial assistance

1.5.1 Payment of Old Age Allowances (successful transfers) to 11,626,372 people, with a total budget of 91,984,362,500 baht (data from January–December 2024).

Implementing agency: Comptroller General’s Department

1.5.2 State Welfare Registration Project: 5,575,969 older persons received state welfare benefits.

Implementing agency: Ministry of Finance.

1.6 Pensions, gratuities, and retirement allowances

1.6.1 Older persons receiving pensions, gratuities, and retirement allowances: 1,028,032 people, with a total budget of 341,847,916,781.71 baht (data from January–December 2024).

Implementing agency: Comptroller General’s Department

1.6.2 Retirement gratuities and pensions for insured persons:

- (1) Recipients of gratuities under old-age benefits according to Articles 33 and 39: 343,609 people, total budget 16,286.22 million baht.
- (2) Recipients of gratuities under old-age benefits according to Article 40: 52,685 people, total budget 266.99 million baht.
- (3) Recipients of pensions under old-age benefits according to Articles 33 and 39: 793,783 people, total budget 27,084.26 million baht.

Implementing agency: Social Security Office

Measure 2**Enhancing the health quality of life of older persons****2.1 Enhancing health literacy**

2.1.1 Support learning materials on “Preventing Falls in Older Persons” for networks implementing fall injury prevention at the health district, provincial, and local levels. Materials include: roll-ups “Falls in Older Persons”, pop-up book “Fall-Proof Homes for Older Persons”, flipbook “Falls in Older Persons”, and brochures “Assessment and Management of Fall Risks in Older Persons”.

Implementing agency: Injury Prevention Division, Department of Disease Control

2.1.2 Communicate risks through online media such as websites, Facebook, LINE Official Accounts, and various LINE groups in line with fall prevention measures.

Implementing agency: Injury Prevention Division, Department of Disease Control

2.1.3 Promote health literacy for fall injury prevention in 2024 by organizing the activity “Let’s Gather Health Enthusiasts” on Thai PBS television, targeting Nonthaburi, Chachoengsao, Suphanburi, Pathum Thani, Ratchaburi, and Bangkok Provinces.

Implementing agency: Injury Prevention Division, Department of Disease Control

2.1.4 Implement “Promoting Mental Well-being for Valuable and Happy Ageing”, with main activities as follows:

- (1) Build literacy and skills in mental health care on the Five Dimensions of Happiness in older persons’ clubs and Older Persons Quality of Life and Occupational Promotion Centers (OPQOP), also disseminated digitally.
- (2) Monitor issues of depression and suicide among older persons.
- (3) Develop and expand public health service systems to address behavioral and emotional problems in older persons with dementia.
- (4) Enhance the capacity of personnel and primary-level network partners, including personnel in secondary and tertiary public health services.
- (5) Integrate collaboration for proactive depression and suicide screening in communities, and provide mental health care for older persons in OPQOP and Older Persons Social Welfare Development Centers.

Implementing agency: Department of Mental Health

2.1.5 Disseminate mental health care information for older persons through various channels

- (1) Mental Health Promotion and Development Division Website:
<https://dmbpd.dmh.go.th/> – to access all types of mental health media for older persons.
- (2) Sukhapjai (Mental Health) Website: <http://www.thaimentalhealth.com/>
- (3) YouTube channel: “Five Dimensions of Happiness”
- (4) LINE Official Account: “Five Dimensions of Happiness” – to enhance happiness skills for older persons
- (5) TikTok – to disseminate knowledge on building happiness skills

Implementing agency: Department of Mental Health

2.2 Develop a health system for an ageing society that aligns with the needs of each group of older persons and is suitable for the local context

2.2.1 Older persons receiving care under the National Health Security entitlements:

- (1) Outpatient care: 61,856,885 visits
- (2) Inpatient care: 1,907,641 admissions
- (3) Services for older persons with dependency: 143,030 people

Implementing agency: National Health Security Office

2.2.2 Project for developing health promotion and care models for older persons and dependent individuals in prisons

- (1) Training programs:
 - Care Manager course for medical and public health personnel in 28 prisons.
 - Caregiver course (70 hours) for inmate volunteers in 40 prisons.
- (2) Develop a comprehensive pilot model for health promotion and care of older persons and dependent individuals in prisons, and create a database system linked to the Long-Term Care system in seven prisons: Chiang Mai Central Prison, Phitsanulok Provincial Prison, Klong Phai Central Prison, Chonburi Central Prison, Bang Khwang Central Prison, Nakhon Si Thammarat Central Prison, and the Correctional Hospital Detention Center.

Implementing agency: Department of Health (Annual Report 2024)

2.2.3 Religious leaders and holistic health promotion project

Since 2019, the Department of Health has promoted the health and well-being of monks following the National Monks' Health Charter, in collaboration with network partners and communities nationwide. Activities focus on monks' health care, life skills, lifelong learning, and overall well-being development.

- (1) Health Promotion Volunteers at Temples, Churches, and Mosques: 16,781 persons/monks (target: 14,510 persons/monks) – data from Health Temple and Google Drive as of September 30, 2024.
- (2) Monk Caregivers (Kilanupatthak) for bedridden monks, trained in a 15-hour older persons care course: 908 monks (target: 385 monks) – data as of September 30, 2024.
- (3) Religious institutions promoting health: 21,775 institutions, 43.64% (target: 35%).
- (4) Integrated database system for health-promoting religious institutions and health promotion volunteers: <https://healthreligions.anamai.moph.go.th/>
- (5) Religious leaders with desirable health behaviors: 6,741 persons, 22% (target: 25%) – data from Health Temple as of September 30, 2024.

Implementing agency: Department of Health (Annual Report 2024)

2.2.4 Project to promote healthy behaviors for older persons to slow ageing and extend healthy lifespan Develop the Wellness Plan database system and implement the older persons' health promotion system at the local level.

Implementing agency: Department of Health (Annual Report 2024)

2.3 Health services through prevention and treatment

2.3.1 Influenza vaccination for older persons age 65 and above: 2,365,796 people (data from January–December 2024).

Implementing agency: Department of Disease Control

2.3.2 Assessment of Activities of Daily Living (ADL)

6,765,037 older persons nationwide were assessed for ADL abilities, representing 66.01% of the target (goal: 80%).

Implementing agency: Office of Older Persons Health (Annual Report 2024)

2.3.3 Screening for decline in 9 domains

Older persons nationwide were screened in the following 9 areas: vision, urinary continence, hearing, activities of daily living, cognition and memory, depression, mobility, oral health, and malnutrition. 8,467,276 people were screened (83% of the target, goal: 10,000,000 people).

Implementing agency: Office of Older Persons Health (Annual Report 2024)

2.3.4 Screening for older persons with dementia

Among older persons receiving services at older persons' clinics, 116,079 people were screened. Of these, 26,065 people were identified as at risk of developing dementia (via referral and walk-in), and 14,571 people received care and treatment at the older persons' clinics (data as of October 21, 2024).

Implementing agency: Department of Medical Services

2.3.5 Screening/Monitoring older persons at risk of falls

Among older persons receiving services at older persons' clinics, 116,079 people were screened. Of these, 43,466 people were identified as at risk of falls (via referral and walk-in), and 27,510 people received care and treatment at the older persons' clinics (data as of October 21, 2024).

Implementing agency: Department of Medical Services

2.3.6 Screening for depression and suicide risk in older persons in 2024

A total of 5,767,808 older persons were screened for depression and suicide risk. Among them:

- 25,462 people (0.44%) were at risk of depression
- 51,324 people (0.89%) were at risk of suicide

Among older persons with non-communicable diseases (NCDs), 3,343,310 people were screened for depression risk, with 0.5% found at risk. Among bedridden older persons, the highest prevalence of depression was 3.23%, followed by homebound older persons 2.42%, and socially isolated older persons 0.34% (data as of November 25, 2024).

Implementing agency: Department of Mental Health

2.3.7 Enhancing older persons' strength to prevent falls and sarcopenia

Members of older persons' clubs were assessed and participated in muscle-strengthening activities, as well as health literacy promotion on fall prevention, sarcopenia, and nutrition. A total of 29 clubs participated, with 904 older persons receiving services using older persons' fitness equipment.

Implementing agency: Department of Health (Annual Report 2024)

2.3.8 Healthy teeth for older persons: 80 Years, 20 teeth” project:

- (1) Oral health check-ups: 23.4% of older persons (target: 25%), covering 2,576,944 people.
- (2) Screening for oral lesions at risk of cancer and oral cancer: Target 40%; pre-older persons group: 47.47%, older persons group: 45.87%.
- (3) Preventive dental services provided: 895,583 older persons (target: 1,000,000).

Implementing agency: Department of Health (Annual Report 2024)

2.3.9 Older persons receiving care under the National Health Security entitlements:

- (1) Cataract surgeries: 468 people
- (2) Provision of dentures: 64,601 people
- (3) Knee osteoarthritis surgeries: 18,178 knees
- (4) Diabetes treatment: 1,836,389 people, totaling 8,982,735 visits
- (5) Hypertension treatment: 3,761,634 people, totaling 15,922,334 visits

(Data from January–December 2024)

Implementing agency: National Health Security Office

2.4 Care

2.4.1 Dependent older persons receiving care according to a care plan: 413,340 people, 95.74% of the target (goal: 96%).

Implementing agency: Department of Health (Annual Report 2024)

2.4.2 Dependent older persons accessing services and receiving home visits under benefit packages: 351,893 people, 82.70%.

Implementing agency: Department of Health (Annual Report 2024)

2.4.3 Older persons clinics and comprehensive older persons clinics:

Self-assessment results based on the FY 2024 quality evaluation criteria for older persons clinics show that hospitals at all levels have established comprehensive older persons clinics in all 902 facilities (100%), with 801 facilities (88.80%) meeting service quality standards (data as of September 1, 2024).

Implementing agency: Department of Medical Services

2.4.4 Hospitals and health service centers that passed the comprehensive older persons clinic assessment: 84 facilities, including 9 hospitals, 59 health service centers, and 16 “Warm Community Clinics.”

Implementing agency: Medical Services Bureau, Bangkok Metropolitan Administration

Measure 3**Enhancing the social well-being of older persons****3.1 Promoting the participation of older persons as a social force**

3.1.1 Community crafts training: 200 participants completed the training (data as of September 30, 2024).

Implementing agency: Department of Older Persons Affairs

3.1.2 Registration in the older persons' Wisdom Repository: Promoted outstanding older persons' wisdom repositories and registered older persons' wisdom repositories to share knowledge with the general public. Interesting local knowledge was compiled into promotional clips (one work per province). 34,802 older persons were registered in the wisdom repository. Implementing agency: Department of Older Persons Affairs

3.1.3 Participation in time banks: 961 members participated across 12 time banks (data as of September 30, 2024).

Implementing agency: Department of Older Persons Affairs

3.1.4 Training in disaster prevention and mitigation: 33 participants out of 399 people (8.27%) completed the training.

Implementing agency: Institute for Disaster Prevention and Mitigation Personnel Development

3.1.5 Registration for volunteer brain bank certification: Between January 1–December 31, 2024, 274 people registered (130 male, 144 female). The cumulative total to date is 5,922 people (3,622 male, 2,260 female) (data as of March 31, 2025).

Implementing agency: Office of the National Economic and Social Development Council

3.2 Sports, recreation, and tourism

3.2.1 6th National senior sports competition – Ratchaburi “Muang Ong Games” held from April 19–26, 2024, with 4,963 older athletes participating.

Implementing agency: Department of Physical Education, Ministry of Tourism and Sports

3.2.2 16th Thailand older persons sports and recreation competition – “Muang Kan Games” held in Kanchanaburi Province from June 18–21, 2024, with 5,299 older athletes and officials participating.

Implementing agency: Department of Physical Education, Ministry of Tourism and Sports

3.2.3 Older persons exempted from zoo entrance fees: 120,762 people, 3.35% of a total of 3,589,161 visitors (FY 2024).

Implementing agency: Zoological Park Organization of Thailand

3.2.4 Older persons exempted from fees or compensated for entering wildlife sanctuaries and no-hunting zones: 10,552 people (FY 2024).

Implementing agency: Department of National Parks, Wildlife and Plant Conservation

Measure 4 Enhancing the environmental quality of life for older persons

Promoting the management of the environment, facilities, and public services accessible to all ages, especially public transportation subsidies, including:

- (1) Electric trains (Blue, Purple, Yellow, Pink lines): 17,521,227 trips (January–July 2024)
- (2) Bangkok Mass Transit Authority buses for State Welfare Card users: 16,416,397 trips (January–December 2024)
- (3) Transport Company Limited (Bor Kor Sor) buses: 203,712 tickets (October 2023–July 2024)

Implementing agency: Ministry of Transport

3.3 Sub-Action Plan 3

Reforming and Integrating the Administrative System to Support a High-Quality Ageing Society



Measure 1	Increasing incentives and recognizing local administrative organizations with outstanding performance in older persons affairs
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Local administrative organizations with outstanding performance in 2024

The Department of Local Administration Promotion selected local administrative organizations with outstanding performance in 2024. A total of 292 organizations and 372 projects were selected, including 50 projects focused on developing and promoting the quality of life of older persons. More details can be accessed by scanning the QR code below.

Implementing agency: Department of Local Administration Promotion, Ministry of Interior



Measure 2	Developing a system to safeguard and protect the rights of older persons, especially for high-risk, vulnerable, and dependent groups, whether as service recipients, welfare beneficiaries, or consumers
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Supported the management of older persons' funerals according to tradition: 254,113 people, with a budget of 762,339,000 BAHT (data as of September 30, 2024).

Implementing agency: Department of Older Persons

Measure 3	Developing a system to protect and restore older persons and their families in crisis
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Provided assistance to older persons in difficult circumstances: 12,500 people, with a budget of 37,500,000 BAHT (data as of September 30, 2024).

Implementing agency: Department of Older Persons

3.4 Sub-Action Plan 4

Enhancing Research, Technology, and Innovation Capacity to Support an Ageing Society



Measure: Promote the production of research and innovations related to older persons to enhance their capacity and quality of life

Develop research, products, services, systems, or new processes related to older persons to enhance their capacity and quality of life, including:

1. Budget for supporting research and innovation The Office of the Science, Research and Innovation Promotion Committee (OSRIP) for FY 2024 allocated a budget to support research and innovation related to older persons and the ageing society, divided into two groups:

1.1 Strategic Fund (SF) support: 140 projects, totaling 236,531,000 baht

1.1.1 Flagship projects aligned with policy priorities: Developing older persons in rural and urban areas for self-reliance and capacity building – 55 projects, totaling 127,604,000 baht

1.1.2 Innovation development projects to prepare the working-age population in rural and urban areas for ageing – 23 projects, totaling 57,418,000 baht

1.1.3 Projects promoting quality of life, environment, and society to support intergenerational coexistence – 62 projects, totaling 51,509,000 baht

1.2 Fundamental Fund (FF): 282 projects, totaling 136,453,776 baht, divided into five areas: health and well-being, social, education and lifelong learning, economy, and housing and environment.

Further details can be accessed by scanning this QR Code.

Implementing agency: Office of the Science, Research and Innovation Promotion Commission



2. Budget to support research on older persons by the Thai Institute for Gerontology Research and Development Foundation, totaling 32,143,819.57 THB, with details as follows:

2.1 Project plan “Comprehensive Development of Quality of Life for Thai Older Persons by Local Administrative Organizations” totaling 22,184,404.57 THB

2.2 Project plan “Promoting and Developing Social Innovation and Public Policy for the Quality of Life of Thai Older Persons under a Complete Ageing Society” totaling 9,302,415 THB

2.3 Academic papers/policy proposals on older persons totaling 582,000 THB

Implementing agency: Thai Institute for Gerontology Research and Development Foundation

4 Outstanding Older Thais and Related Events of 2024



In 2024, older persons were honored across various fields – as National Older Persons, National Artists, National Agricultural Wisdom Awardees, Distinguished Figures in Thai Language and Regional Dialects, Narathip Phongpraphan Award recipients, as well as Healthy Older Persons. These recognitions reflect their valuable roles and exemplary contributions to society. In addition, there were programs and innovation awards aimed at promoting the quality of life and well-being of older persons, gaining recognition both nationally and internationally.

4.1

National Older Person for 2024



“ A person who wishes to succeed in life must possess gratitude, know how to repay kindness, know how to give, know how to sacrifice, and know how to forgive. ”

Mr. Dhanin Chiaravanont

Senior Chairman of
Charoen Pokphand Group

Biographical Details

Name	Mr. Dhanin Chiaravanont
Birthdate	April 19, 1939
Hometown	Bangkok
Partner	Married to Khunying Tewee Chiaravanont (deceased)
	Has 5 children

Education

- 1949: Primary Education, Sarasith Pittayalai School, Ban Pong District, Ratchaburi Province
- 1951: Secondary Education, Swatow School, China
- 1956: Higher Education, Hong Kong College
- Between 1986–2022: Received honorary degrees from universities both in Thailand and abroad

Major Achievements

Vision for Developing the Organization to Become a Global Enterprise

Mr. Dhanin Chearavanont, Senior Chairman of Charoen Pokphand Group (CP), has driven the transformation of the company from a family business into a global corporation. The Group operates in eight core sectors: agro-industrial and food business, marketing and distribution, telecommunications, e-commerce and digital, real estate, automotive and industrial, and pharmaceuticals and medical supplies. The operations are guided by the **“Three-Benefit Philosophy: to the nation, to the people, and to the company.”**

Human Development and Innovation

Mr. Dhanin places great importance on **“people”** as the heart of the organization. He provides opportunities for professionals to contribute to the company’s growth and emphasizes the use of technology and innovation to advance both **“food for the body”** and **“food for the mind.”**

Social and Educational Roles (2002–Present)

- Founded the Buddharaksa Foundation (2002) to support education for underprivileged children, such as at Thammasarinividhaya School (Ratchaburi) and Wat Sakaeo School (Ang Thong).
- Promoted agriculture alongside learning, for example, the School Egg-Laying Hen Project.
- Implemented the “CP for Sustainability” Project, which now encompasses as many as 959 sub-projects.

Social Assistance in Times of Crisis

- 2020–2021: Supported the COVID-19 response by building a mask factory to provide free masks, setting up field hospitals, and donating food, medical equipment, and Fah Talai Jone herbal medicine to the public.
- 2021: Provided food and drinking water to flood victims through the project “CPF Sends Food from the Heart to Fight Floods.”

Kudos

National and International Honors

- In 2023, received the Order of the Rising Sun, Gold and Silver Star from the Japanese government for his role in promoting Thai-Japanese economic relations.
- In 2023, awarded the Malcolm S. Forbes Lifetime Achievement Award by Forbes magazine as a successful businessman who has made significant contributions to society.

Organizational Achievements

- In 2015, supported the True Plookpanya Project to promote equal learning opportunities nationwide.
- In 2018, provided scholarships for students across the country, with a continuous plan for 40 years.
- In 2019, promoted the SEACOSYSTEM concept for sustainable Thai seas and the Sustainable Packaging policy to reduce plastic use across all business sectors.
- In 2021, collaborated with affiliated media to distribute Andrographis paniculata (Fah Talai Jone) medicine to the public through the volunteer network Sen Dai.

Principles in Life and Business

Mr. Dhanin upholds "gratitude" as the foundation for life and business management. He emphasizes virtues such as generosity, forgiveness, selflessness, and occasionally accepting disadvantage—qualities regarded as hallmarks of a great leader.

Royal Decoration

- 2005: Knight Grand Cordon (Special Class) of the Most Exalted Order of the white elephant
- 2003: Knight Grand Cordon (Special Class) of the Most Noble Order of the Crown of Thailand
- 1995: Knight Grand Cross (First Class) of the Most Admirable Order of the Direkgunabhorn
- 1996: Knight Grand Commander (Second Class, Higher Grade) of the Most Illustrious Order of Chula Chom Klao

Reflections of Mr. Dhanin Chearavanont on Thai older persons

The situation of Thai older persons at present

Thailand has fully entered an “aged society,” and is on the path to becoming a “super-aged society.” This means that the working-age population will gradually decline, while the number of older persons will increase. In this situation, we must recognize that older persons are not a burden on society but a valuable resource. They possess experience, maturity, and can provide emotional support to their families, especially younger generations.

However, society must not remain complacent about the growing population of older persons in Thailand, particularly regarding medical care, health management, and support for older persons to live meaningful, independent lives without isolation or neglect.

In my personal view, a quality diet is essential for maintaining health and enabling older persons to take care of themselves. I believe that “**food can be medicine, or a substitute for medicine.**” In other words, living a long and healthy life starts with what we eat every day. If we eat properly, food becomes the best medicine.

The Charoen Pokphand Group (CP) has built upon this principle, trying to help all Thai people to consume good-quality food at fair prices. CP also aspires to make Thailand a global center for healthy food by developing foods suitable for different generations and health conditions, while ensuring that the food is delicious and diverse.

The value of the older Thai population

Older persons are not just people who have accumulated many experiences; they should also be ready to share the knowledge and lessons they have gained throughout their lives with younger generations. We should not let the words “**old**” or “**elderly**” define or limit us, because I believe that, as long as we live, we must keep learning. Learning should never stop, as the world is changing very quickly. Those who continue to learn will never become outdated, and they will always remain valuable to society, regardless of age. Furthermore, older persons are the roots of the home and the heart of the family.

The role of the private sector in supporting and enhancing the potential of older persons

The private sector has a responsibility to support and utilize the value that older persons bring, benefiting both the seniors themselves and society as a whole. Charoen Pokphand Group (CP) has undertaken many initiatives, such as promoting employment for older persons in Lotus, Makro, and 7-Eleven stores. In addition, the CP-CPF Fund for older persons provides monthly financial support and visits to older persons to improve their quality of life in communities near factories. CP-RAM has also developed specialized foods for older persons, such as easy-to-chew and easily-digestible products. All of these efforts are not merely corporate social responsibility; they reflect a belief that such actions improve society, enhance the physical and mental quality of life, and strengthen older persons' interactions with their families and communities.

Lessons from experience

The quality of life for older persons depends on physical health, which comes from nutritious food, and mental health, which comes from attitude. For physical health, it is important to get enough sleep, exercise, and maintain a quality diet.

For mental health, one should not worry that ageing prevents you from doing things. In reality, it is the mind that determines our age. It is also essential to practice forgiveness and let go of grudges, which leads to happiness and peace of mind. Ultimately, happiness is the best medicine.

Personally, I follow the “8-8-8-8 principle”: eat 80% of your capacity, sleep 8 hours, walk 8,000 steps, and drink 8 glasses of water per day. I believe this is a practical guideline that most older Thais can adopt.



Another point I would like to emphasize is that older persons need to connect with members of the younger generations. The world changes rapidly, and younger people may have different perspectives. By listening to them and keeping an open mind, we not only understand them better but also understand the world more fully—and, in turn, the world will better understand us.

4.2 National Artists of 2023

Since the announcement of the National Artists for the year 2024 occurred after the publication of the 2024 Thai Older Persons Situation Report, this report presents information on the National Artists for the year 2023, which had not been included in the 2023 Thai Older Persons Situation Report for the same reason.

4.2.1 Visual arts category – 4 individuals

1.



Prof. Emeritus Kanya Charoensupkul

Age: 77

Subfield: Mixed Media

2.



Mrs. Wiphawadee Phattanapongphiboon

Age: 72

Subfield: Interior Architecture

3.



2nd Lieutenant Tawee Booranaket

Age: 72

Subfield: Fine Arts – Sculpture and Casting

4.



Mr. Sudsakorn Chaisem

Age: 68

Subfield: Fine Arts – Stage Props

4.2.2 Literature arts category – 2 recipients

1.



Mr. Prasatporn Phususilthorn

Age: 74

2.



Mr. Wasin Inthasara

Age: 90

4.2.3 Performing arts category – 6 recipients

1.



Mr. Sombat Kaewsujarit

Age 78

Subfield: Thai Classical Dance
Khone and Lakhorn

2.



Mr. Chaiya Thangmeesri

Age 73

Sub-field: Thai Music

3.



Mr. Pichet Iamchaona

or Na Yong Chernyim

Age 66

Subfield: Folk Performance - Phleng Choi

4.



CSM Preeyanun Sunthornjamorn

Age 88

Subfield: Thai Popular and Folk Music Songs

5.



Mr. Suthisak Phakdeethewa

or Khru Jo the Star

Age 65

Subfield: Contemporary Dance

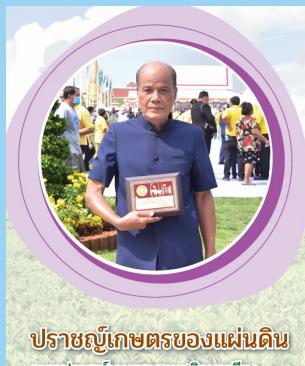
6.



Assoc. Prof. Banjong Kosunwat

Age 81

Sub-field: Cinema

4.3**The Agricultural Scholars of the Land (who are older persons) for 2024****1.**

ประยูร์เกษตรของแผ่นดิน
ลูกบุญธรรมเศรษฐกิจพอเพียง

Mr. Winij Thitphart
in the field of Sufficiency Economy
Scholar, Kalasin Province

2.

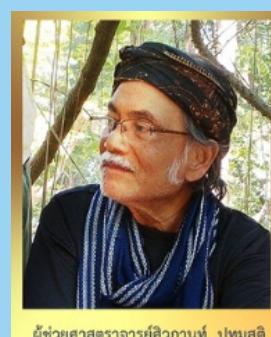
ประยูร์เกษตรของแผ่นดิน
ลูกบุญธรรมผู้นำชุมชนและเครือข่าย

Mr. Atsadang Siharaj
in the field of Agricultural
Scholar as Community and Network
Leader, Uttaradit Province

4.4**Venerable Person (older persons) for 2024****4.4.1 Venerable figures in the Thai language****1.**

ผู้ช่วยศาสตราจารย์พรพิพิธ พุกพาสุข

Asst. Prof. Pornthip Pukphasuk

2.

ผู้ช่วยศาสตราจารย์ศิวakan พัฒมสุต

Asst. Prof. Sivakan Pathummasut

4.4.2 Outstanding users of the Thai language

1.



นางเพ็ชร์ จารจุรุ่งเกียรติ

Mrs. Debi Jaratjarungkiat

2.



นายธีระพงษ์ โซดาศรี

Mr. Theerapong Sodasri

3.

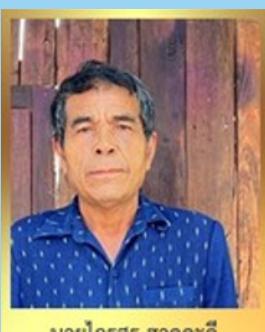


นายสุภพ คลี๊กจาย

Mr. Supap Kleekajai

4.4.3 Outstanding local Thai language users

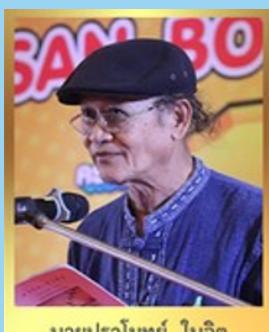
1.



นายไกรสร ชาดคະดี

Mr. Kraisorn Hadkadi

2.



นายปราโมทย์ ไนจิต

Mr. Pramot Naijit

3.



นายเอ็ด ติ๊บปะละ

Mr. Ed Tippala

4.5

Healthy Older Persons Contest, Red Cross Annual Event 2024

Healthy Older Persons Contest Project, Red Cross Annual Event 2024, aimed at promoting the overall quality of life for older persons—that is, enabling them to maintain holistic health—physically, mentally, and emotionally, while living well in society.

4.5.1 Category: no chronic illness (Outstanding award)

1. Age Group 65-74 years

Mrs. Pojanart Lueangprasert

2. Age Group 75-84 years

Mrs. Duangduan Wongpraparut

3. Age Group 85-90 years

Mrs. Rudee Jiwalak



4.5.2 Category: with chronic illness (Outstanding award)

1. Age Group 65-74 years

Mrs. Phakawadee Saksornchai

2. Age Group 75-84 years

Mrs. Pikul Harnhatthaya

3. Age Group 85-90 years

Dr. Sumonmarn Atthasat

4. Age Group Over 90 years

Prof. Emer. Dr. Teera Rammasut;
Mr. Wutchira Pokmontri

4.6 Recipients of the Narathip Phongraphan Award for the Year 2024

The Narathip Phongraphan Award was established in 2001 and is presented to writers, journalists, poets, translators, and senior editors who have continuously produced creative works and gained wide recognition.

In 2024, the Writers' Association of Thailand honored writers, journalists, poets, translators, and senior editors as recipients of the Narathip Phongraphan Award, with the following names and pen names:

1. Mr. Kitcha Buranon
2. Mr. Kittisak Suwannaphokin (Tulip)
3. Mr. Chakrabhand Posayakrit (Sasiwimon)
4. Professor Emeritus Charoen Wattanasin
5. Miss Shulita Areepipatkul (Taitoon, Yaima)
6. General Banchorn Chawalsin
7. Mr. Prasit Chaithongphan
8. Professor Prapasri Sihaampai
9. Mrs. Lalita Piyarat (Lalita, Phornuma)
10. Miss Wanphen Sentragul
11. Dr. Vichai Chokevivat
12. Professor Dr. Witthaya Nakwatchara
13. Mr. Samroeng Sampantarak
14. Professor Emeritus Dr. Sucharit Peanshob
15. Mrs. Sumitra Wisetsuwanaphoom
(Mitra, Vajirawarin, Naipuenhod)
16. Professor Emeritus Dr. Sriruen Kaewkangwal
17. Miss Sanlaya Sukaniwat (Sanlaya)
18. Miss Anukul Wongbuathong
19. Mrs. Arun Nonthakaew (Arunmanai)
20. Mr. Om Pranorm



4.7

Healthy Ageing Prize for Asian Innovation (HAPI)

The Healthy Ageing Prize for Asian Innovation (HAPI) is an international award presented to organizations in Asian countries with outstanding achievements in addressing ageing society issues. It covers the following areas:

- (1) Technology and new innovations
- (2) Community initiatives or intergenerational collaboration
- (3) Supporting older persons' self-reliance to improve health and quality of life.

Details can be found at Healthy Ageing Prize for Asian Innovation (HAPI)—Thai-Asia Health and Wellbeing Initiative.

The announcement of the Healthy Ageing Prize for Asian Innovation (HAPI) 2024, held for the 4th time, awarded organizations and innovative projects with outstanding achievements from across Asia. Thailand received awards for the following three projects:

4.7.1 The “Retirement is Good” project by the college of lifelong education, Chiang Mai university



Received the Grand Prize in the category of Supporting Older Persons' Self-Reliance. The award recognized the innovative learning program “Retirement is Good” or “MEDEE”, which focuses on developing digital and vocational skills for older persons through the LINE platform, combined with hands-on community activities. The project has built a network of more than 70 older persons' schools and partner organizations nationwide, offering over 30 courses covering online marketing, financial management, and holistic health care. More than 38,000 participants have already joined, generating income, reducing dependence on families, and concretely improving the quality of life for older persons. The project is funded by the National Research Council of Thailand and has achieved a Social Return on Investment (SROI) of 11.88 times, aligning with the United Nations Sustainable Development Goal 4 (SDG 4) on ensuring equal access to quality education and lifelong learning.

Source: <https://jcie.org/programs/healthy-aging/healthy-and-active-aging-in-asia/4th-hapi-award-ceremony>

4.7.2 The “Ready Senior” project by the Ageing Business and Care Development Centre (ABCD Centre), faculty of commerce and accountancy, Thammasat university



Received an Honorable Mention Award for developing a platform that integrates Lifelong Learning, a Marketplace, and Job Matching for people age 50 years or older. Guided by the concept “Want to Learn, Want to Earn, Want to Work”, the project prepares those entering old age to be self-reliant in both health and income. Funded by the National Research Council of Thailand in FY2021 under the project title “Turning Retirement into Power”, it offered 18 technology courses and 43 health courses, with over 5,200 participants. The project provides communication channels via Facebook, YouTube, Website, and LINE @Readysenior, all with active followers and users. It has also facilitated over 200 job placements and engaged more than 2,000 participants in online job and trade marketplaces. The project’s success stems from collaboration across multiple sectors—government, private, and expert networks—along with intergenerational cooperation, leading to expansion into a pilot area in the Talat Phlu District of Bangkok.

Source: <https://jcie.org/programs/healthy-aging/healthy-and-active-aging-in-asia/4th-hapi-award-ceremony>

4.7.3 The “YoungHappy Plus” project by YoungHappy Plus Co., Ltd.



Received an Honorable Mention Award in the category of Technology and Innovation for developing an online platform to enhance the quality of life of older persons in urban areas. The project addresses problems of loneliness and lack of social participation caused by changing family structures and urban expansion. The initiative includes:

- “Happy Space”, an activity area in shopping centers
- “YoungHappy Plus”, an online platform offering daily activities such as exercise, digital skills training, and health seminars
- “Happy Space Plus”, which integrates both online and offline activities, supported by technology that appropriately tracks user behaviors and needs

Currently, the project has more than 30,000 members, with 80% of users reporting reduced feelings of loneliness and increased social interaction. This demonstrates how technology can be effectively and sustainably applied to promote the well-being of older persons in urban settings.

Source: <https://jcie.org/programs/healthy-aging/healthy-and-active-aging-in-asia/4th-hapi-award-ceremony>

4.8**Safe and Creative Media Award for Older Persons**

The Creative Media Development Fund organized the Creative Media and TMF Awards 2025, presenting honorary awards to producers of safe and creative media under the concept “Spread the Wings of Creativity toward Media Innovation.” The event honored individuals and organizations that produce safe and creative media, with a total of 32 award-winning works across ten categories.

The online drama series “Jaemjai Soongwai Wow Wow” by Ms. Porjai Poonnart won the First Prize. This media project created an educational drama series for older persons consisting of 18 episodes, adapted from the knowledge book series “Toward Active Ageing” used in older persons’ schools. Its purpose is to promote the concept of active ageing.

The content covers three sets of essential knowledge—“Must Know, Should Know, Want to Know”—as well as key laws for older persons. The series emphasizes easy-to-understand knowledge, highlights intergenerational gaps, and inspires older persons to actively develop themselves in cooperation with family and society.

Source: <https://www.thairath.co.th/news/local/2846531>

**4.9****National Innovation Award**

The National Innovation Office (Public Organization) presented the 2024 National Innovation Award – Honorary Recognition to “Dinsaw Mini”, a companion robot for older persons, produced by CT Asia Robotics Co., Ltd. The Dinsaw robot is an innovation developed to meet the daily needs of older persons. Its key functions include:

- Alerts when an older person is suspected of falling from the bed or leaving the room
- Medication reminders
- Promotion of light exercise
- Acting as a conversational companion to alleviate loneliness

The robot can be customized for each individual, offering both voice communication and an easy-to-use application interface. It is equipped with sensors to monitor and alert users to abnormalities.

Using the Dinsaw robot to care for older persons helps reduce the burden on families and caregivers while enhancing older persons’ confidence, allowing them to live more conveniently, safely, and with improved quality of life.



Source: <https://award.nia.or.th/th/content/category/detail/id/70/iid/815>

4.10

Older Persons Health Technology Innovation Building



The Department of Medical Services, Ministry of Public Health, through the Somdet Phra Sangharaja Yanasangwon Institute of Geriatric Medicine, has established the Older Persons Health Technology Innovation Building. The building aims to develop proactive health service models and enhance the capacity of older persons to live with quality and independence (Active Ageing), starting from the pre-elderly stage (age 50 years or older).

Services begin with screening older persons' health across nine dimensions. If any risks are identified, further assessments are conducted by geriatric physicians or relevant specialists to provide appropriate diagnosis and care. In addition, the Institute offers holistic health promotion and rehabilitation services for older persons, including:

1. Smart Medical Wellness Gym – medical exercise program
2. Day Service – daytime care for older persons
3. Hydrotherapy
4. Physical therapy and occupational therapy activities

Source: Department of Medical Services (March 15, 2024)

https://www.dms.go.th/Content/Select_Landding_page?contentId=46974

5 Innovations for Thai Older Persons



Thailand has entered a 'complete aged society' resulting in a continuous rise in the health and quality-of-life needs of older persons. The concept of "Ageing in Place" has therefore become significant, as it focuses on enabling older persons to live securely, safely, and healthily in their own homes or communities.

Innovation development is a key mechanism in supporting the lives of older persons, including health promotion and rehabilitation. In addition, access to essential services and the application of artificial intelligence (AI) play important roles in enhancing eldercare systems. These include proactive health monitoring, emergency prevention, physical and mental rehabilitation, personalized health data analysis, and systematic linkage of health services between homes, communities, and service units. Such efforts aim to strengthen the quality of life and independence of older persons in a sustainable way, in line with the concept of ‘ageing in place’ as outlined in this report.

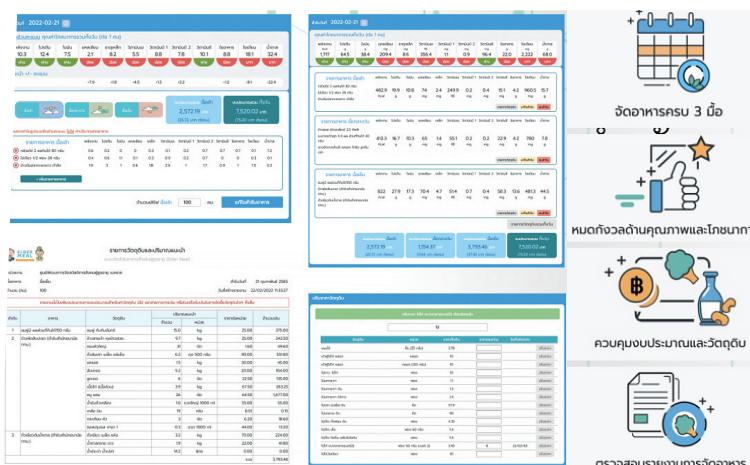
The National Science and Technology Development Agency (NSTDA), the National Innovation Agency (NIA), the Health Systems Research Institute (HSRI), and Thammasat University are agencies driving innovation development to support the ageing society in 2024. Innovations are categorized into six areas according to the framework for public sector innovation development of the Office of the Public Sector Development Commission (OPDC), as follows:

- 5.1 Service Innovation
- 5.2 Service Delivery Innovation
- 5.3 Administrative or Organizational Innovation
- 5.4 Conceptual Innovation
- 5.5 Policy Innovation
- 5.6 Systemic Innovation

5.1 Service Innovation

5.1.1 Food and nutrition management system for older persons (ELDER MEAL)

By the National Science and Technology Development Agency



An extension of the Thai School Lunch system, designed for use in socialwelfare development centers for older persons, this system can analyze the nutritional value of meals provided to older persons based on the recommended daily nutrient intake. It helps ensure that meal planning is appropriate and aligned with the needs of older persons in each age group.

5.1.2 Buddy home care: management system for monitoring and caring for older persons' health

By the National Innovation Agency



This is a prototype management system for older persons requiring continuous care, and the system can efficiently record individual health data of older persons.

Source: <https://catalog.nia.or.th/th/product/details/64?page=6&&a=2&&pti=&&fts=>

5.1.3 Auspicious Thai dessert set game for seniors aged 60+

By the National Science and Technology Development Agency



This is an educational tool specifically designed for older persons to enhance cognitive skills, memory, and brain functions across multiple dimensions. Players practice movement, fine and gross motor skills, calculation, logic, problem-solving, sensory perception, and communication, while also promoting emotional and mental well-being.

5.1.4 Para dough: natural clay for rehabilitation

By the New Rubber Product Research Team, Rubber Processing Innovation Research Group, National Metal and Materials Technology Center.



This innovation is used to strengthen hand muscles in older persons and children, made from natural rubber and other natural materials. It is easy to mold, holds its shape well, does not harden when left out, is safe for users, and can be cleaned with alcohol.

5.1.5 Squeezing rubber for rehabilitation

By National Metal and Materials Technology Center



The product is used to strengthen hand muscles in older persons, with adjustable firmness levels as needed. Made from natural rubber and other natural materials, processed with peroxide, it is safe for users and environmentally friendly.

5.1.6 Pressure-relief cushion

By National Metal and Materials Technology Center



This is a yellow gel that distributes pressure effectively, helping to reduce pain and discomfort in the coccyx and lower back from prolonged sitting. It has thermal insulation properties, providing a cool and comfortable seating experience. Manufactured using an electron vulcanization process that is environmentally friendly, it is strong, durable, safe, and free from chemical residues.

5.1.7 Exercise balance pad

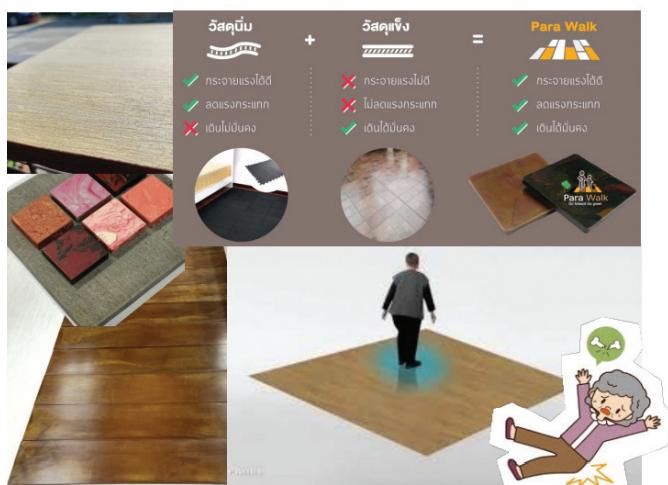
By National Metal and Materials Technology Center



This is used to strengthen muscles in older persons, with a non-slip surface to help prevent falls. Made from natural rubber and other natural materials, processed with electrons, it is safe for users and is environmentally friendly.

5.1.8 Impact absorption floor

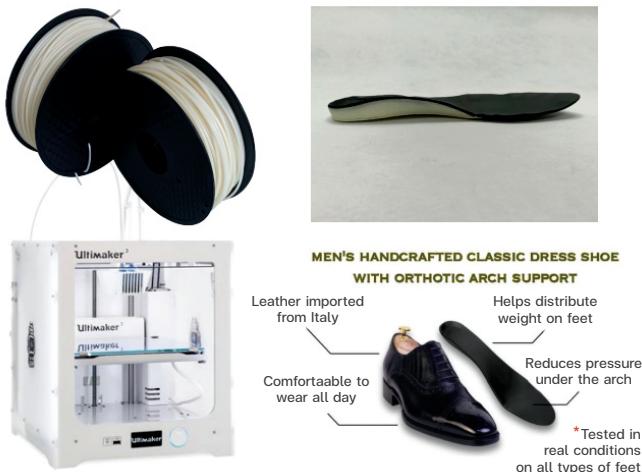
By National Metal and Materials Technology Center



This product is made from natural rubber, reclaimed rubber, and agricultural waste materials, with over 65% of its composition from natural and recycled materials. Environmentally friendly, it can be produced using traditional rubber processes. It is strong, resistant to cracking, suitable for woodworking tools, and can be colored, patterned, or polished. It absorbs little moisture, is not a food source for insects, and has low volatile emissions. It can be installed over existing floors, aids in balance, and absorbs over 70% of impact, effectively reducing the severity of falls.

5.1.9 Custom insole molding system using 3d printing technology

By National Metal and Materials Technology Center



This product was developed from a filament suitable for molding into custom insoles, compatible with various types of footwear such as dress shoes and sandals. Designed to fit the individual foot anatomy, it can be precisely and reproducibly fabricated using FDM 3D printing technology.

5.1.10 Balance monitoring and early warning device

By Thammasat University

This is an early warning device for loss of balance in older persons or individuals at risk of falling. The device measures balance ability, including the range a person can lean and return to a stable position without falling, providing personalized assessment. The system then determines risky angles and sets alerts. If a movement poses a risk of falling, the device issues a warning through vibration and/or sound.

Source: <https://www.facebook.com/thammasat.uni/photos/a.489921317724070/3985092638206903/?type=3>

5.2 Service Delivery Innovation

5.2.1 Therapy Dog Thailand: breaking down emotional barriers with therapy dogs

By the National Innovation Agency



Online Information and Training System for Therapy Dogs (E-Learning Platform) is a web application that enhances the main website to better support online training, including the development of courses and content for training therapy dogs online in two languages (bilingual).

Source: <https://catalog.nia.or.th/th/product/details/207?page=1&&a=5&&pti=&&fts=>

5.2.2 "AREE" remote-controlled cart

By National Metal and Materials Technology Center



This is a remote-controlled mobility device that supports a maximum weight of 5 kilograms without speed reduction, moving at up to 2 kilometers per hour. It can rotate in place (turning radius 0 cm) and travel approximately 3 kilometers per charge. The structure is strong, durable, easy to use, and stable. It can be cleaned with cleaning solutions, as the drive mechanism is enclosed within a waterproof compartment under the vehicle. It is affordably priced compared to similar products on the market.

5.2.3 Sookjai: smart lanyard

By the National Innovation Agency



The innovation is a lanyard for older persons or patients that alerts in the event of a fall, using artificial intelligence (AI) technology to detect and notify falls. When an accident or fall occurs, the device automatically sends an alert to a central system, which then notifies hospitals, caregivers, and family members. Additionally, the wearer can manually press a button to request emergency assistance.

Source: <https://catalog.nia.or.th/th/product/details/8?page=8&&a=3&&pti=&&fts=>

5.2.4 Gunther imu + janine application: posture monitoring and coaching system

By National Metal and Materials Technology Center



This is a wearable device using artificial intelligence (AI) technology to monitor, predict, and alert risks from improper movements and falls. The system sends alerts to caregivers. It is lightweight, easy to use, can be worn all day, and is designed to fit the Thai body structure.

5.2.5 KHING: job search application for retirees

By the National Innovation Agency



“Ginger Dee” is a web application that compiles employment information and online product stores for older persons in the Sakon Nakorn Municipality. It helps connect the needs of older persons with potential employers.

Source: <https://catalog.nia.or.th/th/product/details/167?page=18&&a=0&&pti=&&fts=>

5.3

Administrative or Organizational Innovation

5.3.1 Care camera innovation for monitoring patients and older persons at home

By the Department of Health Service Support (DHSS), Ministry of Public Health (MOPH)



This is a home-based monitoring system for older persons and patients that tracks vital signs by installing sensors to measure electrocardiogram (ECG), oxygen saturation, and body temperature. It connects via the Internet and sends emergency alerts through SMS and a web application on smartphones or computers, with privacy protection measures in place.



The CareCamera innovation has been filed for a petty patent, application number 2203000707, dated March 22, 2022, and is currently being evaluated for use among elder-care service providers. The developer welcomes feedback to further develop additional modules. Interested service providers or individuals can contact the Medical Engineering Division, Department of Health Service Support, at phone number 0 2149 5680 or via email at saraban_med@hss.mail.go.th

Source: Communications and Public Relations Office, DHSS (October 16, 2024) <https://shorturl.asia/wcqS0>
<https://shorturl.asia/wcqS0>

5.3.2 VR Care giver training: virtual training system for caring for bedridden older persons

By the National Innovation Agency



This is a simulation system for caring for bedridden older persons using real 3D animation, covering tasks such as moving, assisting with toileting, repositioning, and feeding. Training is conducted with VR goggles, and the system provides scoring and skill development guidance, helping trainees learn and perform care tasks correctly and effectively.

Source: <https://catalog.nia.or.th/th/product/details/211?page=16&&a=5&&pti=&&fts=>

5.3.3 Never pressure injury (NPI): pressure injury prevention system

By the National Innovation Agency

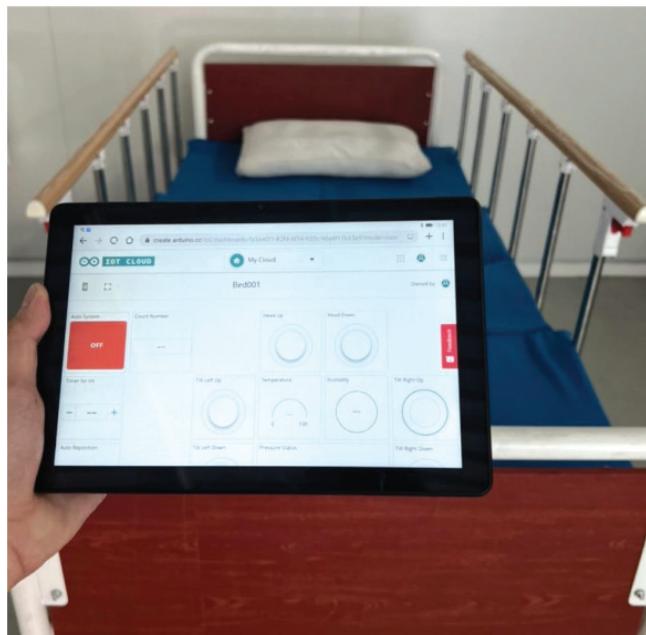


This is an automatic air mattress system designed to reduce the risk of pressure ulcers. It integrates pressure sensors and bed-movement alerts. If a patient remains in the same position for an extended period and is at risk of developing pressure sores, the device wirelessly sends data to the caregiver's mobile phone and signals the air valve management system. This causes the multi-chamber electric air mattress to adjust pressure distribution on the patient's body, effectively reducing pressure points.

Source: <https://catalog.nia.or.th/th/product/details/212?page=16&&a=4&&pti=&&fts=>

5.3.4 Automatic repositioning bed for pressure ulcer prevention

By Thammasat University



This innovation was developed for caring for older persons and bedridden patients, it can prevent and manage pressure ulcers as well as skin inflammation caused by contact with urine and feces. The bed features mechanisms for left-right tilting, head elevation, and knee bending, and is equipped with sensors to monitor pressure, temperature, and skin moisture. Controlled via a smartphone or tablet, this special bed helps reduce caregiver burden and prevents complications from prolonged bed rest.

Source: <https://tu.ac.th/thammasat-170866-automatic-turning-patient-bed>

5.3.5 Aquagym: underwater treadmill for physical therapy for patients and older persons

By the National Innovation Agency



This innovation helps rehabilitate patients with muscle weakness, hip degeneration, knee degeneration, as well as older persons in general. The treadmill's incline and speed can be adjusted to accommodate individual body structure and balance.

Source: <https://catalog.nia.or.th/th/product/details/112?page=12&&a=8&&pti=&&fts=>

5.3.6 Power cube: aquatic treadmill for physical therapy for patients and older persons

By the National Innovation Agency



Source: <https://catalog.nia.or.th/th/product/details/213?>
page=16&&a=3&&pti=&&fts=

This innovation is a rehabilitation device for patients with muscle weakness, hip or knee degeneration, and post-surgery recovery. It uses water to support body weight and reduce impact on joints and muscles, making it suitable for exercise for older persons. Currently, it must be imported, making it expensive and insufficient to meet demand. Domestic production and cost reduction should be promoted to make it widely available in community hospitals, ensuring equitable access to rehabilitation services for all population groups.

5.3.7 Arm booster: arm rehabilitation device for stroke patients

By Thammasat University



The device trains both arms using a symmetrical reflex mechanism to rehabilitate stroke patients. Trials have shown clear patient improvement. It also reduces the workload of physical therapists and can be used with older persons and individuals with mobility impairments.

Currently, the Arm Booster is in use at three healthcare facilities in Thailand: 1. Bueng Yitho Medical and Rehabilitation Center, Bueng Yitho Subdistrict Municipality, Bueng Yitho Subdistrict, Thanyaburi District, Pathum Thani Province 2. Nong Sida Subdistrict Health Promotion Hospital, Nong Saeng District, Saraburi Province 3. Senior Citizens Empowerment Center, Saen Suk Municipality, Saen Suk Subdistrict, Muang District, Chonburi Province

Source: <https://tu.ac.th/thammasat-281067-arm-booster#:~:text>

5.3.8 Kathy: mobile salon

By National Metal and Materials Technology Center



This innovation helps reduce caregiver workload. It is compact in size, easy to move, and height-adjustable to match the bed or caregiver. Equipped with a headrest and neck pillow, the frame is made of aluminum and stainless steel strong and rust-resistant. It uses a high-pressure automatic water pump with a showerhead and nozzle. It is powered by a rechargeable 12-volt battery with safety features during charging and the option to connect directly via an adapter. It includes water level alerts and overflow protection, and can be used with manual water filling or connected to a water supply for multiple applications.

5.3.9 Gunther belt: wearable fall detector

By National Metal and Materials Technology Center



This innovation can detect falls immediately and transmit signals via NB-IoT (Narrow Band Internet of Things) directly to a server without requiring a gateway device. It has a battery that lasts at least 3 hours and features a display screen for caregivers to monitor user falls.

5.4 Conceptual Innovation

World-class medical engineering research program

By Thammasat University

This innovation simulates the process of removing necrotic tissue using electromagnetic wave techniques to enhance the effectiveness of actual treatment, and includes the design of medical treatment devices. This innovation represents cutting-edge, world-class research in medical engineering.

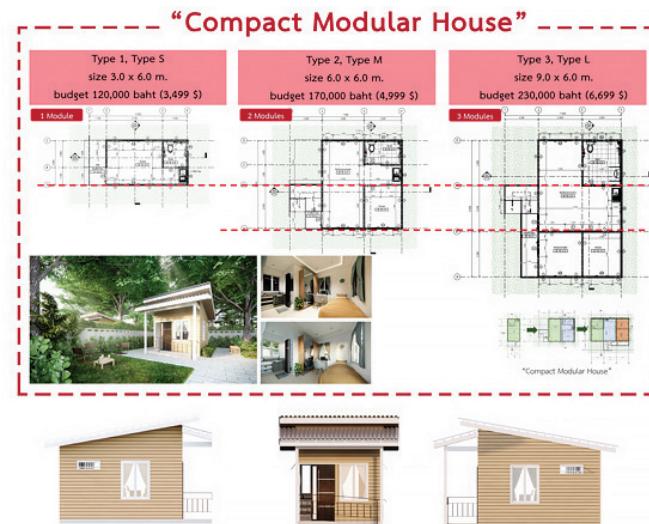
Source: <https://tu.ac.th/thammasat-300967-thammasat-innovation-for-the-people>

5.5 Policy Innovation

Baan yoo dee: UD HOUSE for older persons with disabilities

By Thammasat University

This innovation was developed as an extension of a project to renovate deteriorating homes for low-income older Thais, supported by the National Research Council of Thailand (NRCT). There are three house sizes: small, medium, and large, with prices ranging from 120,000 to 230,000 baht. Installation is completed within one day and includes accessibility features such as ramps, handrails, and wheelchair turning spaces.



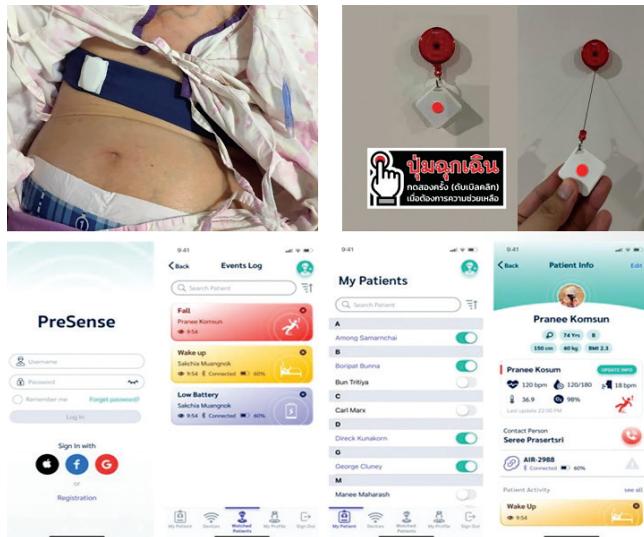
The houses are designed to be expandable onto existing homes and use a variety of materials. Knowledge is transferred to local craftsmen. Currently, more than 30 local administrative organizations have adopted the design, and the Ministry of Social Development and Human Security has applied it in home repair and support programs for vulnerable groups. The project is now being scaled up at the policy level to support quality ageing in place.

Source: <https://www.thanettakij.com/health/wellbeing/608778>

5.6 Systemic Innovation

5.6.1 Preventative sensing system (presence)

By the National Science and Technology Development Agency



This innovation is a Software as a Service (SaaS) platform that records and provides real-time alerts based on sensor data to monitor, detect, prevent, or address common health issues in older persons, such as pressure ulcers, falls, dementia, insomnia, and restricted-area access. Alerts are generated according to the Alert Settings profile configured for each individual older person.

5.6.2 A-MED CARE: digital platform for health

By the National Science and Technology Development Agency

This is a medical service platform developed to support the operations of the National Health Security Office (NHSO) under the “30 Baht Universal Coverage” project, enabling Thai citizens with Gold Card entitlement to access healthcare services widely and efficiently. It consists of five main platforms 1) MED Care Pharma – Provides free medications from quality pharmacies for 32 minor illness symptom groups. 2) MED Care for Nurse Clinics – Community nurse clinics offering health promotion and treatment for ten common disease groups. 3) MED Care for Medicine Clinic – Community medical clinics providing free treatment for common diseases. 4) MED Care for Thai Traditional Medical Clinics – Thai traditional medicine clinics offering treatment and rehabilitation using traditional Thai medical practices. 5) MED Care Home Ward – Provides continuous home care for patients, covering physical illnesses, mental health conditions, and substance abuse therapy.



Source: https://nstda.or.th/home/news_post/st-implementation-a-med-care/

5.6.3 Aichest4all

By Thammasat University

This innovation is an automated chest X-ray image analysis system capable of detecting and identifying a wide range of abnormalities, such as tuberculosis, lung cancer, heart defects, and other internal and external chest conditions. It is highly accurate and is used in over 200 hospitals under the MOPH, enhancing diagnostic efficiency and supporting national healthcare services.

Source: <https://www.facebook.com/turesearchpage/posts/pfbid034DS91rJjkX6DMYGe7Nc4Pe4vtwrizo6SKFrnDUiP8Pd1zYhKbCX1eKCNPYEzhifEl>

5.6.4 FITKAN : exercise measurement device

By the National Science and Technology Development Agency in collaboration with King Chulalongkorn Memorial Hospital, Thai Red Cross Society, and the Faculty of Sports Science, Chulalongkorn University



This innovation is a wearable exercise measurement device that uses sensors and wireless processing, incorporating AI to record and provide a preliminary evaluation of an older person's physical activity. It delivers appropriate and diverse information, tracks progress over time, and allows effective use of data for health management. The system includes role-based access control for administrators, staff, health managers, nurses, and the older persons themselves.

6

Research on Thai Older Persons



The selection of research and academic documents presented in this report was based on four criteria:

- 1. Relevance or the ability to expand understanding of the content in this report's chapters.**
- 2. Research scope covering a large population, capable of representing other studies and reflecting overall trends on various issues.**
- 3. Research that has driven initiatives to support national-level policy recommendations.**
- 4. Research results that have been reviewed or certified for quality by reputable institutions.**

The 15 selected studies focus on Thai older persons, completed and published in 2024, and are categorized into three areas as follows:



6.1 Medical/Health Sciences

It comprises five studies.

6.1.1 “Models of Care for Older Persons to Manage and Prevent Dementia”

*By Assoc. Prof. Dr. Waralak Srinonprasert and Dr. Pattara Leelahawarong, Pharm.D.
Siriraj Health Policy Unit, Faculty of Medicine Siriraj Hospital*

This study aimed to examine policies for the care and prevention of dementia. It employed qualitative research by reviewing the Global Action Plan on the Public Health Response to Dementia along with action plans from member countries of the Organisation for Economic Co-operation and Development (OECD), using these frameworks to analyze both domestic and international data. The findings revealed that screening, diagnosis, and treatment of dementia patients are mostly carried out in hospitals, with multidisciplinary collaboration led by physicians and supported by care managers who coordinate across service units. All countries have national-level policies or plans for dementia care and caregiver support, including evaluations of the success of each country's long-term care policies and dementia care services, which vary depending on the health coverage systems in place. Key policy recommendations emphasize that care for older persons with dementia should focus on:

- Integrating policies across government agencies
- Long-term planning
- Developing accessible health service systems
- Supporting telemedicine services and continuous training of healthcare personnel
- Strengthening data linkage and inter-agency collaboration
- Promoting the role of communities in delivering long-term care, health rehabilitation, and caregiver support

6.1.2 “Comparison of Social and Medical Factors between Older Persons with Low Physical Activity and Those with High Physical Activity”

by Prof. Dr. Prasert Assantachai et al.

Department of Preventive and Social Medicine, Faculty of Medicine Siriraj Hospital, Mahidol University

This study aimed to examine the relationship between physical activity and social and medical factors among older persons, to support approaches for promoting health and preventing frailty in the future. Data were collected from 437 older persons living in urban areas of Lampang Province and rural areas of Chumphon Province, using the World Health Organization’s Global Physical Activity Questionnaire (GPAQ) to measure activity levels. The findings showed that older persons with low levels of physical activity often shared certain social factors, including: primary school education or lower, living with a spouse, poor economic status, and self-rated health as “poor.” In terms of health factors, those with lower activity levels were more likely to have hypertension, multiple comorbidities, higher levels of depression, reduced handgrip strength (among male older persons), and frailty according to the Frailty Phenotype Criteria. Notably, frailty was present in 100% of the low-activity group, compared to only 53.3% in the high-activity group. The study concludes that these social and health factors can be used as screening tools to identify older persons at risk of low activity, enabling early planning to promote physical activity, detect frailty, and prevent long-term disability effectively.



6.1.3 “Systematic Review and Meta-Analysis Examining the Effects of Multidisciplinary Care Models on Outcomes of Hip Fracture Patients”

by Dr. Weeraphat Fujaroenpaiboon et al.

Department of Geriatric Medicine, General Internal Medicine Unit, Faculty of Medicine
Siriraj Hospital, Mahidol University

This study aimed to evaluate the effectiveness of a multidisciplinary care model, involving collaboration between geriatricians and orthopedic surgeons, on clinical outcomes of older persons with hip fractures. A systematic review of 63 studies and meta-analysis were conducted, focusing on primary outcomes including mortality rate, activities of daily living (ADL), and various complications. The analysis used a random-effects model and was registered in the PROSPERO database (CRD42023431968). Findings revealed that the multidisciplinary care model significantly reduced in-hospital mortality within one month, particularly when care was provided in geriatric wards. Additionally, patients who received this model of care demonstrated improved ADL scores at one month and a reduced incidence of pulmonary complications.



6.1.4 “Transferring Laser Therapies for Oral Health Care of Older People: A Multicenter Study”

by Dr. Suwat Tanya, M.D., et al.

Faculty of Dentistry, Khon Kaen University

This study aimed to transfer appropriate laser therapy techniques for oral healthcare of older persons in rural areas of Thailand. Twenty participants were involved, with clinical effectiveness assessed alongside patient satisfaction and technology acceptance among healthcare personnel. The study was a participatory action research project applying the “routine work to research” concept, conducted at four healthcare facilities—both primary and secondary levels—in Khon Kaen, Lamphun, Maha Sarakham, and Phang Nga Provinces. Knowledge and laser techniques were delivered via an online platform, treatment outcomes were recorded through Google Forms, and results were analyzed using an n-of-1 design. The findings showed that all centers agreed the laser techniques—for promoting blood clotting, relieving pain, and enhancing wound healing—were appropriate for caring for older persons. Eighty percent of participants fully recovered, and no clinical complications were reported during follow-up. Moreover, clinical outcomes in each area were consistent with those observed at the university dental hospital, indicating that the transferred laser technology has the potential to be developed into a sustainable and effective approach for promoting oral health among older persons in the future.



6.1.5 “Facilitators of Regular Home Blood Pressure Monitoring: Perspectives from Older Thai Patients with Hypertension”

by Asst. Prof. Dr. Thanyaporn Wongnete et al.

Center of Excellence in Geriatric Medicine, King Chulalongkorn Memorial Hospital,
Thai Red Cross Society

This study explored the perspectives of Thai older persons with hypertension regarding factors that facilitate home blood pressure monitoring (HBPM), to support the continuous use of this approach for health management. A qualitative research method was employed, using semi-structured in-depth interviews with ten participants age 60 years or older who regularly measured their blood pressure at home. Participants were recruited from the holistic older persons clinic at King Chulalongkorn Memorial Hospital. Content analysis was applied to the data. The study identified three key facilitating factors:

- Awareness of the disease and fear of complications, which encouraged older persons to take better care of their own health and reduce the burden on their families.
- Effective self-management of health, including diet control, exercise, and medication adjustments, which reduced the frequency of doctor visits and alleviated anxiety.
- Support from physicians and healthcare personnel, particularly advice and attention to the data recorded by patients, which motivated consistent practice.

The research highlights the importance of promoting education and collaboration between healthcare personnel and older persons to sustain self-care through the use of HBPM.



6.2 Social Science

It comprises seven studies.

6.2.1 “Development of Technological Literacy for Income Security, Health, and Social Life among Older Persons Based on the New Way of Life”

by Assoc. Prof. Dr. Panom Khichaya and Dr. Pongphan Keeratiwasin

Funded by the Thai Institute for Gerontology Research and Development Foundation and the National Research Council of Thailand.

This research received the National Research Award: Good Research Performance, Fiscal Year 2024.

This study aimed to explore and describe the technology skills, knowledge, and daily life management capabilities of older persons and Generation X individuals approaching old age, including both the general and vulnerable populations, within the context of a new way of life. Using a mixed-methods research approach, the study found that nearly half of the older persons sampled were still adapting to technology and used it to acquire knowledge across various dimensions, including disease prevention, leisure activities, and appointment management. The research proposed four key strategies to enhance digital technology use among older persons: 1) securing income stability 2) promoting a high quality of daily life 3) supporting health care and 4) facilitating adaptation and interaction among peers and across generations. The study recommended that the government play a central role in integrating an ecosystem of care and support for older persons from all sectors to sustainably improve their quality of life.



6.2.2 “Development of Mechanisms and Local Collaboration to Enhance the Holistic Quality of Life for Older Adults: A Case Study of Bungwai and Huadon Subdistrict Administrative Organizations, Ubon Ratchathani Province”

By Asst. Prof. Dr. Arunee Santhitiwanich et al.

Funded by the National Research Council of Thailand

This research compiled tools from the studies of the Thai Institute for Gerontology Research and Development Foundation, and used them as a basis to develop local mechanisms and collaborations aimed at enhancing the holistic quality of life for older persons. The study emphasized building and integrating cooperation through joint operations, situation analysis, problem-solving, decision-making and evaluation. The findings indicate that the vitality assessment tools for older persons can reflect the overall situation in the area. However, additional in-depth data collection is needed to design activities that truly address the problems and needs of the target group. The project team possessed knowledge, skills, and an understanding of the local context, resulting in structural changes in physical infrastructure, public services, and community support networks. Seven key factors contributed to the success of the local administrative organizations: 1) access to in-depth data 2) use of participatory action research processes 3) existing local resources 4) effective communication 5) flexible management and budgeting 6) support from leadership and 7) policy guidance from the Department of Local Administration.



6.2.3 “Development of Local Administrative Service Models through the Application of Tools and Innovations to Enhance the Quality of Life of Older Persons in Rayong and Singburi Provinces”

by Asst. Prof. Dr. Nattapat Sarobol and Asst. Prof. Ronnarong Chandai

Funded by the Thai Institute for Gerontology Research and Development Foundation Thailand and the National Research Council

This research aimed to study and analyze the vitality of older persons in the community setting to design appropriate services, using health assessment tools for older persons and establishing care guidelines aligned with their needs. Conducted as action research in two areas—Thap Ma Subdistrict Municipality, Rayong Province, and Thangam Subdistrict, Singburi Province—the study found that older persons faced similar challenges. Consequently, a pilot approach was developed for dementia screening and promoting ageing in place by establishing a “Service and Rehabilitation Center for Older Persons” over four months. The results showed improvements in four aspects of quality of life: (1) living conditions, with better physical and mental health and family satisfaction with community services; (2) happiness, receiving love and support from family, which alleviated stress; (3) social engagement, with opportunities to participate in activities and receive care from networks; and (4) environment, living in safe and suitable surroundings. The project emphasized the need for policies supporting community participation in providing care, rehabilitation, and health promotion for older persons. It also recommended incorporating daytime older-person care centers into local administrative development plans to secure continuous funding and enhance the capacity of personnel across sectors, fostering the knowledge and skills necessary for effective and sustainable older-person services.



6.2.4 “Development of a prototype for health promotion and disease prevention using innovative software to analyze health status and work performance, aimed at enhancing the work capacity of older persons at the local level.”

by Ms. Somying Saithanu

Funded by the Thai Health Promotion Foundation

This research developed innovative software for analyzing health conditions linked to the work of older persons, promoting diverse and safe occupational capabilities. It focused on four key areas: (1) developing a prototype health promotion and disease prevention system to support older persons' work (2) creating software to identify opportunities for suitable occupations (3) strengthening local administrative organizations and networks in using the system and (4) synthesizing knowledge to produce policy recommendations and expand implementation in potential areas. The research produced a prototype web application capable of accurately analyzing and presenting health data related to older persons' work capacity. Local administrative organizations, in collaboration with subdistrict health promotion hospitals, used it to design occupational skills development plans for the 2024–2025 fiscal years, emphasizing health promotion alongside workforce capacity building. Key policy recommendations include establishing a coordinating unit or intermediary to facilitate multi-sector collaboration, designing indicators to support resource allocation and knowledge management, and improving administrative systems to reduce complexity and create efficient, sustainable mechanisms for joint operation.



6.2.5 “Development of practices and values of older persons in Thai society through value-enhancing activities”

by Assoc. Prof. Dr. Wannalak Meankerd et al.

Supported by the Thai Health Promotion Foundation

This research studied patterns of value-enhancing activities suitable for older persons in different areas, analyze older persons' perceptions of these activities, and develop policy recommendations for sustainably promoting values among older persons. Action research was conducted in three pilot provinces: Bangkok, Nakhon Si Thammarat, and Khon Kaen, with a total of 551 participants and 45 key informants. Data were collected using both quantitative and qualitative methods through workshops and focus group interviews. The results indicate that activities designed with local contextual relevance effectively promoted values appropriate for older persons. Participants reported feeling happy, socially recognized, and proud of themselves. Key “core values” developed among older persons included gratitude, selflessness, kindness, eagerness to learn, and unity. Positive changes were observed in attitudes, behaviors, and community engagement. Recommendations include the continuous promotion of value enhancing activities at the local level, transmitting cultural values to older persons, integrating collaboration among government agencies, local authorities, and civil society to develop activities aligned with older persons' lifestyles, and encouraging older persons to play a role in passing on values to younger generations.



6.2.6 “Desirable role of local authorities in providing public services for older persons in the community under the concept of ageing in place”

by Prof. Sasipat Yodpet and Asst. Prof. Dr. Nattapat Sarobol

Funded by the Thai Institute for Gerontology Research and Development Foundation and the Thai Health Promotion Foundation

This study proposes the desirable role of local administrative organizations in providing public services for older persons in the community under the “ageing in place” concept, based on document analysis and empirical operations in the field. The study found that, currently, local administrative organizations nationwide play a key role in providing public services, including health, welfare, environmental, and economic services at the local level. The success of these organizations depends on the policies of local executives, collaboration with networks, citizen participation, and support from the government. However, policy evaluations revealed that local organizations still face several limitations. Therefore, it is recommended to integrate health and social policies and budgets clearly to facilitate service provision for older persons, establish national regulations and strategies that promote intersectoral collaboration, and support improvements in operational systems so that local organizations can sustainably care for older persons and effectively respond to local contexts.

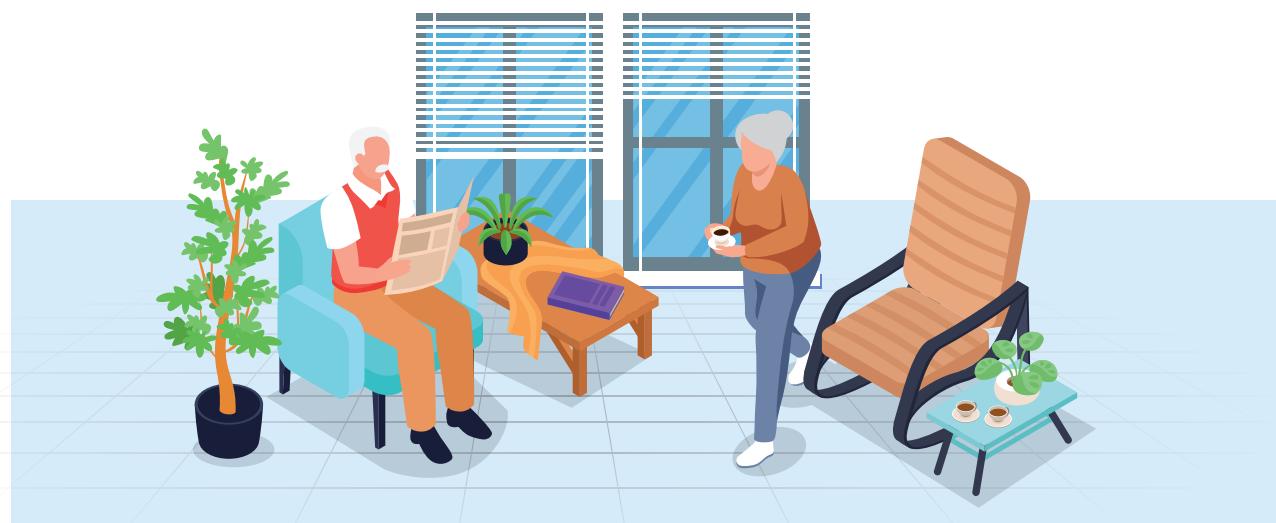


6.2.7 “Health services and social innovations from multiple sectors for ageing in place”

By Assoc. Prof. Dr. Jongjit Rittirong

Institute for Population and Social Research, Mahidol University

This study is a document-based research that collected information on health and social services supporting ageing in place for older persons and identified service gaps to develop policy recommendations for improving services and the environment. The goal of the study was to develop services for ageing in place, which require three components: (1) facilities, technology, and environment (2) health and long-term care services and (3) social care services. The study applied the “Health in All Policies” approach to integrate resources for developing infrastructure and services, promoting active ageing, and enhancing older persons’ quality of life, enabling them to be healthy, socially engaged, and financially secure. The study recommended that both government and civil society play roles in ensuring communities provide comprehensive services across all three components, which are more cost-effective than institutional care. Ageing in place allows older persons to live independently for the longest time among family members, within familiar communities and environments. Moreover, promoting ageing in place significantly reduces government expenses on institutional care.



6.3 Economics

It comprises three studies.

6.3.1 “A study on the vulnerability and coping strategies of older farmers facing drought”

by Asst. Prof. Dr. Watchara Pechdin

Funded by the Thai Institute for Gerontology Research and Development Foundation and the Thai Health Promotion Foundation

This research examined the social conditions of older farmers in three provinces repeatedly affected by drought: Chiang Rai (North), Buriram (Northeast), and Uthai Thani (Central). Data were collected from a sample of 2,500 individuals to plan quality-of-life improvements and synthesize climate change coping strategies tailored to the vulnerability context of older farmers. Both quantitative and qualitative research methods were used. The study found that the primary vulnerability of older farmers lies in the economic domain, particularly their ability to adapt to fluctuations in production costs, which affect income and are linked to social and health vulnerabilities. Most older farmers relied on financial strategies, such as selling assets or borrowing, rather than adjusting consumption behaviors, due to reduced food needs with age and dependence on local food resources. However, some older farmers still resorted to high-risk strategies, such as skipping meals or engaging in dangerous work, highlighting the need to develop adaptation models that consider cultural, behavioral, economic, and social factors, along with more specific policy recommendations to improve the long-term quality of life of older farmers.

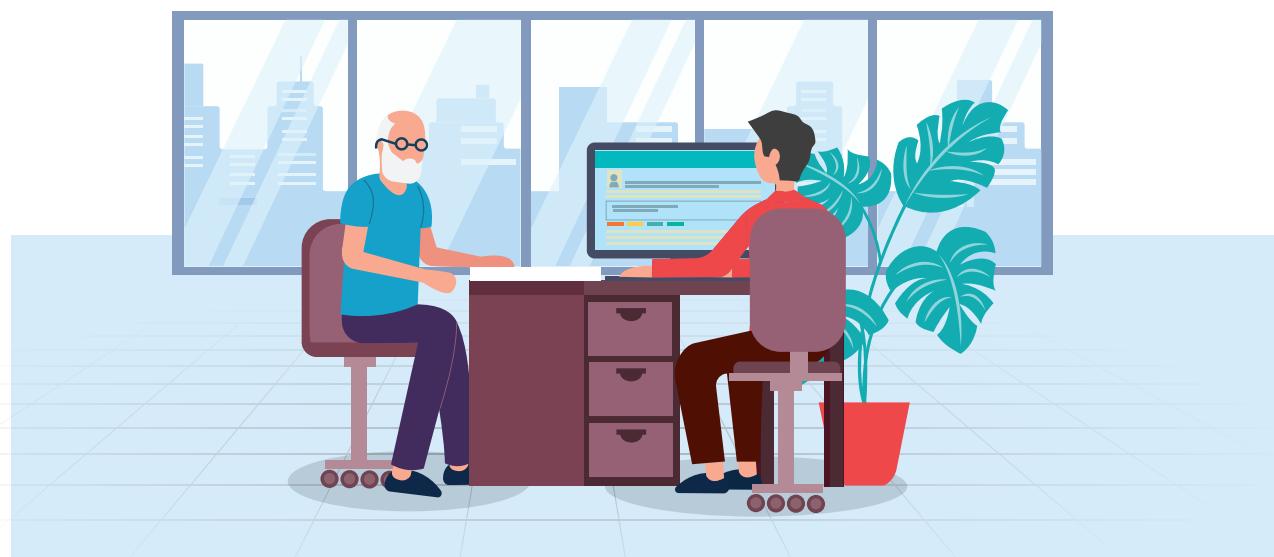


6.3.2 “Pension System”

by Prof. Dr. Worawet Suwanrada

Faculty of Economics, Chulalongkorn University

This study had two objectives: first, to review, analyze, and synthesize issues related to creating appropriate options for Thailand’s pension system; and second, to develop policy recommendations to guide pension reform in a way that is desirable and enhances the quality of life of older persons both now and in the future. The study employed a document-based research method, drawing on empirical data, academic concepts, and civil society proposals. The findings indicate that, although Thailand has multiple forms of old-age allowance and pensions, those mechanisms still do not fully address adequacy, coverage, and sustainability—particularly for workers in the informal sector and the self-employed. Policy must also consider social values and funding sources, such as the principles of basic rights, co-contribution schemes, or welfare-state approaches designed to meet the needs of current older persons while also accommodating the population approaching old age. Key recommendations include reforming the pension system in terms of funding sources, governance, and operational mechanisms, which involves designing management systems and organizational structures responsible for effectively implementing pension policies, ensuring inter-agency coordination, and systematically monitoring and evaluating performance. Such reforms aim to make Thailand’s pension system responsive to demographic changes and provide comprehensive and sustainable security for older persons.



6.3.3 “Research on developing a lifelong learning system and future skills for Thailand’s ageing society economy”

by Asst. Prof. Dr. Duangjai Lortanavanit et al.

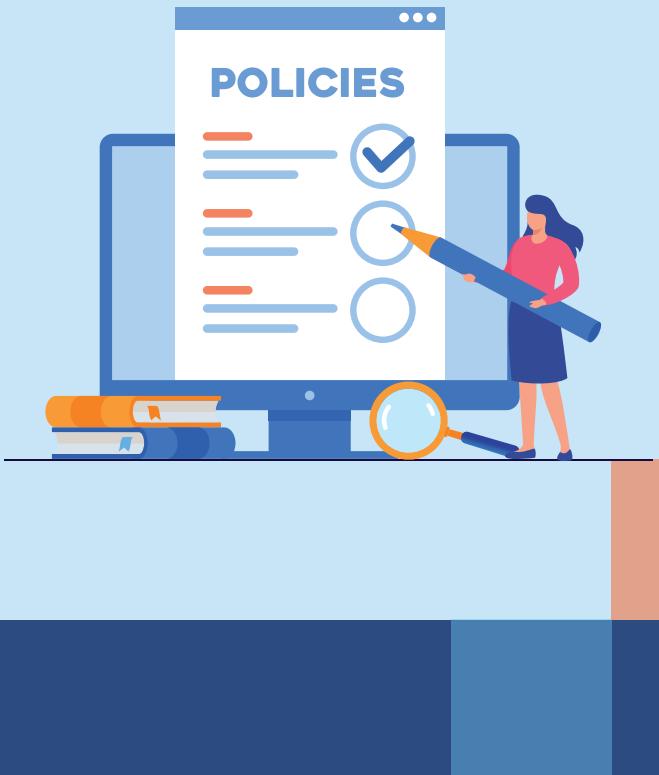
Funded by the Human Capital and Higher Education, Research, and Innovation Development Fund Management Unit and the Office of the Higher Education, Science, Research, and Innovation Policy Council

This research aimed to enhance the quality of life and learning opportunities for entrepreneurs age 45 years or older by supporting the development of professional skills and adaptability to economic and social changes. Action research was conducted through eight main steps: (1) reviewing secondary data, (2) conducting site surveys and in-depth interviews, (3) surveying entrepreneurs, (4) developing and delivering a training curriculum consisting of 5 categories and 24 topics, (5) training 628 participants, (6) providing business consulting to 15 enterprises following the “Thammasat Model,” (7) promoting digital skills and community tourism services, and (8) creating an online community to support employment and analyze the components of the community learning ecosystem. The study found that the project succeeded in multiple areas, including the development of 62 new products and services with logos and packaging, new sales channels and service occupations, a Silver HR Center prototype, new markets and customer groups, at least a 20% increase in entrepreneurs’ income, collaboration with 15 organizations, and the development of a lifelong learning prototype in the Khlong Phlu Community. Key recommendations include expanding participation of community partners—government, civil society, and citizens—while fostering a shared understanding that learning has no one-size-fits-all approach and encouraging continuous learning.



7

Summary and Policy Recommendations



The world's population structure is undergoing a significant transformation due to the absolute and relative increase in older persons. It is projected that by 2100, the global older population will reach 3,019,571,493 people. In Southeast Asia, Thailand and Singapore currently have a higher proportion of older persons than children. Thailand has been facing a population crisis characterized by a birth rate lower than the death rate since 2021, placing the country at the forefront of rapidly entering an increasingly aged society in the region.

Such rapid demographic changes reflect both challenges and opportunities that require comprehensive, inclusive, and innovative service provision. Accordingly, the research team has proposed the concept of “ageing in place” as a core policy idea, which should be supported through strong policy implementation and innovation development. This approach offers strategies for managing demographic change while maintaining older persons’ independence and community connections. Integrating policy frameworks, strategies, innovations, and interdisciplinary research provides a foundation for sustainable older-persons’ societal management. The successful implementation of these approaches depends upon ongoing collaboration among government agencies, educational institutions, and communities to develop context-appropriate solutions, while ensuring that older persons have access to the necessary support systems.

The study found that, although the government and relevant partners have been working to support and enhance the quality of life of older persons, there are still gaps in advancing the concept of “ageing in place” at multiple levels from households and communities to bureaucratic systems. Therefore, it is necessary to establish policies based on empirical data, systematically integrating mechanisms and resources, particularly by strengthening the role of local administrative organizations as key actors at the community level. This approach will lead to robust and sustainable policy recommendations and implementation, while reducing inequality among older persons.

7.1

Key policy recommendations regarding the concept of ageing in place

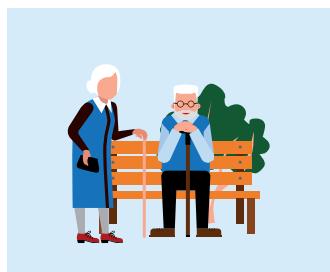
7.1.1 Promoting ageing in place is one of the government’s key policies



A key strategic recommendation is that the government should designate “ageing in place” as one of the country’s core policies for advancing an increasingly aged society. This would enable the translation of policy into concrete guidelines and the decentralization of authority to local administrative organizations. Establishing policy at this level provides a primary framework for serious, coordinated, and continuous implementation.

Although the Ministry of Social Development and Human Security has proposed policies to address the population crisis and empower older persons, including developing infrastructure for older-person care and promoting environments conducive to their daily lives, as well as flagship projects building on the “5x5 Population Crisis” concept particularly in improving older person care infrastructure the operational approach and target setting remain somewhat vague. Promoting ageing in place would support these policies by making them clearer and more concrete, providing actionable strategies to ensure that older persons have a physical and social environment that continuously and sustainably supports their potential and well-being.

7.1.2 Physical infrastructure and environmental conditions conducive to older persons should be developed



The government should take action across multiple areas to ensure that the concept of ageing in place is implemented with quality and in full accordance with its principles. Policy implementation should focus on developing a physical infrastructure and environment conducive to older persons, improving public spaces to be elder-friendly, enhancing transportation systems including land, water, and air transport as well as accessible mass transit, providing safe and suitable housing, and upgrading community facilities. In terms of health care, access to community based long term care should be expanded.

7.1.3 Promote the provision of welfare technology or assistive technology for older persons to enable them to live with quality, independence, and safety

The development of health and social technology systems for eldercare involves using technology to improve or enhance services. This can significantly reduce delays and gaps in service provision, alleviate staff shortages, and address other challenges. Additionally, it promotes easier and more efficient access to services for older persons, creating sustainable welfare and supporting self reliance.



7.1.4 The decentralization of budgets and management should be reformed for local administrative organizations to enable concrete and effective implementation



Clear decentralization of authority and budgets to local administrative organizations should be implemented to enable concrete action. This includes developing capacity, recruiting personnel with knowledge and expertise in eldercare, and enhancing the skills of existing staff. Service standards for older persons at the local level should also be improved to ensure efficiency and quality in service delivery.

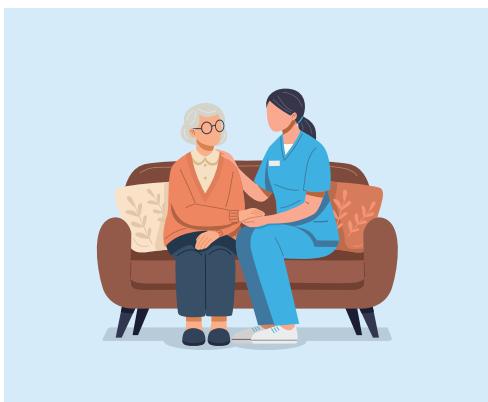
7.1.5 Strategic partnerships should be strengthened by encouraging private sector participation in service provision

In particular, service providers for older persons, the food industry, health technology, elder-friendly architecture, and religious organizations should be engaged. Religious networks, which are closely connected to communities, can serve as coordination points and provide basic care.

Possible approaches include incentive policies, tax measures, financial support, and mechanisms for public private collaboration. Additionally, educational institutions are key actors that should foster partnerships in research and innovation development for older persons.



7.1.6 The system for monitoring and evaluating policies and service delivery should be developed and improved to reflect the benefits received by older persons



Policies and projects related to improving the quality of life of older persons must undergo monitoring and evaluation, which is a crucial process for determining whether and how these policies or projects meet the needs of older persons and enhance their quality of life, as well as assessing their effectiveness. Additionally, it provides insight into the broader impacts and the cost-effectiveness of resource allocation, leading to policy adjustments that are appropriate to changing situations and needs, while also promoting transparency and accountability in government agencies.

The following actions should be considered:

(1) Develop evaluation indicators that focus on outcomes for older persons in addition to government performance results. Digital technology should be used for data collection and analysis and to support older persons' participation in service evaluations. Continuous training of evaluation staff at all levels should also be provided. This will enhance the effectiveness of monitoring and evaluating policies and projects.

(2) It is recommended to establish a multidimensional monitoring and evaluation system by setting up a national committee with governance for pilot studies and comparative evaluations. There should be a national older-persons data center linking information from all agencies, and create a database system with real time data exchange interfaces (Application Programming Interface, API). There is an urgent need to standardize data collection according to international standards and in compliance with the Personal Data Protection Act B.E. 2562 (2019). The country needs to apply Big Data in the multidimensional monitoring and evaluation system (Input-Process-Output-Outcome), including:

- Analyzing data and trends in the number of older persons in each area
- Forecasting resource needs 5–10 years in advance
- Assessing population-level health risk factors
- Analyzing efficient resource allocation, personnel and budget distribution
- Identifying service-deficient areas
- Analyzing processes such as abnormal service usage behaviors and system bottlenecks
- Continuously improve work processes
- Evaluating service outcomes and performance
- Analyzing service utilization rates
- Assessing user satisfaction
- Monitoring quality of care
- Analyzing overall services
- Evaluating older persons' quality of life
- Assessing economic and social impacts

7.2

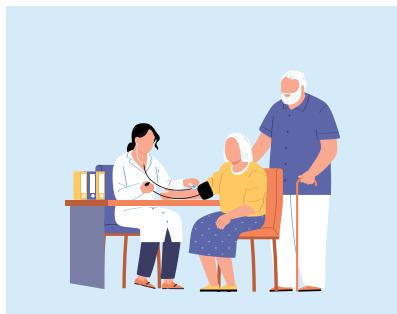
Recommendations for Implementation

7.2.1 Day care and home care services for older persons should be expanded

These services should cover all areas, especially remote locations and communities with a high proportion of older persons. Expanding such services will help reduce family burdens and enhance confidence in caring for older persons.

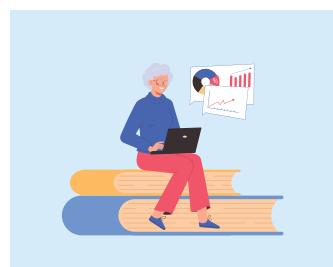


7.2.2 Capacity should be developed by recruiting personnel with knowledge and expertise in eldercare and enhancing the skills of existing staff to meet standards, as well as continuously building new knowledge and skills



Successfully implementing central policies at the local level requires personnel with appropriate knowledge and skills. Therefore, systematic academic support should be provided, with the following approaches:

Raise knowledge standards and develop specialized training curricula for local officials, volunteers, and caregivers, covering key areas such as physical health, mental health, communication, and technology use. These curricula should be designed to suit the educational level and experience of the trainees.



7.2.3 Continuous (lifelong) learning should be systematically promoted

Among caregivers through knowledge-sharing forums, study visits, and the development of new skills

7.2.4 Research findings and innovations should be applied to develop care models that are suitable for the Thai context

Effective policy implementation must be based on empirical data and evidence. Therefore, systematic support for research and the development of new models is necessary, which can be approached as follows:

(1) Promote action research and pilot projects to create care models for older persons that are appropriate to the context and resources of each area, emphasizing community participation in the research process.

(2) Support research funding and networks of researchers focused on developing innovations in health and older-person care services, encouraging collaboration across relevant disciplines.

(3) Link research to policy formulation and practical implementation in government agencies and local administrative organizations through mechanisms for knowledge transfer and monitoring the application of research findings.

7.2.5 Consider expanding internet welfare support for vulnerable older persons



Expanding internet welfare for vulnerable older persons promotes equal access to information and digital services, benefiting their health, economic situation, social life, and overall quality of life. It also enables older persons to more easily access government benefits such as pensions, welfare cards, and health insurance, as well as opportunities for learning and career development.

Approaches to expanding internet welfare for vulnerable older persons include integrating internet access as a “basic right,” with all relevant ministries coordinating to support technology use among this group. Key measures include:

(1) Providing free internet services with a set number of hours per month (e.g., 5 hours), distributing SIM cards, pocket Wi-Fi, or internet packages, and supporting equipment costs such as mobile phones or tablets.

(2) Regularly offering training programs in the community to enhance older persons’ digital literacy, and developing simple, age-friendly applications.

(3) Creating volunteer networks or youth volunteer groups to serve as “digital mentors” for older persons.

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