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The current issue features articles that address significant topics in the fields of humanities and social sciences, encompassing language, education, and related disciplines. A total of five articles are presented, comprising four research articles and one academic article. Each contribution offers valuable insights that advance academic development and support practical applications. **The first article** is “The Power of Resilience in 21st Century Education How Growth Mindset and Mental Well being Support Teachers and Students”. **The second article** is “Ready or Not? Conditions for Readiness of Sukhothai Province to Become a Self-Governing Province”. **The third article** is “Public Participation in Local Development A Case Study of Ban Lung Community Sachorakhe Subdistrict Dan Khun Thot District Nakhon Ratchasima Province”. **The fourth article** is “The Effectiveness of the Universal Health Coverage Policy A Case Study of Don Phatthana Village, Dong I Chan Subdistrict Non Suwan District Buriram Province”. **The fifth article** is “An Analysis of Translation Strategies for Thai Food and Beverage Names into Chinese A Case Study in Nakhon Ratchasima Province”.

The editorial team of Nakhon Ratchasima Journal of Humanities and Social Sciences (NJHSS) would like to express our sincere gratitude to all of authors for their contributions, as well as to the esteemed reviewers for their valuable guidance that help maintain the high quality and standard of our journal.

We sincerely hope that this issue will be beneficial to all readers and serve as an inspiration for further study and research in the future.

Thank you all for supporting our journal.

A handwritten signature in blue ink, appearing to be 'Teerawat Karnsopa', with a stylized flourish at the end.

(Dr. Teerawat Karnsopa)

Editor of Nakhon Ratchasima Journal of  
Humanities and Social Sciences



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# The Power of Resilience in 21st-Century Education: How Growth Mindset and Mental Well-being Support Teachers and Students

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## Abstract

In 21st-century education, resilience is a key factor in promoting both academic success and emotional well-being for teachers and students. This paper explores the relationship between resilience, growth mindset, and mental well-being, highlighting their combined role in fostering adaptability, perseverance, and self-efficacy. A growth mindset encourages individuals to view challenges as opportunities for development, increasing motivation, and long-term achievement. Mental well-being supports emotional regulation and stress management, both essential for sustained engagement in teaching and learning. Teacher resilience helps prevent burnout, maintain instructional effectiveness, and build positive learning environments, while student resilience enhances problem-solving and emotional stability, enabling learners to cope with setbacks. Implementing strategies such as social-emotional learning, psychological support, and inclusive school cultures can strengthen resilience across educational

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settings. This paper emphasizes the importance of a holistic approach to resilience, showing how its integration enhances individual success and supports sustainable, future-ready education systems.

**Keywords:** Resilience in Education, Teacher Resilience, Student Resilience, Mental Well-being, Growth Mindset

## Introduction

The landscape of 21st-century education is increasingly complex, demanding more than academic competence from students and educators alike. Rapid technological advancements, high performance expectations, and social pressures require individuals to develop emotional strength, adaptability, and perseverance. In this context, resilience has emerged as a vital skill that empowers both students and teachers to navigate challenges, sustain motivation, and achieve success. Defined as the capacity to recover from setbacks and persist despite difficulties (Masten, 2001), resilience is essential for fostering both academic achievement and well-being in modern learning environments. Resilient students demonstrate greater engagement, problem-solving abilities, and emotional regulation, enabling them to manage academic stress and persevere through setbacks (Fergus & Zimmerman, 2005). Conversely, a lack of resilience can exacerbate anxiety, diminish motivation, and result in poor academic outcomes.

Similarly, resilient teachers are better equipped to handle professional demands, maintain job satisfaction, and create a supportive classroom atmosphere that enhances student learning (Day & Gu, 2010). Teachers who struggle with resilience often face burnout, emotional exhaustion, and decreased teaching effectiveness, adversely affecting the

quality of education. The relationship between resilience and mental health underscores its significance in education. Rising cases of stress, anxiety, and depression among students and teachers necessitate resilience as a protective mechanism to sustain emotional stability and promote healthy coping strategies (Southwick et al., 2014). Furthermore, resilience aligns closely with the growth mindset, the belief that abilities can develop through effort and persistence (Dweck, 2006). A growth mindset reinforces resilience by encouraging individuals to view challenges as opportunities for growth, fostering continuous learning and adaptation.

This paper examines the interconnected roles of resilience, mental well-being, and growth mindset in education; investigates their effects on student outcomes and teacher performance; and presents evidence-based strategies for building resilience across educational settings.

### **The Interconnection of Resilience, Mental Health, and a Growth Mindset**

In the increasingly complex landscape of 21st-century education, resilience stands as a foundational attribute that empowers both students and teachers to navigate academic demands, personal challenges, and societal pressures. However, resilience does not operate in isolation; rather, it is deeply intertwined with mental health and a growth mindset, forming a triad that underpins long-term success and well-being. This interconnected framework equips individuals with the psychological tools necessary to persevere through adversity, regulate emotions, and maintain motivation in the face of setbacks. In particular, resilience serves as a protective factor against mental health issues, such as anxiety, depression, and burnout, which are increasingly prevalent among both students and educators.

Research suggests that individuals with higher resilience levels demonstrate better stress management, emotional regulation, and problem-solving abilities, all of which contribute to enhancing academic and professional outcomes (Fletcher & Sarkar, 2013; Southwick et al., 2014).

The concept of the growth mindset, introduced by Dweck (2006), further reinforces resilience by fostering the belief that intelligence and abilities can be developed through effort and persistence. Students who embrace this mindset are more likely to perceive failures as opportunities for growth rather than as reflections of fixed limitations, enhancing their capacity to cope with academic pressures and setbacks (Dweck & Yeager, 2019). Similarly, teachers with a growth-oriented perspective are better positioned to adapt to evolving educational demands, maintain professional motivation, and cultivate a classroom culture that encourages perseverance and lifelong learning. Research underscores the effectiveness of even brief growth mindset interventions in improving academic performance, particularly among students from underprivileged backgrounds (Paunesku et al., 2015).

The convergence of resilience, mental well-being, and a growth mindset extends beyond individual development, influencing the broader educational ecosystem. Schools that embed resilience-focused practices, prioritize mental health support, and promote adaptive mindsets foster learning environments that encourage risk-taking, problem-solving, and intellectual curiosity. These environments not only enhance academic engagement and performance but also equip students with the social-emotional competencies necessary for future careers and civic life (Taylor et al., 2017). For educators, resilience-building reduces burnout, improves

job satisfaction, and strengthens their ability to deliver high-quality instruction, contributing to greater workforce stability and school effectiveness.

Moreover, the importance of resilience transcends the classroom, reflecting a broader societal necessity. In an era characterized by technological disruption, economic volatility, and global crises, individuals who possess psychological resilience, emotional intelligence, and adaptive thinking are better equipped to navigate uncertainty, solve complex problems, and sustain well-being (World Economic Forum, 2020). As education systems increasingly emphasize future readiness, fostering resilience alongside mental health literacy and a growth mindset becomes a strategic imperative for preparing individuals not only to succeed academically but also to contribute meaningfully to society.

In conclusion, many global education frameworks recognize the importance of embedding resilience, mental health, and adaptability to prepare learners for the demands of an evolving world (World Economic Forum, 2020). Schools that prioritize this triad cultivate individuals who are not merely knowledgeable but also adaptable, emotionally stable, and prepared for lifelong growth. As education continues to evolve alongside global uncertainties, embedding resilience-building practices into curricula and institutional cultures is not merely beneficial; it is essential for fostering a future generation capable of thriving in both their personal and professional lives.

## **Resilience as a Pillar of Success in Education**

Resilience is a vital competency that underpins both student achievement and teacher well-being in contemporary education. It refers to

adapting to difficulties, recovering from setbacks, and sustaining motivation despite adversity (Masten, 2001). Unlike fixed traits such as intelligence, resilience is a dynamic skill that can be cultivated through supportive environments, reflective practices, and adaptive coping strategies. Given the increasing academic pressures and mental health challenges faced by students and teachers, resilience is essential for sustaining performance and emotional stability (World Health Organization, 2020).

**Impact on students:** Resilient students demonstrate greater academic engagement, problem-solving abilities, and emotional regulation, leading to improved performance and persistence (Fergus & Zimmerman, 2005). They are more likely to interpret challenges as learning opportunities rather than failures, enabling them to maintain motivation and seek support when needed. In contrast, students lacking resilience often struggle with stress, self-doubt, and disengagement, which can hinder their educational progress.

**Impact on teachers:** Teachers require resilience to navigate the demands of their profession, including heavy workloads, diverse student needs, and administrative pressures. Those with higher resilience levels experience reduced burnout, greater job satisfaction, and the capacity to foster positive classroom environments (Day & Gu, 2010). Conversely, teachers without resilience are more susceptible to emotional exhaustion and attrition, ultimately compromising educational quality.

**Developing Resilience:** Resilience is not inherent but can be cultivated through targeted interventions. Schools that promote resilience-building initiatives such as social-emotional learning (SEL), growth mindset development, peer mentoring, and mindfulness training, equip students and

teachers with strategies to manage stress, persist through difficulties, and maintain well-being (Dweck, 2006; Durlak et al., 2011). These approaches foster adaptive thinking, emotional regulation, and problem-solving skills, creating a foundation for sustained academic and professional success.

While resilience-building strategies such as SEL, mindfulness, and growth mindset interventions have shown promising outcomes, their implementation is not without challenges. Educational settings vary widely in terms of cultural values, access to resources, and institutional readiness. In some contexts, for example, emotional expression or failure may be viewed differently due to cultural norms, potentially affecting the reception of SEL or growth mindset practices (Torrente et al., 2015). Furthermore, under-resourced schools may lack trained staff, funding, or time to integrate new programs meaningfully. Resistance from educators who are already burdened with administrative demands can also hinder uptake. Therefore, resilience-building initiatives must be context-sensitive, allowing for local adaptation, inclusive planning, and phased integration. Engaging stakeholders, including teachers, families, and students, in the design and evaluation of these programs increases relevance, sustainability, and equity in their impact (Ungar, 2011).

In conclusion, resilience is a fundamental element of effective education, empowering students to achieve academic success and enabling teachers to sustain their professional commitment. Integrating resilience-focused strategies into school culture, curricula, and professional development supports both performance and well-being, ensuring that individuals are equipped to thrive in the face of challenges in an increasingly complex educational landscape.

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## **Mental Health as a Cornerstone of Effective Learning and Teaching**

Mental health is a critical determinant of success in both learning and teaching. The psychological well-being of students and teachers profoundly influences academic performance, classroom engagement, and overall educational quality (Organisation for Economic Co-operation and Development, 2021). However, growing mental health concerns, such as stress, anxiety, and burnout, have increasingly disrupted the academic landscape, affecting both student achievement and teacher retention (World Health Organization, 2020).

**Impact on Students:** Students experiencing poor mental health often struggle with concentration, memory retention, and problem-solving, leading to diminished academic performance, absenteeism, and reduced motivation (Suldo et al., 2016; Mendolia et al., 2020). Conversely, those supported through mental health interventions, such as counseling, mindfulness practices, and social-emotional learning (SEL), develop resilience, emotional regulation, and adaptive coping strategies, enabling them to overcome setbacks and sustain academic progress (Fergus & Zimmerman, 2005).

**Impact on Teachers:** Teachers' mental health similarly affects instructional quality and classroom climate. Stress, emotional exhaustion, and burnout can undermine their ability to manage classrooms, engage students, and maintain job satisfaction (Skaalvik & Skaalvik, 2017). Educators with stronger mental health and resilience demonstrate greater patience, motivation, and capacity to foster positive teacher-student relationships (Day

& Gu, 2010). Schools investing in professional development, mentorship, and mental health resources reduce burnout while enhancing teaching efficacy.

**School Climate and Long-Term Resilience:** A school culture that prioritizes mental health fosters a supportive environment, promoting growth mindsets and normalizing emotional well-being discussions (Dweck, 2006). Integrating resilience-building practices into curricula equips both students and teachers with the tools to manage academic and professional pressures. Such environments encourage adaptability, perseverance, and psychological stability, laying the foundation for sustained educational and personal success.

In conclusion, mental health is not an auxiliary concern but a foundational element of learning and teaching excellence. Supporting mental well-being through resilience-based interventions ensures that students reach their potential while educators maintain professional fulfillment. As educational systems evolve, embedding mental health practices into daily operations will be pivotal in fostering resilient, high-performing academic communities.

## **Growth Mindset as a Catalyst for Resilience: Implications for Lifelong Development**

The concept of a growth mindset, introduced by Dweck (2006), has gained considerable attention in educational and psychological research for its transformative impact on individual development. Defined as the belief that intelligence, abilities, and skills can be cultivated through effort, learning, and persistence, a growth mindset has emerged as a foundational mechanism for building resilience, the capacity to withstand setbacks, adapt

to challenges, and thrive in the face of adversity. While the benefits of a growth mindset are well-documented in academic performance, its broader implications for personal, professional, and societal resilience warrant further exploration within the context of lifelong development.

Fostering Academic Resilience in educational contexts, while students with a growth mindset are often more resilient, the strength of this effect varies by context and population (Sisk et al., 2018). This orientation reduces performance anxiety, encourages persistence, and enhances problem-solving capabilities (Yeager & Dweck, 2012). Empirical studies demonstrate that students with a growth mindset exhibit greater resilience in the face of academic challenges, leading to improved learning outcomes and reduced dropout rates (Yeager & Dweck, 2012). By shifting the narrative around failure, educational institutions cultivate adaptive cognitive frameworks that equip students with the psychological tools necessary to navigate both academic rigor and broader life challenges.

Expanding Resilience Beyond the Classroom, the influence of a growth mindset extends well beyond academic settings, serving as a psychological asset across professional, social, and personal domains. In the workplace, individuals with growth-oriented perspectives demonstrate greater adaptability, problem-solving capacity, and willingness to engage in continuous skill development, critical attributes in an era marked by technological disruption and labor market volatility (Dweck & Leggett, 1988). Research suggests that employees who view challenges as opportunities for growth are less susceptible to burnout and better positioned to navigate career transitions (Canning et al., 2019). Moreover, leaders who model a

growth mindset cultivate resilient organizational cultures, empowering teams to embrace innovation and withstand operational pressures.

Psychological Well-being and Emotional Resilience, a growth mindset, also underpins emotional resilience by promoting cognitive flexibility and positive coping mechanisms. Individuals who perceive setbacks as surmountable develop higher self-efficacy and greater emotional regulation, which are protective factors against stress, anxiety, and depression (Dweck, 2006). Studies indicate that those with a growth mindset exhibit lower psychological distress as they approach personal and interpersonal challenges with problem-solving orientations rather than avoidance strategies (Schroder et al., 2017). This adaptive mindset fosters long-term psychological well-being, positioning individuals to maintain emotional stability across diverse life contexts.

Societal Implications, resilient Communities, at a societal level, embedding a growth mindset within educational and professional systems contributes to the cultivation of resilient communities capable of adapting to collective challenges. Communities that embrace growth-oriented values demonstrate greater innovation, civic engagement, and problem-solving capacity when faced with crises such as economic shifts, environmental disasters, or public health emergencies (Yeager et al., 2019). The normalization of perseverance, adaptability, and collaborative problem-solving fosters collective resilience, ensuring societal progress amidst uncertainty.

In conclusion, the integration of a growth mindset into educational and professional development frameworks represents a pivotal pathway to resilience across individual, institutional, and societal levels. By equipping individuals with the cognitive tools to reinterpret failure, embrace effort, and

view challenges as developmental opportunities, educators and policymakers contribute to the cultivation of adaptive capacities essential for long-term success and well-being. In an increasingly complex global landscape, embedding growth-oriented mindsets into lifelong learning processes is imperative for fostering resilience capable of sustaining both personal fulfillment and societal advancement

## **The Enduring Impact of Resilience Beyond the Classroom**

While resilience is often recognized for its positive influence on academic performance, its significance extends far beyond the confines of the classroom, shaping lifelong personal, professional, and societal outcomes. In a world increasingly characterized by uncertainty, rapid technological advancements, and global crises, resilience emerges as a core competency that underpins mental health, career adaptability, social cohesion, and collective societal resilience. Educational institutions play a pivotal role not only in educational preparing but, also in equipping individuals with the adaptive capacities necessary to thrive across multiple life domains.

One of the most profound impacts of resilience lies in enhancing mental health and psychological well-being. Individuals who demonstrate resilience exhibit greater emotional regulation, reduced vulnerability to stress, and a lower risk of developing anxiety and depressive disorders (Southwick et al., 2014). The capacity to reframe setbacks, manage uncertainty, and maintain a solution-oriented mindset fosters psychological flexibility, enabling individuals to sustain well-being amid adversity. Longitudinal studies indicate that adolescents exposed to resilience-building interventions during their schooling show lower incidences of mental health

issues in adulthood, underscoring the enduring protective function of resilience (Fletcher & Sarkar, 2013). This link between early resilience development and long-term mental health stability highlights education's critical role in mitigating the growing prevalence of psychological distress in contemporary societies.

Resilience also exerts a decisive influence on career adaptability and professional growth, particularly within an increasingly volatile and dynamic labor market. The modern workforce demands adaptability, problem-solving, and a capacity for lifelong learning, attributes that resilient individuals are more likely to exhibit (Luthans et al., 2006). Empirical evidence suggests that employees with high resilience are better equipped to navigate career transitions, respond to occupational stressors, and sustain productivity under pressure. Furthermore, resilience enhances leadership effectiveness, as resilient leaders demonstrate superior crisis management, decision-making under uncertainty, and the ability to foster a resilient organizational culture (Youssef & Luthans, 2012). By embedding resilience-building practices within educational systems, schools lay the foundation for students to approach professional challenges with confidence and agility, thereby enhancing their long-term employability and career advancement.

Beyond individual success, resilience contributes substantially to the development of strong interpersonal relationships and community engagement. Resilient individuals exhibit higher levels of empathy, emotional intelligence, and conflict resolution skills, which facilitate the formation and maintenance of positive social relationships (Rutter, 2012). These interpersonal competencies are particularly critical in diverse and interconnected societies, where effective collaboration and cultural

understanding are paramount. Moreover, research indicates that resilient individuals are more likely to engage in civic participation, volunteerism, and leadership within their communities, suggesting that resilience fosters a sense of social responsibility and collective well-being (Werner, 2013). Therefore, schools serve as incubators not only for academic and professional readiness but also for cultivating socially responsible individuals who contribute meaningfully to their communities.

At a macro level, resilience functions as a crucial determinant of societal stability and recovery during crises. Whether responding to economic downturns, natural disasters, or public health emergencies, societies characterized by resilient individuals and institutions demonstrate greater adaptive capacity and faster recovery trajectories (Masten, 2014). The COVID-19 pandemic exemplified the pivotal role of resilience, as individuals, organizations, and governments capable of swift adaptation to remote work, digital education, and public health measures exhibited greater continuity and stability. Educational systems that prioritize resilience equip future generations with the critical thinking, emotional regulation, and problem-solving skills necessary to navigate such global uncertainties, thereby strengthening collective resilience and social cohesion.

In summation, resilience transcends academic achievement, exerting a transformative influence on mental health, professional success, social relationships, and societal resilience. By embedding resilience-focused pedagogical approaches into school curricula, educational institutions not only equip students with the tools to excel academically but also empower them to lead emotionally balanced, professionally agile, and socially engaged lives. As the complexities of the modern world intensify, resilience

education emerges as a foundational imperative, positioning individuals not merely to withstand challenges but to drive personal growth and societal progress.

## **Practical Strategies to Foster Resilience in Schools**

Fostering resilience within educational settings has become an essential priority in 21st-century education, as students and teachers are increasingly required to navigate academic pressures, technological disruptions, and social uncertainties. Resilience, the capacity to adapt positively in the face of adversity, serves as a protective mechanism that promotes both mental well-being and sustained academic engagement. Effective development of resilience in schools necessitates a comprehensive, multi-tiered approach, integrating social-emotional learning (SEL), supportive teacher-student relationships, mental health services, professional support for teachers, and school-wide cultural shifts that emphasize perseverance and adaptability. When embedded into school systems, these strategies not only enhance individual coping capacities but also foster institutional resilience, creating environments that are conducive to both academic success and emotional well-being (Taylor et al. (2017).

One of the most empirically supported methods for building resilience is the implementation of SEL programs, which equip students with the competencies necessary for emotional regulation, conflict resolution, and interpersonal effectiveness. Durlak et al. (2011) found that students who participated in SEL initiatives exhibited enhanced academic performance and reduced behavioral issues, highlighting the intersection between emotional development and cognitive outcomes. Integrating SEL into the curriculum



through lessons on self-awareness, stress management, and problem-solving encourages students to reframe setbacks as opportunities for growth. More recent reviews continue to affirm these findings, suggesting that long-term SEL integration can yield sustained improvements in academic and mental health outcomes (Collaborative for Academic, Social, and Emotional Learning, 2023). Furthermore, mindfulness-based interventions, such as those explored by Zenner et al. (2014), have been shown to improve students' emotional stability and concentration, enabling them to manage academic stress more effectively. Recent studies, such as those by Liu et al. (2022), confirm that MBIs significantly strengthen resilience among students by promoting emotional self-regulation and adaptive coping mechanisms

Equally crucial is the cultivation of strong teacher-student relationships, which serve as a primary source of psychological safety and encouragement. According to Pianta et al. (2012), students who perceive their teachers as empathetic and supportive exhibit greater resilience, higher levels of academic motivation, and stronger social skills. Teachers can foster these bonds by demonstrating genuine interest in students' progress, providing individualized feedback, and modeling emotional resilience. Mentorship programs further strengthen these connections, offering students positive role models who exemplify perseverance and adaptive problem-solving.

Promoting a growth mindset—the belief that abilities can be developed through effort—is another foundational strategy for building resilience. Dweck (2006) research underscores that students who embrace a growth-oriented approach are more likely to persist through academic difficulties and interpret failure as a learning experience. Schools can

integrate this mindset by normalizing mistakes, emphasizing process over outcome, and encouraging students to reflect on their learning journeys. Research by Paunesku et al. (2015) demonstrates that growth mindset interventions can significantly enhance performance, particularly among students from disadvantaged backgrounds, further cementing their role in fostering academic resilience.

Recognizing the increasing prevalence of student mental health concerns, the provision of accessible school-based counseling services and peer support networks is vital. Werner and Smith (2001) emphasize that early intervention and consistent emotional support can prevent long-term psychological distress. Offering resources such as stress management workshops, cognitive behavioral strategies, and relaxation techniques ensures that students develop healthy coping mechanisms to navigate both academic and personal pressures. Simultaneously, teacher training in mental health literacy equips educators to identify early signs of distress and implement preventative interventions, further embedding resilience within classroom practices.

However, student resilience cannot flourish if teacher resilience is neglected. Skaalvik and Skaalvik (2017) highlight that burnout and occupational stress diminish teachers' capacity to support students effectively. Therefore, schools must prioritize teacher well-being by providing professional development on work-life balance, promoting peer collaboration, and instituting supportive leadership structures. Reducing administrative burdens and acknowledging teacher achievements fosters a culture of respect and motivation, enabling educators to model resilience and sustain their commitment to teaching.

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Lastly, embedding resilience into school culture requires experiential learning opportunities that bridge academic knowledge with real-world challenges. Duckworth et al. (2007) emphasize that experiences such as project-based learning, leadership development, and community service initiatives enhance students' problem-solving abilities and adaptability, reinforcing resilience through practical application. Schools should foster an atmosphere that celebrates persistence, optimism, and collaboration, empowering students to approach challenges with confidence. A compelling example is found in New Zealand's educational response to the Christchurch earthquakes. In the aftermath of the disaster, local schools implemented trauma-informed teaching practices and growth mindset curricula to support student and teacher recovery. According to the New Zealand Ministry of Education (2014), these initiatives significantly boosted student engagement, mental well-being, and academic continuity, despite the disruptions caused by the crisis. This case illustrates the potential of growth mindset frameworks not only to foster individual resilience but to facilitate collective recovery and societal cohesion in the face of large-scale adversity (Yeager et al., 2019).

In conclusion, fostering resilience in schools requires a comprehensive, research-informed approach that addresses the emotional, cognitive, and relational dimensions of education. As evidenced by studies such as Durlak et al. (2011) and Zenner et al. (2014), integrating social-emotional learning and mindfulness practices into the curriculum strengthens students' capacity to regulate emotions and manage stress. Equally important are strong teacher-student relationships (Pianta et al., 2012) and growth mindset interventions (Dweck, 2006; Paunesku et al., 2015),

which cultivate environments where persistence, adaptability, and self-belief are normalized. Addressing mental health needs through early support systems (Werner & Smith, 2001) and enhancing teacher resilience through supportive professional structures (Skaalvik & Skaalvik, 2017) ensures that both educators and learners can thrive. Experiential, challenge-based learning opportunities (Duckworth et al., 2007) further reinforce resilience by allowing students to develop grit and apply problem-solving skills in real-world contexts. Collectively, these strategies highlight the importance of embedding resilience not only in individual development but also in institutional design. For education systems to meet the demands of the 21st century, resilience must be positioned as a central pillar of both policy and practice, equipping students and educators with the tools necessary to flourish amid uncertainty and change.

## **Critical Reflections and Research Gaps**

While the theories and strategies discussed in this article, such as growth mindset, social-emotional learning (SEL), and resilience training, are supported by substantial empirical evidence, it is important to critically evaluate their limitations. For instance, some scholars argue that growth mindset interventions show inconsistent effects across different student populations and age groups (Sisk et al., 2018). Similarly, although SEL programs have proven effective in many contexts, their implementation often lacks cultural responsiveness or fails to adapt to local educational realities. Moreover, much of the existing research is derived from Western, high-income educational systems, limiting the generalizability of findings to under-resourced or culturally diverse settings. There is also limited

longitudinal evidence to confirm the sustained impact of these interventions on long-term life outcomes. Therefore, future research should focus on culturally adaptive practices, long-term impact studies, and the interaction of resilience with socio-economic, linguistic, and systemic factors. By addressing these gaps, the field can move toward a more equitable and effective framework for resilience education.

## Conclusion

In the context of 21st-century education, resilience has emerged as a critical capacity for both students and teachers, underpinning academic success, professional sustainability, and emotional well-being. The dynamic relationship between resilience, mental health, and a growth mindset highlights the importance of fostering these attributes in tandem. Teachers who develop resilience are better positioned to manage occupational stress, mitigate burnout, and sustain engagement in their professional roles. Similarly, resilient students are more likely to persist through academic challenges, regulate their emotions, and develop a strong sense of self-efficacy. Mental well-being functions as a stabilizing factor, supporting individuals' ability to navigate personal and academic demands, while a growth mindset promotes adaptive thinking by reinforcing the belief that abilities can be developed through effort and persistence.

Importantly, resilience is not an innate trait but a skill that can be cultivated through intentional educational practices. Strategies such as social-emotional learning (SEL), access to psychological support, and inclusive school cultures that encourage adaptability play a central role in this development. Educational institutions that embed these practices not

only enhance individual learning outcomes but also contribute to the creation of responsive, future-ready systems capable of navigating uncertainty. As such, investing in resilience, mental well-being, and a growth mindset is not only a pathway to personal and professional growth, it is a strategic imperative for building sustainable, equitable, and innovative educational environments for current and future generations.

## References

- Canning, E. A., Muenks, K., Green, D. J., & Murphy, M. C. (2019). STEM faculty who believe ability is fixed have larger racial achievement gaps and inspire less student motivation in their classes. *Science Advances*, 5(2), eaau4734. <https://doi.org/10.1126/sciadv.aau4734>
- Collaborative for Academic, Social, and Emotional Learning. (2023). *2023 state of SEL report: Evidence, implementation, and impact*. <https://casel.org/research>
- Day, C., & Gu, Q. (2010). *The new lives of teachers*. Routledge. <https://doi.org/10.4324/9780203847909>
- Duckworth, A. L., Peterson, C., Matthews, M. D., & Kelly, D. R. (2007). Grit: Perseverance and passion for long-term goals. *Journal of Personality and Social Psychology*, 92(6), 1087–1101. <https://doi.org/10.1037/0022-3514.92.6.1087>
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82(1), 405–432. <https://doi.org/10.1111/j.1467-8624.2010.01564.x>

- Dweck, C. S. (2006). *Mindset: The new psychology of success*. Random House.
- Dweck, C. S., & Leggett, E. L. (1988). A social-cognitive approach to motivation and personality. *Psychological Review*, 95(2), 256–273.  
<https://doi.org/10.1037/0033-295X.95.2.256>
- Dweck, C. S., & Yeager, D. S. (2019). Mindsets: A view from two eras. *Perspectives on Psychological Science*, 14(3), 481–496.  
<https://doi.org/10.1177/1745691618804166>
- Fergus, S., & Zimmerman, M. A. (2005). Adolescent resilience: A framework for understanding healthy development in the face of risk. *Annual Review of Public Health*, 26(1), 399–419.  
<https://doi.org/10.1146/annurev.publhealth.26.021304.144357>
- Fletcher, D., & Sarkar, M. (2013). Psychological resilience: A review and critique of definitions, concepts, and theory. *European Psychologist*, 18(1), 12–23.  
<https://doi.org/10.1027/1016-9040/a000124>
- Liu, X., Wang, Q., & Zhou, Z. (2022). The association between mindfulness and resilience among university students: A meta-analysis. *Sustainability*, 14(16), 10405. <https://doi.org/10.3390/su141610405>
- Luthans, F., Youssef, C. M., & Avolio, B. J. (2006). *Psychological capital: Developing the human competitive edge*. Oxford University Press.
- Masten, A. S. (2001). Ordinary magic: Resilience processes in development. *American Psychologist*, 56(3), 227–238.  
<https://doi.org/10.1037/0003-066X.56.3.227>
- Masten, A. S. (2014). *Ordinary magic: Resilience in development*. Guilford Press.

- Mendolia, S., Paloyo, A. R., & Walker, I. (2020). Heterogeneous effects of internet use on academic achievement: Evidence from a randomized control trial. *Economics of Education Review*, 76, 101982. <https://doi.org/10.1016/j.econedurev.2020.101982>
- Ministry of Education New Zealand. (2014). *Supporting children after the Christchurch earthquakes*. <https://www.education.govt.nz>
- Organisation for Economic Co-operation and Development. (2021). *A new benchmark for mental health systems: Tackling the social and economic costs of mental ill-health*. OECD Publishing. <https://doi.org/10.1787/4ed890f6-en>
- Paunesku, D., Walton, G. M., Romero, C., Smith, E. N., Yeager, D. S., & Dweck, C. S. (2015). Mind-set interventions are a scalable treatment for academic underachievement. *Psychological Science*, 26(6), 784–793. <https://doi.org/10.1177/0956797615571017>
- Pianta, R. C., Hamre, B. K., & Allen, J. P. (2012). Teacher–student relationships and engagement: Conceptualizing, measuring, and improving the capacity of classroom interactions. In S. L. Christenson, A. L. Reschly, & C. Wylie (Eds.), *Handbook of research on student engagement* (pp. 365–386). Springer. [https://doi.org/10.1007/978-1-4614-2018-7\\_17](https://doi.org/10.1007/978-1-4614-2018-7_17)
- Rutter, M. (2012). Resilience as a dynamic concept. *Development and Psychopathology*, 24(2), 335–344. <https://doi.org/10.1017/S0954579412000028>
- Schroder, H. S., Dawood, S., Yalch, M. M., Donnellan, M. B., & Moser, J. S. (2017). The role of implicit theories in mental health symptoms, emotion regulation, and hypothetical treatment choices in college



- students. *Cognitive Therapy and Research*, 41(5), 684–698.  
<https://doi.org/10.1007/s10608-017-9834-6>
- Sisk, V. F., Burgoyne, A. P., Sun, J., Butler, J. L., & Macnamara, B. N. (2018). To what extent and under which circumstances are growth mind-sets important to academic achievement? *Psychological Science*, 29(4), 549–571. <https://doi.org/10.1177/0956797617739704>
- Skaalvik, E. M., & Skaalvik, S. (2017). Dimensions of teacher burnout: Relations with potential stressors at school. *Social Psychology of Education*, 20(4), 775–790.  
<https://doi.org/10.1007/s11218-017-9391-0>
- Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, 5(1), Article 25338.  
<https://doi.org/10.3402/ejpt.v5.25338>
- Suldo, S. M., Thalji-Raitano, A., Hasemeyer, M., Gelley, C. D., & Hoy, B. (2016). Teacher support and adolescents' subjective well-being: A mixed-methods investigation. *School Psychology Review*, 45(3), 269–286. <https://doi.org/10.17105/spr45-3.269-286>
- Taylor, R. D., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child Development*, 88(4), 1156–1171.  
<https://doi.org/10.1111/cdev.12864>
- Torrente, C., Aber, J. L., & Shivshanker, A. (2015). The impact of school-

- based interventions on children's mental health in low- and middle-income countries: A meta-analysis. *Child Development*, 86(3), 560–576. <https://doi.org/10.1111/cdev.12340>
- Ungar, M. (2011). The social ecology of resilience: Addressing contextual and cultural ambiguity of a nascent construct. *American Journal of Orthopsychiatry*, 81(1), 1–17.  
<https://doi.org/10.1111/j.1939-0025.2010.01067.x>
- Volanen, M., Torppa, M., Hintsanen, M., & Jokela, M. (2025). Mindfulness-based interventions for enhancing adolescent mental health: A systematic review and meta-analysis. *Neuroscience & Behavioral Health*. <https://doi.org/10.1016/j.nbh.2025.05.003>
- Werner, E. E. (2013). What can we learn about resilience from large-scale longitudinal studies? In S. Goldstein & R. B. Brooks (Eds.), *Handbook of resilience in children* (pp. 87–102). Springer.  
[https://doi.org/10.1007/978-1-4614-3661-4\\_6](https://doi.org/10.1007/978-1-4614-3661-4_6)
- Werner, E. E., & Smith, R. S. (2001). *Journeys from childhood to midlife: Risk, resilience, and recovery*. Cornell University Press.
- World Economic Forum. (2020). *Schools of the future: Defining new models of education for the Fourth Industrial Revolution*.  
<https://www.weforum.org/reports/schools-of-the-future/>
- World Health Organization. (2020). *Mental health and well-being in schools: A review of the evidence and an agenda for action*. WHO Press. <https://www.who.int/publications/i/item/9789240003922>
- Yeager, D. S., & Dweck, C. S. (2012). Mindsets that promote resilience: When students believe that personal characteristics can be developed. *Educational Psychologist*, 47(4), 302–314.

<https://doi.org/10.1080/00461520.2012.722805>

Yeager, D. S., Romero, C., Paunesku, D., Hulleman, C. S., Schneider, B., Hinojosa, C., Lee, H. Y., O'Brien, J., Flint, K., Roberts, A., Trott, J., Greene, D., Walton, G. M., & Dweck, C. S. (2019). A national experiment reveals where a growth mindset improves achievement. *Nature*, 573(7774), 364–369.

<https://doi.org/10.1038/s41586-019-1466-y>

Youssef, C. M., & Luthans, F. (2012). Positive global leadership. *Journal of World Business*, 47(4), 539–547.

<https://doi.org/10.1016/j.jwb.2011.12.005>

Zenner, C., Herrnleben-Kurz, S., & Walach, H. (2014). Mindfulness-based interventions in schools: A systematic review and meta-analysis. *Frontiers in Psychology*, 5, 603.

<https://doi.org/10.3389/fpsyg.2014.00603>



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# Ready or Not? Conditions for Readiness of Sukhothai Province to Become a Self-Governing Province

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## Abstract

The independent study titled “Ready or Not? Preconditions for Sukhothai Province’s Readiness for Self-Governance” aims to examine the extent to which Sukhothai Province is prepared to establish itself as a self-governing administrative unit. The primary objective is to analyze the essential and sufficient preconditions for achieving self-governance at the provincial level. This is accomplished by comparing the current situation in Sukhothai with that of a “best-case” province—one that has already demonstrated a successful transition toward self-administration. The research employs documentary research as its main methodology, collecting and analyzing data from a variety of sources including books, academic articles, theses, research reports, television programs, video documentaries, and other relevant documents. These sources cover both domestic and international cases related to decentralization and the formation of self-governing provinces. The aim is to gain a comprehensive understanding of

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the contextual factors, structural requirements, and policy implications necessary for provincial autonomy.

Findings from the study indicate that the preconditions for becoming a self-governing province can be categorized into two types: necessary conditions and sufficient conditions. The necessary conditions consist of three main elements: (1) a governance structure or administrative framework that supports the decentralization of authority from the central government to local entities; (2) appropriate budget allocation from the central government, along with financial support for local administrative organizations; and (3) an independent system of personnel administration that operates free from central government control. The sufficient conditions also consist of three factors: (1) a relatively dense population with urban characteristics and active civic participation in local governance; (2) the availability of natural, economic, or cultural resources that can support economic growth and promote tourism; and (3) adequate provincial revenue, a sound economic structure, and the presence of well-developed infrastructure and public utilities. This study not only offers a detailed assessment of Sukhothai's readiness for self-governance but also provides a framework that can inform policymaking in the area of decentralization. It highlights both the progress and the gaps that need to be addressed in order for Sukhothai Province to fully realize the potential of autonomous administration. Ultimately, the findings may serve as a guide for government agencies and stakeholders seeking to promote effective and sustainable local governance in Thailand.

**Keywords:** Readiness, Self-governing provinces, Decentralization

## Introduction

The issue of decentralization has been a topic of national discourse in Thailand since the aftermath of the political unrest known as “Black May” in 1992. Since that time, political parties have repeatedly proposed policies advocating for the direct election of provincial governors as part of their electoral platforms. However, despite continued discussion and public interest, the direct election of provincial governors nationwide has yet to be implemented. Nevertheless, the policy of decentralization has evolved over time and began to take more concrete form following the promulgation of the 1997 Constitution of the Kingdom of Thailand, which marked a critical turning point in facilitating the decentralization of state power to the local level through legal and institutional reforms. The 1997 Constitution introduced a legal and operational framework that granted local administrative organizations increased autonomy in determining local governance policies, fiscal management, and human resource administration. It mandated that the central government must transfer authority to local governments, allowing them to manage their own affairs in accordance with the principles of participatory democracy. As a result, local administrative organizations were restructured to include locally elected councils and executives, reflecting the democratic will of the people. These developments culminated in the enactment of the Decentralization Plan and Procedures Act B.E. 2542 (1999), which further promoted the transfer of administrative functions and resources to local governments.

The core idea of decentralization lies in reducing the concentration of power held by the central government and transferring it to the local

level, thereby empowering local communities to manage economic development, utilize local resources effectively, and become more self-reliant—while respecting the aspirations of local citizens. Public awareness of and support for decentralization has grown significantly in recent years, especially following the 2022 Bangkok gubernatorial election, which reignited public debate and led to a widespread question: “If Bangkok residents can elect their governor, why can’t people in other provinces do the same?” This sentiment has catalyzed movements and campaigns such as “We’re All Voters: Provincial Governor Elections Must Happen” and “One Name to Unlock Local Government”, both of which advocate for nationwide elections of provincial governors.

These campaigns highlight longstanding inequalities between Bangkok and other provinces, particularly in terms of access to and quality of public services. Even within provincial areas, disparities exist between urban and rural communities. Such disparities underscore the broader issue: citizens across all regions of the country should enjoy equitable quality of life. With Thai society becoming increasingly politically conscious, there has been a notable rise in public scrutiny of the bureaucratic state, especially regarding its limitations in delivering effective public services and improving the well-being of local communities. The overly centralized administrative structure, characterized by rigid rules and limited local discretion, continues to hinder meaningful local development. Local administrative organizations, despite their official mandates, remain constrained in their ability to innovate and respond to local needs due to insufficient decentralization.

Within this context, the concept of a Self-Governing Province has emerged as a topic of academic and political debate. Advocates argue that

empowering provinces to manage their own affairs could lead to more efficient, responsive, and participatory governance. Yet, critics raise concerns about the readiness of local governments to assume such responsibility, pointing to factors such as limited budgets, inadequate administrative capacity, and the influence of local political interests. This ongoing debate has split public opinion: while some strongly support provincial self-governance, others caution against prematurely adopting such a model in the absence of sufficient readiness.

The key question thus becomes: What specific conditions must be met in order for a province to be considered ready for self-governance? This study was undertaken to explore that very question, focusing on Sukhothai Province as a case study. Sukhothai possesses several distinctive features, particularly in terms of its history, arts and culture. It is recognized as the first capital of Thailand and the origin of various aspects of Thai identity, such as the Thai script (Lai Sue Thai), the early concepts of free trade and governance, as evidenced by historical records found in the Ramkhamhaeng Inscription (Stone Inscription No. 1), which states, 'Whoever wishes to trade horses or cattle may do so freely.' Although Sukhothai is a small province with a relatively low population compared to Bangkok, Phuket, or Chiang Mai, it is considered to have valuable resources and assets that provide a strong foundation for becoming a self-governing province. The researcher examines the readiness conditions for provincial self-governance by analyzing successful examples of self-governing provinces in unitary states abroad—nations that share administrative similarities with Thailand. The study also considers domestic models that may serve as pilot provinces or prototypes for decentralized administration.

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Ultimately, the goal of this research is to contribute empirical data and conceptual clarity regarding the necessary conditions for provincial self-governance. It aims to provide a foundation for policy recommendations relevant to the case of Sukhothai and to serve as a reference for evaluating the readiness of other provinces that may seek to adopt a similar model in the future.

## **Research Objectives**

1.To identify and analyze the key preconditions that enable the establishment of a self-governing province, based on case studies of areas that have already successfully implemented such a model.

2. To examine the specific conditions related to the readiness of Sukhothai Province to become a self-governing administrative unit.

## **Research Scope**

### **1 Geographical Scope**

This study examines the Sukhothai's conditions to become a self-governing province, with a comparative analysis of the conditions found in areas that have already achieved self-governing province and those currently are in the process of striving to be self-governing province. The study draws upon cases from Japan, where the governmental and administrative structure aligns with the concept of self-governing provinces. It also examines international examples of regions that have successfully implemented self-governance, including Jeju Special Self-Governing Province in South Korea and South Tyrol in Italy. Additionally, it investigates areas in Thailand and

abroad that are in the process of transitioning towards self-governing status, namely Chiang Mai and Phuket Provinces.

## **2 Population Scope**

The population comprises books, research articles, theses, research reports, television programs, video documentaries, podcasts, and related documents concerning decentralization and self-governance. The materials were produced between 1992 and 2023. The researcher established three inclusion criteria to reduce bias, ensure specificity, and control the quality of the selected sources; 1) Type of sources must be the research reports, articles, or multimedia contents from a government agency or reputable organization. 2) Language of publication must be in Thai or English. 3) Content relevance must address two key topics: “readiness conditions for becoming a self-governing province” and “decentralization in the context of self-governance”. The focus is on empirical data or in-depth analysis.

## **3 Content Scope**

This research focuses on the readiness conditions for Sukhothai Province to become a self-governing province. The study references Japan's administrative model, which is aligned with the concept of provincial self-governance. It also includes examples from successfully self-governed regions abroad, such as Jeju in South Korea and South Tyrol in Italy, as well as domestic and international cases actively preparing for self-governance, specifically Chiang Mai and Phuket.

## **4 Time Scope**

The study was conducted over a period of one month (October–November 2023).

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## 5. Theoretical Framework

In this study, the researcher adopts a literature review framework based on two major conceptual approaches: the concept of Decentralization and the concept of the Self-Governing Province.

### 5.1 Analytical Framework on the Concept of Decentralization

Thailand operates as a unitary state, meaning that supreme governing authority is centralized at the national level. However, the central government may delegate certain powers to subordinate levels, such as local administrative organizations, regional courts, or provincial-level government agencies. In this regard, decentralization in a unitary state primarily involves administrative decentralization. For instance, the delegation of administrative powers from the central government to local administrative bodies, while legislative and judicial powers remain strictly centralized. Tanchai (2014) argued that decentralization not only enhances the authority of local government organizations but also promotes Thai democracy by empowering local people to participate in self-governance within their respective communities, which serve as the fundamental units of democratic development. Maolanon (2016) explains that the core principle of decentralization in a unitary state primarily emphasizes administrative decentralization—for example, the transfer of authority from the central government to local administrative organizations. However, legislative and judicial powers remain firmly centralized. This is characteristic of decentralization within the context of a unitary state. Nevertheless, there are notable cases of decentralization in other unitary countries that differ from the Thai model. For instance, in Japan, legislative powers have been granted to certain regions as part of a special form of regional governance.

Mektriratana (2008) further explains the principles of Japan's special autonomous region is the local governments as a form of decentralization from the central to local authorities. The central government grants administrative and legislative powers, allowing local areas greater self-management. This aims for flexibility and suitability for the specific context of each area. Japan's special local governments have unique governance models specific to their regions, such as the Tokyo Metropolis or the Osaka Metropolis Plan. These plans have administrative structures that differ from typical prefectures, for instance, by consolidating the powers of prefectural governments and city municipalities. Furthermore, establishing such a special administrative zone requires approval at multiple levels, including from the local government, the local populace through a referendum, and the National parliament. Japan's special autonomous regions have been established as experimental area for new policy initiatives—such as technology-related policies, free trade, or deregulation—with the aim of serving as pilot models for local economic development that can be applied to other regions. However, the core principle of special local governments lies in promoting local citizen participation. These governments emphasize enabling residents to play an active role in shaping the direction of their own communities, through activities such as electing local executives, participating in referendums, and engaging in local policy-making. This approach is grounded in the principle of local self-governance as enshrined in Articles 92 to 95 of the Japanese Constitution, which provide the legal foundation for the establishment of such special administrative zones. Yuvapurna (1960) categorized decentralization into two main forms:

5.1.1 Functional decentralization – the transfer of specific functions or responsibilities.

5.1.2 Territorial decentralization – based on political theory emphasizing electoral processes and self-governance within defined territorial boundaries.

This form of decentralization requires the establishment of local administrative organizations with independent executives and officers not under the command of central agencies. These organizations operate autonomously under the supervision (not command) of the central government. They are recognized as legal entities, have independent revenue sources, and can deliver public services using their own budget. Citizens have the right to elect their local council and executives. Suwanmala (1999) critically observed formulating a single set of policies intended to solve problems uniformly across all regions contradicts the complex realities on the ground. The centralized model of governance, which aims to standardize administrative practices nationwide, has proven ineffective in addressing the localized issues in each region remain unresolved by the central government. Karnchanaprakorn (2023) further advocates that the equitable decentralization of authority and fiscal resources to local governments can significantly enhance the quality of life for residents in provincial areas.

5.2 Analytical Framework on the Concept of the Self-Governing Province

The concept of a self-governing province is embedded in the 1997 Constitution of the Kingdom of Thailand, Chapter 5 on Fundamental State Policies, Section 78, which states that: “The State shall decentralize power to enable local authorities to be self-reliant and make their own

decisions regarding local affairs. It shall also promote local economic development, public utilities, infrastructure, and information systems throughout the country, as well as support provinces with readiness to become large-scale local administrative organizations, taking into account the will of the people in those provinces”. Based on this, the researcher defines a Self-Governing Province as a form of local administration independent from central government command, with elected provincial executives and councils. It possesses its own budget and personnel management, has full authority in policy-making, and autonomy in delivering public services and managing all aspects of provincial affairs—political, economic, social, cultural, environmental, and resource-related issues. The local population must also have mechanisms to scrutinize the performance of their elected leaders. Jirapongsuwan (2014) observed that in order to achieve self-governance at the provincial level, a genuine reform in power distribution is required—devolving power not only from the central government to local governments but further down to the people, communities, and civil society. Such a structure of decentralization will allow for the real establishment of self-governing provinces.

Wongsatayanont (2022), Chair of the Working Group on Civic Council for Phuket Province, states on Thai PBS TV feature – Scholars Propose Conditions for Provincial Self-Governance - advocates for Phuket to be recognized as a self - governing province in order to enhance local administrative efficiency and policy responsiveness. He advocated for leadership that is locally rooted and contextually informed, rather than centrally appointed officials who may lack an in-depth understanding of the province’s specific developmental needs. Phuket, in particular, stands out as

a province where over 90% of its economic output is derived from the tourism sector. Despite this, its five-year provincial development plan remains driven by directives from regional bureaucratic offices, with no clearly earmarked budget for tourism development, resulting in a significant misalignment between policy and local needs. Additionally, he highlighted the structural issue of administrative discontinuity, as provincial governors are subject to short period of approximately 2 to 4 years before being reassigned—undermining long-term policy implementation and institutional stability at the local level.

Yang et al. (2020) explain there are 5 key features of Jeju's Autonomy; 1) Self-Legislative Authority - Jeju can enact its own ordinances and regulations tailored to local needs—such as tourism, education, and environmental management—without requiring central approval. 2 ) Administrative Deregulation & Regional Specialization - Central government powers, including aspects of immigration (e.g., visa exemptions), may be devolved to Jeju, allowing it to operate as a Free International City and test innovative policies. 3) Control Over Personnel & Public Services - The province manages its own staff and local services—like education, healthcare, and policing—through autonomous police systems and independently-run schools. 4) Financial Autonomy - Jeju is empowered to collect local taxes, allocate its own budget, and receive a larger share of government revenues, supporting region-specific initiatives like digital innovation or environmental policies. 5) Decentralized Innovation Zone - Since its revamped status in 2006, over 4,600 administrative powers have been transferred to Jeju, allowing it to pilot cutting-edge policies in tourism, fintech, smart cities, and environmental sustainability.

Magliana (2000) states that South Tyrol has 6 factors to be an autonomy; 1) South Tyrol has held the special legal status of a “Special Autonomous Province” under the Statuto Speciale (Second Autonomy Statute) since 1972. This designation grants the province extensive legislative and executive powers, allowing it to operate independently from the central government in many key areas. 2) South Tyrol employs a balanced power-sharing system between the national and provincial governments. This includes the right to veto and the allocation of political positions based on the proportional representation of linguistic and ethnic groups within the province. 3) The region officially operates under a bilingual regime (German–Italian) and recognizes a third language, Ladin, in designated areas. This applies to place names, public documents, and government communications—demonstrating a strong commitment to linguistic equality and cultural inclusion. 4) High Degree of Fiscal Autonomy - The province retains up to 90% of local tax revenues, in accordance with the Milan Agreement of 2009. This financial independence enables South Tyrol to adequately fund locally-driven policies and development initiatives. 5) South Tyrol has its own Provincial Council (Landtag) and Provincial Government (Landesregierung), which are composed based on either democratic elections or proportional quotas that reflect the linguistic composition of the population. 6) The scope of the province’s authority is flexible and continuously evolving. It encompasses a wide range of sectors, including education, urban planning, environmental protection, transportation, tourism, and public procurement—allowing local governance to adapt to changing developmental needs and contexts. A comparative analysis of conditions for attaining self-governing provincial status across various regions



clearly reveals several core enabling factors. These include the presence of a supportive legal framework that legitimizes autonomous governance, institutional capacity in fiscal and budgetary management, competent administration of human resources, and the practical implementation of decentralization policies.

This study investigates the concept through examples from countries with unitary systems and administrative structures compatible with provincial self-governance. Key cases include: Japan (a unitary state with administrative models aligned with provincial self-governance); South Korea (Jeju Special Self-Governing Province); Finland (Åland Islands); Italy (South Tyrol), as well as Thai provinces with strong movements toward self-governance, namely Chiang Mai and Phuket. The aim is to compare these with Sukhothai Province in order to assess its readiness to become a self-governing province.

## **Research Methodology**

### **1. Population**

The population used in this study includes books, research articles, theses, research reports, television programs, video documentaries, podcasts, and various other documents related to decentralization and the establishment of self-governing provinces. The selected materials consist of research articles, research reports, and theses produced between 1992 and 2023.

### **2. Research Instrument**

The researcher developed a documentary data recording form to systematically collect information from the documents. The form includes the

following key elements: Title/Program Name; Researcher/Host/Participants; Year of Research/Broadcast; Research Findings; Summary of Key Ideas; Source of Research or Broadcast.

### **3. Data Collection**

The researcher personally collected the documents using the following procedures:

3.1 Searched for research, articles, books, television programs, podcasts, and other relevant documents from online databases both domestically and internationally.

3.2 Thoroughly read, viewed, or listened to the entire content of each document.

3.3 Recorded the information in the data recording form.

3.4 Analyzed the information based on the recorded data.

### **4. Data Analysis**

The data obtained from various documentary sources were analyzed qualitatively. The study use comparative analyze the documentary data. The analysis aimed to identify the readiness factors for the establishment of self-governing provinces using a descriptive approach.

## **Research Results**

The study reveals that the readiness for establishing a self-governing province can be classified into two categories: necessary conditions and sufficient conditions. The necessary conditions refer to the fundamental prerequisites that must be in place before a province can be considered for self-governance. Without these, the establishment of a self-governing province would not be feasible. In contrast, the sufficient conditions are

those that enhance the effectiveness, sustainability, and operational success of self-governance once it is established.

## **1. Necessary Conditions**

The findings identify three primary necessary conditions:

### **1.1 Governance Structure and Legal Framework**

There must be an administrative structure that supports the decentralization of authority from the central government to local administrative bodies. This includes favorable government policies and legal mechanisms that enable local administrative organizations to exercise autonomy. The central government must transfer functional responsibilities to local authorities, allowing self-governing provinces to independently formulate development plans and manage public services—either solely or in collaboration with other agencies if inter-organizational cooperation is required. While the central government may support local service provision through innovation, technology, or knowledge, it must not assume control over local operations. Self-governing provinces should also have the authority to engage in commercial activities independently or in partnership with public agencies or state enterprises located within the province. Additionally, they must possess the ability to review and revise outdated or unnecessary laws to improve administrative efficiency and reduce public burdens—known as regulatory guillotine. They should also be empowered to manage and preserve local resources, traditional culture, customs, and indigenous knowledge.

### **1.2 Budget Allocation from the Central Government**

There must be an equitable and appropriate allocation of national funds to provinces, with fiscal support particularly directed toward

those with lower revenue-generating capacities. Self-governing provinces must be authorized to collect local taxes, fines, and fees in accordance with their specific policy objectives. A portion of the collected revenue shall be retained as provincial income, while another portion must be remitted to the national treasury.

### 1.3 Independent Human Resource Management:

Self-governing provinces must be granted autonomy in recruiting and managing local personnel. Local government agencies should be able to appoint civil servants and staff under a merit-based system, prioritizing qualifications and competencies. This allows provinces to develop a workforce responsive to local needs, independent from central government influence.

## 2. Sufficient Conditions

In addition to the foundational requirements, the study identifies three sufficient conditions that enhance the operational success of a self-governing province:

### 2.1 Population Density and Civic Participation

A self-governing province should possess a significant urban population and a strong culture of civic engagement. Local citizens must be empowered as active political agents, particularly through the direct election of the provincial governor. Mechanisms should be in place for participatory governance, such as participatory budgeting, where residents directly influence budget decisions, and public oversight through civic councils that monitor provincial administration.

### 2.2 Local Resources and Economic Potential

Provinces must have access to resources that can support economic growth and tourism. These may include natural resources (forests, minerals, agricultural goods, natural attractions), cultural heritage, distinctive local traditions, culinary identities, and intellectual assets such as geographical indication (GI) products or local innovations. Such advantages contribute to economic circulation and self-sufficiency within the province.

### 2.3 Revenue and Infrastructure Readiness

The province's Gross Provincial Product (GPP) and existing public infrastructure are key indicators of readiness. Industrial provinces with established industrial estates, manufacturing facilities, and robust infrastructure are more capable of managing public services efficiently under a self-governance model. Furthermore, self-governing provinces should retain full authority to collect and manage local taxes and fines. For non-local taxes, a defined portion is to be retained at the provincial level, while the remainder must be transferred to the national government. Provincial revenue includes both tax-based income (e.g., local taxes) and non-tax income (e.g., government grants, service fees).

## Discussion of Results

### 1. Thailand's Unitary State Structure and Limitations of Decentralization

Although Thailand is constitutionally defined as a unitary state, it has undergone a process of decentralization from the central government to local authorities. However, this decentralization remains incomplete in practice. Despite legal provisions specifying that central and regional administrative bodies should merely supervise—not command—local administrations, in reality, local governments remain under the control of

the central government. The powers of local administrative organizations (LAOs) are narrowly defined under the Decentralization Plan and Procedures Act B.E. 2542 (1999), Sections 16–18, limiting their authority strictly to the scope outlined in the law. Consequently, if local governments wish to undertake new public services not explicitly authorized by law, they are legally prohibited from doing so—even when such services benefit the public. Conversely, the central government retains broad authority and may also implement overlapping services within local jurisdictions. For example, although the Bangkok Metropolitan Administration (BMA) is responsible for the BTS Skytrain system, the Mass Rapid Transit Authority of Thailand (MRTA), under the Ministry of Transport, also operates urban rail systems in the same area. This duplication undermines local autonomy and prevents Bangkok from managing and benefiting solely from public transport services within its territory.

## **2. Central Budget Allocation Practices**

The allocation of funds from the central government to provincial and local administrative organizations is determined by national policy and managed by the Department of Local Administration (DLA) under the Ministry of Interior. This process relies primarily on geographic size and registered population, with insufficient consideration for unregistered or long-term migrant residents who significantly increase service demands in many provinces. Furthermore, the allocation system fails to consider each province's revenue-generating capacity. Provincial revenue is divided into two parts: a portion retained as local income and a portion remitted to the Ministry of Finance as national income. For instance, Phuket Province, which ranks among the top ten in gross provincial product (GPP), receives relatively

limited funding due to its officially registered population of approximately 418,000—despite a de facto population closer to 531,000 when accounting for long-term residents.

### **3. Human Resource and Patronage in Local Administration**

Local administrative organizations have their own personnel and civil service recruitment systems. While the selection process is nominally based on merit, patronage networks continue to influence hiring practices. Although not universal, such practices persist due to loopholes in the autonomy of local recruitment systems, weakening the perceived legitimacy and efficiency of public personnel management.

### **4. Population Density and Urbanization in Sukhothai Province**

Sukhothai Province has a total population of 581,260 across an area of 6,596.09 square kilometers, resulting in a population density of approximately 88 persons per square kilometer, ranking it 51st nationwide. Urbanization is concentrated in Mueang Sukhothai District, with partial urban characteristics extending into nearby districts such as Si Samrong and the geographically largest district, Si Satchanalai. The remaining areas largely retain rural characteristics, which may pose challenges for achieving urban-style participatory governance and service delivery.

### **5. Civic Engagement and Political Participation**

During the 2023 general election, 354,934 eligible voters in Sukhothai exercised their right to vote, accounting for 74% of eligible voters—slightly below the national average of 75.22%. Although this suggests a reasonably engaged electorate, local political participation remains relatively weak. There is limited civic mobilization, and local governance is often perceived to be influenced by political dynasties, with

several prominent political families active in the province. Civil society groups and mechanisms such as civic councils are still underdeveloped, reducing the potential for bottom-up political accountability and grassroots political innovation.

## **6. Cultural and Economic Resource Potential**

Sukhothai possesses abundant cultural and natural resources that can support sustainable economic development and tourism. Known historically as the cradle of the Thai alphabet and the reign of King Ramkhamhaeng, Sukhothai is also famous for the Loy Krathong and Candle Festival, inspired by the legend of Nang Noppamas. The province boasts rich cultural heritage, including Sukhothai-style Buddhist art, architecture, and sculpture, with key tourist attractions such as Sukhothai Historical Park and Si Satchanalai Historical Park, both designated as UNESCO World Heritage Sites. Natural sites like Ramkhamhaeng National Park and Khao Luang further enrich its eco-tourism appeal. Community-based tourism is also prominent, such as Ban Na Ton Chan Homestay in Si Satchanalai, which offers visitors an immersive local experience including signature dishes like Khao Perb and Sukhothai-style noodles. The province also promotes geographical indication (GI) products, such as Sangkhalok ceramics and the locally cultivated “Monthon Phra Ruang” durian, exclusive to Ban Tuek subdistrict, as emerging economic drivers.

## **7. Income and Infrastructure Readiness**

According to the Office of the National Economic and Social Development Council, Sukhothai's gross provincial product is valued at 48.739 billion baht, with a per capita income of 80,170 baht per year in 2021, ranking it 62<sup>nd</sup> nationwide. The provincial economy is driven primarily by the



service sector, followed by agriculture and industry. Despite having basic public services such as electricity, water supply, healthcare, and education, the infrastructure remains underdeveloped in certain areas. Notably, the province lacks a functional public transportation system, which limits convenience for both residents and tourists and may hinder broader economic development under a self-governance model.

When comparing the readiness conditions between provinces that have successfully established self-governance and the current conditions in Sukhothai Province, it becomes clear that while Thailand has made progress in decentralizing authority to local administrative organizations, this decentralization remains incomplete. The central government has not yet granted full autonomy to local entities. Although local governments have some authority, they continue to operate under the constraints imposed by the central administration.

In terms of fiscal capacity, budget allocations are made without consideration of critical factors such as the economic disparities between local administrative organizations and the inclusion of long-term unregistered residents in the population count. This results in an unequal distribution of financial resources. While local personnel and civil servants are under the jurisdiction of local administrative organizations, and recruitment systems are in place, the overarching control still limits full independence in human resource management.

Regarding conditions that would sufficiently support self-governance, Sukhothai Province has relatively low population density, with urbanization concentrated only in the districts of Mueang Sukhothai, Si Samrong, and Si Satchanalai. Much of the province still retains a

predominantly rural character. Civic participation remains modest, with limited grassroots political activity and public engagement in local decision-making processes. Although basic public services such as electricity, water supply, healthcare, and education are available, the absence of a public transportation system represents a significant gap in infrastructure—an essential component for the effective and sustainable operation of a self-governing province.

Nonetheless, Sukhothai holds a distinct advantage in terms of its rich local resources, including natural assets, cultural heritage, and indigenous knowledge. These elements offer strong potential for economic development and tourism that could support a self-reliant provincial economy. If the central government adopts policies that genuinely promote full decentralization, Sukhothai has the potential to become one of the leading provinces capable of successfully transitioning into a self-governing administrative model.

## **Recommendations**

### **1. Policy Recommendations**

1.1 The legal framework should be amended to grant local administrative organizations (LAOs) exclusive authority to provide all public services within their respective jurisdictions. The role of the central and regional administrations should be limited to supporting functions. Specifically, they should only intervene upon formal request from the LAOs—such as when local resources or personnel are insufficient. This change would establish the legal exclusivity of LAOs in delivering public services and managing local commercial activities.

1.2 The criteria for budget allocation to self-governing provinces and LAOs should be revised to ensure clarity and equity. Allocation decisions should take into account income disparities and the economic base of each province and its local administrative units. In addition, the population count used in budgeting should reflect both registered residents and long-term unregistered residents to better represent the actual service demands in each province.

1.3 Civic participation in local governance should be actively promoted. This includes advocating for the establishment of a Civic Council (Sapha Prachachon) in Sukhothai Province to enhance political engagement and to provide a formal mechanism for monitoring and holding local administrative organizations accountable.

1.4 The government should prioritize investment in infrastructure-based public services that serve both the functional needs of the population and the revenue-generating capacity of the province. Moreover, the tourism sector should be strategically supported, given Sukhothai's rich resources in natural heritage, cultural identity, and local wisdom. These assets are instrumental in fostering sustainable economic development and enhancing Sukhothai's readiness to function as a self-governing province.

## **2. Suggestions for Future Research**

Due to the limited one-month timeframe for conducting this study, it was not possible to collect and analyze all relevant data. Future research should allocate more time for comprehensive data collection and analysis. Moreover, considering the dynamic nature of Thailand's political context, future studies should incorporate updated political developments

and consult a wider range of literature and sources to ensure accuracy and depth.

## References

- Jirapongsuwan, S. (2012). *Self-governing province*. Retrieved October 6, 2023, from [http://wiki.kpi.ac.th/index.php?title=จังหวัดจัดการตนเอง#cite\\_ref-5](http://wiki.kpi.ac.th/index.php?title=จังหวัดจัดการตนเอง#cite_ref-5)
- Karnchanaprakorn, S. (2023, October 4). *Summary of key points: Why sign the petition for nationwide gubernatorial elections*. Retrieved October 4, 2023, from <https://waymagazine.org/provincial-governor-vote/>
- Magliana, M. (2000). *The Autonomous Province of South Tyrol : A Model of Self-Governance?*. Europäische Akademie Bozen.
- Maolanon, P. (2016, August 20). *What is a self-governing province in the context of Japan?*. <https://www.csdi.or.th/2016/08/>
- Mektriratana, N. (2008). Decentralization and special administrative area management: A study of the United Kingdom and Japan. *Rattasartsarn*, 29(special edition), 81-126.
- Suwanmala, C. (1999). *Who should provide public services: Central government or local government?*. Thailand Research Fund.
- Tanchai, W. (2014). *Decentralization and democracy in Thailand*. King Prajadhipok's Institute.
- Wongsatayanont, C. (2022). *Scholars propose conditions for provincial self-governance* [TV feature interview]. Thai PBS. <https://www.youtube.com/watch?v=tzSgSBYLMKo>
- Yang, D., Oh, N., & Kim, S. (2020). Completion of Korean decentralization

model through the success of Jeju special self-governing province  
- lesson and future of Jeju special self-governing province. *World  
Environment and Island Studies*, 10(4), 165–176.

Yuvapurna, C. (1960). *Centralization and decentralization in Thai  
administrative law*. Local Printing House.



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# Public Participation in Local Development: A Case Study of Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province

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## Abstract

This study aims to: (1) examine the level of public participation in local development within the context of Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province; (2) identify factors associated with public participation in local development within the same community; and (3) propose strategies to enhance public participation in local development. The study adopts a quantitative research methodology. The target population for the study was determined based on the following criteria: (1) individuals residing in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province; (2) individuals aged between 30 and 60 years; and (3) individuals holding community positions such as village headmen, assistant village headmen, assistant village headmen for security affairs, presidents and members of village health volunteer groups, community volunteers, caregivers, members

of the Subdistrict Administrative Organization (SAO) Council, subdistrict agricultural extension officers (soil doctors), members of the Village Fund, women's groups, civil defense volunteers, and public school teachers.

The research instrument used was a questionnaire developed by the research team, comprising three sections: Section 1 – general demographic information of the respondents; Section 2 – questions related to participatory communication; and Section 3 – questions related to public participation in local development. Data collection was conducted from February to August 2024. Data analysis was performed using statistical software designed for public administration research, applying frequency distribution, percentage, mean, standard deviation, and Pearson's correlation coefficient ( $r$ ). Research Findings

1. The overall level of public participation in local development in Ban Lung Community was found to be high ( $M = 4.17$ ,  $S.D. = 0.68$ ). When disaggregated by dimensions, the highest mean score was found in cooperation-building ( $M = 4.29$ ,  $S.D. = 0.68$ ), followed by empowerment of the public ( $M = 4.18$ ,  $S.D. = 0.70$ ), information dissemination ( $M = 4.17$ ,  $S.D. = 0.80$ ), consultation ( $M = 4.12$ ,  $S.D. = 0.79$ ), and participatory engagement ( $M = 4.10$ ,  $S.D. = 0.77$ ), respectively.

2. The factor of participatory communication was found to be significantly correlated with public participation in local development ( $r = 0.830$ ), at the 0.01 level of statistical significance. When analyzed by dimension, the following correlations were identified: Sender:  $r = 0.796$ , Message content:  $r = 0.845$ , Communication channels:  $r = 0.838$ , Receiver:  $r = 0.876$ . These results indicate that all components of the communication

process contribute meaningfully to the enhancement of public participation in local development.

3. Based on the findings, the research proposes strategic recommendations to enhance public participation in local development in Ban Lung Community, comprising: (1) strengthening the role of the sender; (2) improving the clarity and relevance of the message content; (3) diversifying and optimizing communication channels; and (4) promoting active engagement among receivers in the communication process.

These findings reinforce the significance of participatory communication as a vital mechanism for promoting civic engagement in local development efforts and ensuring inclusive governance at the community level.

**Keywords:** Public Participation, Local Development, Distribution of opportunities

## Introduction

Local governance is an essential and significant form of administration in the political context, as it provides opportunities for public involvement and represents the level of government that is closest to the people (Constitution Drafting Committee, 2016). In the past, Thai citizens had limited opportunities to participate in political and administrative affairs. However, with the global trend toward democratization, Thailand has undergone political reforms, leading to a heightened awareness among citizens of their rights, freedoms, and roles in political participation. This transformation is clearly reflected in the Constitution of the Kingdom of Thailand (Phra Mahawiset Kantadhammo, 2020, p. 48). Today, local



administration has increasingly incorporated citizen participation in governance and development processes. Local leaders are elected directly by the people, enabling them to address community-specific issues more effectively and respond directly to the needs of their constituencies (Chaiamnatt, 2017).

Local development aims to improve the quality of life of the people, with active and meaningful participation from local citizens. Ideally, development initiatives should originate from within the community itself (Thongwitthaya, 2001, pp. 23–25). The level of efficiency and effectiveness of local development efforts largely depends on the extent of citizen participation. Kromthong (2014) has emphasized that modern development must be driven by local participation, which includes creating opportunities and enabling conditions for all community members to engage in development activities. This inclusive engagement ensures equitable access to the benefits of development (Kongyong, 2002, p. 701).

Citizen participation serves as a mechanism to decentralize opportunities for people to contribute to decision-making processes, express opinions, provide recommendations, participate in planning and implementation, and exercise oversight through direct engagement (Sribuaiaam, 1997). However, current levels of participation remain limited. Research conducted by Phra Thawatchai Santidhammo (2018) identified challenges related to the lack of public engagement in development processes, highlighting the necessity for greater cooperation from citizens. Kromthong (2014, p. 13) also reaffirmed that citizen participation is central to successful local development, contributing to both community solidarity and stability.

According to Phra Thawatchai Santidhammo (2018) study, public participation is critical for sustainable local development, though many communities still face problems arising from insufficient engagement. Multiple factors contribute to successful development, but participation is one of the most influential. Citizens play a vital role as the central actors in development, helping to ensure that local initiatives align with community needs and aspirations. Kromthong (2014, p. 12) further emphasized that the knowledge and understanding of local people about development processes are fundamental to identifying and solving problems effectively. Development strategies that foster genuine public participation are more likely to be practical, sustainable, and responsive to real needs.

Given the importance of citizen engagement, this study—Public Participation in Local Development: Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province—was conducted to examine the level of public participation in local development and to identify the key factors that influence such participation. The findings are intended to serve as a foundation for developing effective strategies to promote citizen involvement in local development processes. Ultimately, the goal is to establish participatory models that are not only practical and sustainable but also capable of addressing real community issues and contributing to long-term development outcomes.

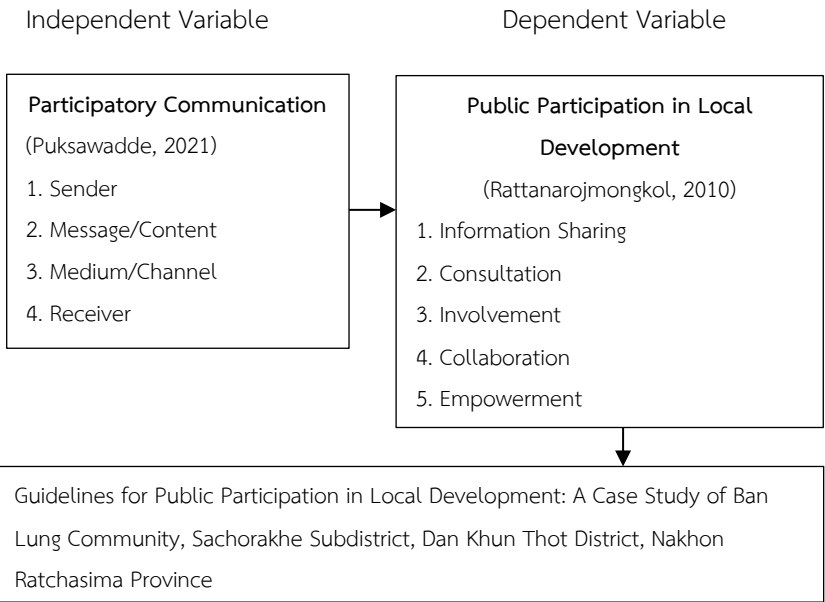
## Research Objectives

1. To examine the level of public participation in local development in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province.

- 2. To investigate the factors associated with public participation in local development in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province.
- 3. To propose strategies for enhancing public participation in local development in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province.

Research Scope

1. Conceptual Framework



2. Research Hypothesis

Participatory communication—comprising sender, message content, communication channels, and receiver—is correlated with public participation in

local development: A case study of Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province.

## **Research Methodology**

### **1. Population**

The population in this study was determined based on the following criteria: (1) individuals residing in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province; (2) individuals aged between 30 and 60 years; and (3) individuals holding specific community positions, including: village headmen, assistant village headmen, assistant village headmen for public security, presidents and members of the village health volunteer group (VHVs), community volunteers, community caregivers, members of the Subdistrict Administrative Organization Council (SAO Council), subdistrict soil doctors, members of the Village Fund, women's groups, civil defense volunteers, and public school teachers. In total, the population consisted of 85 individuals.

### **2. Sample**

The sample group for this study comprised residents of Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. A total of 70 individuals were selected as the sample. The sample size was calculated using Taro Yamane's formula, with a margin of error set at 0.05.

### **3. Sampling Method**

The researchers employed probability sampling, specifically simple random sampling, with the following steps:

In the first step of the sampling process, the researchers assigned numerical codes to individuals holding community leadership positions in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. A total of 13 positions were identified, and a corresponding number of labeled slips were prepared to represent each role. Specifically, one slip was assigned to the village headman, two slips to assistant village headmen, and one slip to the assistant village headman responsible for public security. One slip was allocated to the president of the village health volunteer group (VHVs), while sixteen slips were prepared for members of the VHVs. One slip was designated for a member of the Subdistrict Administrative Organization (SAO) Council, and two slips for community caregivers. Additionally, thirty slips represented community volunteers, one slip was designated for the subdistrict soil doctor, and nine slips were assigned to members of the Village Fund. Fifteen slips were allocated to members of the women's group, two slips for civil defense volunteers (Or Por Por), and four slips for public school teachers. In total, 85 labeled slips were created, each representing one eligible individual from the study population.

In the second step, the researchers thoroughly mixed all 85 labeled slips to ensure an even and random distribution within the container. Following this, the slips were randomly drawn one by one until the required sample size of 70 individuals—each holding a designated community position—was reached.

#### **4. Variables and Levels of Measurement**

The variables used in this research were derived from a synthesis of theoretical concepts and findings from relevant literature. Based on this

review, the research team identified the variables and their levels of measurement as follows:

#### 4.1 Independent Variable and Measurement

The independent variable in this study is participatory communication. This variable was assessed based on the respondents' opinions through the questionnaire item: "To what extent do you agree with participatory communication in terms of the sender, message content, communication channels, and receiver?" The variable was measured using an interval scale. For analytical purposes, the scores from the individual items were summed to form a composite score, ranging from 12 to 60. These total scores were then categorized into three levels of participatory communication using group-referenced criteria as follows: Low level scores ranging from 12 to 28, Moderate level scores ranging from 29 to 45, High level scores ranging from 46 to 60.

This classification enabled the researchers to interpret the respondents' overall level of participatory communication and analyze its relationship with public participation in local development.

#### 4.2 Dependent Variable and Measurement

The dependent variable in this study is public participation in local development. This variable was assessed through respondents' self-reported levels of agreement with various aspects of participation, including information sharing, consultation, involvement, collaboration, and empowerment. The variable was measured using an interval scale, and total scores from the relevant questionnaire items ranged from 15 to 75 points. To facilitate interpretation, the researchers categorized the scores into three levels of public participation. A low level of participation was defined as a

total score ranging from 15 to 35 points, indicating minimal engagement in local development activities. A moderate level corresponded to scores ranging from 36 to 56 points, reflecting occasional or partial involvement. A high level of participation was defined as scores ranging from 57 to 75 points, suggesting strong and consistent engagement in all key areas of local development.

This classification allowed for a clearer understanding of how actively the community members participated and supported further analysis of the relationship between participatory communication and levels of public engagement.

## **5. Methods and Instruments for Data Collection**

### **5.1 Data Collection Procedures**

The data collection in this study was conducted by the principal researchers along with a team of five members. The process involved administering questionnaires to a sample group of 70 community members who held various positions in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. The procedures were carried out as follows:

#### **1) Preparation of the Research Team**

Prior to data collection, a preparatory meeting was organized to ensure a shared understanding among the research team regarding each step of the data collection process. During the meeting, the structure and purpose of the questionnaire were thoroughly explained to ensure consistency and clarity in the administration of the instrument.

#### **2) Data Collection Procedures**

The research team began by studying the travel routes to the target community to facilitate timely and efficient access to the area. Upon arrival, the team introduced themselves to the local community, explained the objectives of the study, and scheduled appropriate times to conduct the survey with each respondent. Preparation for fieldwork included assembling the research team, arranging transportation, and organizing the questionnaires required for distribution.

## 5.2 Research Instrument

The instrument used for data collection in this study was a questionnaire, which was developed and structured into three main sections, as follows:

### **Section 1:** General Information of the Respondents

This section included closed-ended questions designed to gather demographic data. It consisted of the following items:

- 1) Gender – A closed-ended question with two response options.
- 2) Age – A closed-ended question with three response options.
- 3) Educational level – A closed-ended question with six response options.
- 4) Occupation – A closed-ended question with six response options.

### **Section 2:** Participatory Communication

This section aimed to measure the level of participatory communication, consisting of Likert scale items with five response levels: Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree. The section was organized into four dimensions:

- 1) Sender – 3 items rated on a 5-point Likert scale.
- 2) Message Content – 3 items rated on a 5-point Likert scale.



3) Communication Channels – 3 items rated on a 5-point Likert scale.

4) Receiver – 3 items rated on a 5-point Likert scale.

### **Section 3: Public Participation in Local Development**

This section consisted of items designed to assess the level of public participation among members of Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. All questions were structured using a 5-point Likert scale, with the following response options: Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree. The section included five key dimensions of public participation, with three items under each dimension:

1. Information Sharing – 3 items measured on a 5-point Likert scale.
2. Consultation – 3 items measured on a 5-point Likert scale.
3. Involvement – 3 items measured on a 5-point Likert scale.
4. Collaboration – 3 items measured on a 5-point Likert scale.
5. Empowerment – 3 items measured on a 5-point Likert scale.

Each of these dimensions reflects a key component of community-level participation in local development and contributes to the overall scoring and analysis of the dependent variable.

### **5.3 Instrument Construction**

The development of the research instrument followed a systematic process, as outlined below:

1) The researchers began by reviewing relevant literature, including academic books, articles, and prior research studies related to public participation in local development. This review informed the conceptual framework, research scope, and the construction of the instrument.

2) Based on the literature review, the researchers established a conceptual framework for public participation in local development.

3) Questionnaire items were drafted in alignment with the conceptual framework, ensuring consistency with the research objectives, key content areas, and overall structure of the instrument.

4) The questionnaire was constructed to meet the study's objectives and content scope under the supervision of an academic advisor.

5) The draft questionnaire was then submitted to the advisor for review to assess content validity and to identify any issues regarding item clarity and alignment with the objectives, definitions, and target population. Subsequently, the revised version was subjected to a series of quality assurance processes.

6) Content Validity was assessed by consulting the advisor, who reviewed the questionnaire items to ensure alignment with the intended content. Revisions were made accordingly.

7) Construct Validity was examined by evaluating whether the questionnaire items reflected the theoretical constructs under investigation. This was done through discussions with the academic advisor.

8) Reliability Testing was conducted to assess internal consistency. The revised questionnaire was pilot tested with 30 individuals holding community positions in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. The results were then analyzed to calculate the reliability coefficients for the overall instrument, each section, and each item. The reliability was assessed using Cronbach's Alpha, and the full questionnaire yielded a coefficient of 0.927,

indicating a high level of reliability. The reliability coefficients for each dimension are presented in Table 1

**Table 1**  
*Reliability Coefficients of the Questionnaire*

Section / Item	Cronbach's Alpha Coefficient
<b>Section 1: Participatory Communication</b>	0.850
Message Sender	0.504
Message Content	0.617
Communication Channels	0.504
Message Receiver	0.522
<b>Section 2: Public Participation in Local Development</b>	0.902
Information Sharing	0.749
Consultation	0.677
Involvement	0.753
Collaboration	0.435
Empowerment	0.587
Overall Reliability	<b>0.927</b>

9) Revisions and improvements were made based on feedback from the academic advisor. These revisions addressed content accuracy, language clarity, and the appropriateness of wording used in the interview questions. Once all corrections had been completed and validated, the finalized version of the interview schedule was administered to the target population.

6. Data Processing and Analysis

The research team processed the collected data by first reviewing and verifying the completeness of the interview responses. Each item

response was then coded systematically and entered into a computer for statistical analysis using the Statistical Package for the Social Sciences (SPSS for Windows). The analysis was conducted in two parts, as follows:

#### 6.1 Univariate Analysis

This level of analysis aimed to examine the characteristics of the population under study, analyzing one variable at a time across various attributes. Descriptive statistics—such as frequency, percentage, mean, and standard deviation—were employed to summarize and present the data using SPSS.

After computing the means, the data were grouped into three categories to interpret levels of responses based on a five-point Likert scale (ranging from 1 to 5). The criteria used for interpretation were as follows: High level: Mean scores between 3.68 – 5.00; Moderate level: Mean scores between 2.34 – 3.67; Low level: Mean scores between 1.00 – 2.33.

#### 6.2 Bivariate Analysis

This level of analysis involved examining the relationships between variables using a correlation matrix. Specifically, it was employed to test hypotheses regarding the relationship between the independent variable (participatory communication) and the dependent variable (public participation in local development). The analysis utilized the Pearson correlation coefficient to measure the strength and direction of relationships between variables, processed using SPSS for Windows.

### Research Results

The study on public participation in local development: A case study of Ban Lung Village, Sachorakhe Subdistrict, Dan Khun Thot District,

Nakhon Ratchasima Province. The research team presents the results of data analysis in four sections as follows.

### Section 1: Level of Public Participation in Local Development

This study on public participation in local development, conducted in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province, collected data from a total of 70 respondents. The demographic characteristics of the respondents included gender, age, education level, and occupation.

Regarding gender, 24 respondents (34.30%) were male, while 46 respondents (65.70%) were female. The majority were aged between 41–50 years (36 respondents or 51.40%), followed by 28 respondents aged 51–60 years (40.00%) and 6 respondents aged 30–40 years (8.60%). In terms of educational attainment, most respondents had completed primary education or below (29 individuals or 41.40%). Others had completed lower secondary education (20 individuals or 28.60%), upper secondary education (16 individuals or 22.90%), and bachelor's degrees (5 individuals or 7.10%). Occupationally, the majority of respondents were community volunteers (24 individuals or 34.30%), followed by village health volunteers (12 individuals or 17.10%), members of women's groups (10 individuals or 14.30%), and public school teachers (4 individuals). One respondent was a village headman (1.40%). Other occupations included assistant village headmen, peacekeeping assistants, community caregivers, SAO council members, subdistrict soil doctors, members of the Village Fund, and civil defense volunteers. This group comprised 19 individuals (27.10%), including: 9 members of the Village Fund (12.90%); 2 civil defense volunteers (2.90%); 2 community caregivers (2.90%); 1 assistant village headman (1.40%); 1

peacekeeping assistant (1.40%); 1 SAO council member (1.40%); 1 subdistrict soil doctor (1.40%); 1 president of the village health volunteer group (1.40%); 1 president of the women's group (1.40%).

The results regarding the level of public participation in local development focused on five dimensions: information sharing, consultation, involvement, collaboration, and empowerment. The detailed statistical results are presented in Table 2

**Table 2**

*Percentage of Ban Lung Community Members by Level of Public Participation in Local Development*

Level of Public Participation	Percentage (%)
Low (Score between 15–35 points)	1.40
Moderate (Score between 36–56 points)	20.00
High (Score between 57–75 points)	78.60
Total	100.0

As shown in Table 2, the majority of residents in Ban Lung Community demonstrated a high level of participation in local development (score between 57–75 points), accounting for 78.60% of the total. This was followed by 20.00% at a moderate level of participation (score between 36–56 points), and only 1.40% at a low level of participation (score between 15–35 points), respectively.

**Table 3**

*Mean and Standard Deviation of Public Participation in Local Development by Dimension*

Public Participation in Local Development	$\bar{x}$	S.D.	Interpretation
Information Sharing	4.17	0.80	High

Public Participation in Local Development	$\bar{x}$	S.D.	Interpretation
Consultation	4.12	0.79	High
Involvement	4.10	0.77	High
Collaboration	4.29	0.68	High
Empowerment	4.18	0.70	High
Total	4.17	0.68	High

According to Table 3, the overall level of public participation in local development was found to be high, with a mean score of 4.17 and a standard deviation of 0.68. When examined by individual dimensions, the highest average score was observed in the collaboration dimension ( $\bar{x}$  = 4.29, S.D. = 0.68), indicating that community cooperation was the most prominent aspect of participation. This was followed by empowerment ( $\bar{x}$  = 4.18, S.D. = 0.70), information sharing ( $\bar{x}$  = 4.17, S.D. = 0.70), consultation ( $\bar{x}$  = 4.12, S.D. = 0.79), and involvement ( $\bar{x}$  = 4.10, S.D. = 0.77), respectively. All dimensions were interpreted as reflecting a high level of participation.

1. Information Sharing

When examining individual items under the dimension of information sharing related to public participation in local development, the findings revealed that most responses were at a high or very high level. The data show that a significant proportion of respondents actively provided accurate information to the Subdistrict Administrative Organization (SAO) of Sachorakhe for the purposes of jointly developing local development plans and engaging in mutual knowledge exchange. This behavior was reported at high to very high levels by 78.6% of participants. The second most frequent behavior was planning and cooperating in solving problems within the subdistrict, reported at high to very high levels by 71.4% of respondents.

In terms of mean scores for information sharing, the highest-rated item was “Providing accurate information to the SAO of Sachorakhe for the purpose of joint development planning”, which was rated at a high level ( $\bar{x} = 4.27$ , S.D. = 0.96). The second highest was “Providing accurate information to the SAO for mutual learning and local development collaboration” ( $\bar{x} = 4.14$ , S.D. = 0.85), followed by “Providing accurate information to the SAO for planning and cooperating in problem-solving”, which also received a high-level rating ( $\bar{x} = 4.11$ , S.D. = 0.92).

## 2. Consultation

An item-by-item analysis of public participation in local development under the consultation dimension revealed that most responses fell within the high or very high categories. The highest proportion of respondents—80.00%—indicated that they exchanged opinions with the Subdistrict Administrative Organization (SAO) of Sachorakhe to jointly plan local projects. This was followed by 75.8% who reported providing accurate information to the SAO to support the formulation of local development plans, and 75.7% who expressed opinions in joint decision-making processes during project evaluation within the subdistrict.

In terms of average scores, the highest mean was for the item: “Residents exchange opinions with the SAO to jointly plan subdistrict projects”, which received a high-level rating ( $\bar{x} = 4.17$ , S.D. = 0.96). The second highest was: “Residents provide accurate information to the SAO for local development planning” ( $\bar{x} = 4.14$ , S.D. = 0.88), followed by: “Residents express opinions for decision-making with the SAO in project evaluations”, also rated at a high level ( $\bar{x} = 4.05$ , S.D. = 0.96).



### 3. Involvement

An itemized analysis of public participation in local development under the involvement dimension revealed that most responses fell into the high or very high category. Specifically, 77.2% of respondents reported having an active role in decision-making and planning for subdistrict development with the Subdistrict Administrative Organization (SAO) of Sachorakhe to ensure alignment with community needs. An equal percentage (77.2%) also participated in joint meetings with the SAO to determine directions for subdistrict development. Meanwhile, 72.9% reported involvement in formulating agreements on project implementation with the SAO.

In terms of average scores, the highest-rated item was “Participating in decision-making on subdistrict development planning with the SAO to meet local needs”, rated at a high level ( $\bar{x} = 4.12$ , S.D. = 0.88). This was followed by “Participating in the formulation of agreements for project implementation with the SAO to ensure comprehensive coverage of local needs” ( $\bar{x} = 4.11$ , S.D. = 0.86), and “Participating in decision-making during joint meetings with the SAO to find development strategies for the subdistrict” ( $\bar{x} = 4.05$ , S.D. = 0.94).

### 4. Collaboration

An analysis of individual questionnaire items related to public participation in local development under the collaboration dimension revealed that the majority of responses were at the high or very high level. Specifically, 87.1% of respondents reported participating in idea-sharing sessions to guide the development of subdistrict projects. This was followed

by 85.7% who took part in village assemblies to discuss and resolve issues related to local infrastructure deterioration, and 82.8% who participated in village meetings to express community needs.

In terms of average scores, the highest mean was for the item: “Participating in village assemblies to discuss and resolve problems related to local infrastructure maintenance”, which was rated at a high level ( $\bar{x} = 4.32$ , S.D. = 0.75). This was followed by: “Engaging in idea-sharing to guide subdistrict project planning” ( $\bar{x} = 4.30$ , S.D. = 0.80), and “Attending village assemblies to express local needs” ( $\bar{x} = 4.24$ , S.D. = 0.84), all of which were also rated as high.

## 5. Empowerment

The analysis of individual items related to public participation in local development under the empowerment dimension indicated that most responses were at the high or very high level. Specifically, 82.9% of respondents reported participating in community voting processes to express opinions regarding subdistrict development. This was followed by 81.5% who took part in public hearings organized by the Subdistrict Administrative Organization (SAO) of Sachorakhe to reflect community concerns, and 81.4% who participated in voting processes aimed at resolving conflicts within the subdistrict.

In terms of average scores, the highest-rated item was: “Participating in community voting to express opinions on subdistrict development”, which received a high-level rating ( $\bar{x} = 4.22$ , S.D. = 0.76). This was followed by: “Participating in public hearings with the SAO to voice concerns about

local issues” ( $\bar{x}$  = 4.18, S.D. = 0.87), and “Voting in community meetings to resolve internal conflicts in the subdistrict” ( $\bar{x}$  = 4.14, S.D. = 0.82).

**Section 2: Level of Participatory Communication**

For this study, data were collected from a total of 70 residents of Ban Lung Community. The analysis focused on the level of participatory communication among the population in Ban Lung, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. The findings were categorized into four key dimensions: message sender, message content, communication channels, and message receiver. The results are presented in Table 4.

**Table 4**  
*Percentage of Respondents Classified by Level of Participatory Communication*

Level of Participatory Communication	Percentage (%)
Low (Score range: 12–28 points)	1.40
Moderate (Score range: 29–45 points)	20.00
High (Score range: 46–60 points)	78.60
Total	100.0

According to Table 4, the majority of residents in Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province, expressed a high level of participatory communication, with scores ranging from 46 to 60 points, accounting for 78.60% of the respondents. This was followed by those with a moderate level (scores ranging from 29 to 45 points) at 20.00%, and a low level (scores between 12 and 28 points) at only 1.40%, respectively.

**Table 5**

*Mean and Standard Deviation of Participatory Communication Classified by Message Sender, Message Content, Communication Channel, and Message Receiver*

Participatory Communication	$\bar{x}$	S.D.	Interpretation
Message Sender	4.24	0.70	High
Message Content	4.25	0.78	High
Communication Channels	4.25	0.70	High
Message Receiver	4.24	0.66	High
Total	<b>3.98</b>	<b>0.62</b>	High

According to Table 5, the overall level of participatory communication was high ( $\bar{x} = 3.98$ , S.D. = 0.62). When considered by individual dimensions, the highest mean scores were found in the areas of message content ( $\bar{x} = 4.25$ , S.D. = 0.78) and communication channel ( $\bar{x} = 4.25$ , S.D. = 0.70). These were followed by message sender ( $\bar{x} = 4.24$ , S.D. = 0.70) and message receiver ( $\bar{x} = 4.24$ , S.D. = 0.66), respectively.

### 1. Message Sender

From the itemized analysis of participatory communication in local development, focusing on the message sender, the study found that most responses fell within the “high” to “very high” levels. The majority of the respondents agreed that the operations of the Subdistrict Administrative Organization (SAO) of Sachorakhe used clear and unambiguous language when disseminating information to encourage public participation in community activities, with 84.3% rating this as high or very high. Following this, 81.4% believed that the SAO demonstrated good communication skills, such as using polite tones to invite people to development training

programs. Finally, 78.6% of respondents agreed that the SAO effectively used communication skills, such as informative signage, to distribute beneficial information within the subdistrict.

In terms of mean scores, the highest was for clarity of language ( $\bar{x} = 4.30$ , S.D. = 0.84), followed by polite verbal communication ( $\bar{x} = 4.28$ , S.D. = 0.80), and finally signage communication ( $\bar{x} = 4.15$ , S.D. = 0.86).

## **2. Message Content**

Considering public participation in terms of message content, the majority of responses were also in the high to very high range. Specifically, 82.9% agreed that the SAO presented essential information about local problems to encourage collective planning. 81.5% agreed that the SAO provided reliable information regarding development activities, enhancing understanding and participation. Furthermore, 78.6% felt that the SAO provided clear content to help the public accurately understand local development goals.

In terms of mean scores, the highest were for reliable information on development activities ( $\bar{x} = 4.27$ , S.D. = 0.93), followed by significant local problem information for collaborative planning ( $\bar{x} = 4.27$ , S.D. = 0.84), and then clear and concise information ( $\bar{x} = 4.21$ , S.D. = 0.91).

## **3. Communication Channels**

Regarding communication channels, the majority of respondents rated aspects as high or very high. Specifically, 87.1% agreed that the SAO used a website to keep residents updated with ongoing community news. Following this, 81.4% felt that noticeboards were effectively used for public

announcements, and 78.6% agreed that the village's public address system was used to invite participation in development activities.

In terms of average scores, both website communication and village noticeboards received the highest mean score of 4.22 (S.D. = 0.78). The public address system followed with a mean score of 4.21 (S.D. = 0.91).

#### **4. Message Receiver**

With respect to message receivers, most respondents rated their agreement as high or very high. 85.7% agreed that the SAO paid attention to local livelihood issues and sought public input in resolving problems. 84.3% said the SAO consistently shared local news to engage the public. Lastly, 78.6% felt the SAO encouraged public opinion exchanges on important matters.

In terms of means, the highest was the continuous provision of local information ( $\bar{x} = 4.35$ , S.D. = 0.78), followed by responsiveness to local problems ( $\bar{x} = 4.25$ , S.D. = 0.81), and invitation to opinion-sharing activities ( $\bar{x} = 4.11$ , S.D. = 0.80).

### **Section 3: Factors Associated with Public Participation in Local Development**

The analysis of the factors associated with public participation in local development was conducted in accordance with the research framework. The research team performed a correlation matrix analysis to explore the relationship between participatory communication and public participation in local development. The analysis utilized correlation coefficients to evaluate the strength and direction of relationships between

variables. The data analysis was conducted using the SPSS software package. The findings are presented in Table 6.

**Table 6**

*Correlation Coefficients (r) of the Variables*

	A	B	C	D	E	F
A	1.000					
B	0.861**	1.000				
C	0.868**	0.874**	1.000			
D	0.811**	0.825**	0.875**	1.000		
E	0.938**	0.948**	0.958**	0.927**	1.000	
F	0.830**	0.796**	0.845**	0.838**	0.876**	1.000

**Note:** \* Statistically significant at the 0.05 level, \*\* Statistically significant at the 0.01 level

The analysis of the correlation coefficients between the independent and dependent variables revealed that participatory communication was significantly associated with public participation in local development, specifically in the case of Ban Lung Community, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. The correlation was found to be statistically significant at the 0.01 level, with a correlation coefficient of 0.830. When examining each component of participatory communication, the findings showed that the message sender dimension had a correlation coefficient of 0.796, indicating a strong relationship with public participation. The message and content dimension demonstrated an even stronger correlation, with a coefficient of 0.845, while the communication channels dimension yielded a coefficient of 0.838. Most notably, the message receiver dimension exhibited the highest correlation with public participation, with a coefficient of 0.876. These results suggest

that each aspect of participatory communication plays a significant role in promoting and supporting meaningful involvement of citizens in local development processes. The clarity and credibility of communication, the effectiveness of information channels, and the active engagement of citizens in both sending and receiving information are all critical to fostering sustained and effective public participation.

**Table 7**

*English Letter Codes Representing Variables*

English Letter	Variable Description
A	Participatory Communication
B	Message Sender
C	Message and Content
D	Communication Channels
E	Message Receiver
F	Public Participation in Local Development

### Hypothesis Testing

Based on the literature review, the researchers formulated and tested the following hypothesis:

**Hypothesis:** Participatory communication—which consists of sender, message/content, communication channels, and receiver—has a relationship with public participation in local development.

**Research Findings:** Participatory communication was found to have a statistically significant relationship with public participation in local development at the 0.01 level, with a correlation coefficient of 0.830. When examined by components, the sender dimension showed a correlation coefficient of 0.796; the message/content dimension showed 0.845; the



communication channel dimension showed 0.838; and the receiver dimension showed 0.876. These findings are consistent with Aphichat Phuksawat (2021), who stated that participatory communication is correlated with public participation.

#### **Section 4: Guidelines for Public Participation in Local Development**

This section addresses the third research objective—proposing guidelines for public participation in local development. The findings from the study indicated that participatory communication is significantly correlated with public participation in local development. As a result, the researchers propose the following guidelines to enhance public participation, which include promoting the sender, content/message, communication channels, and receiver components:

##### **1. Promoting the Sender Component**

This involves publicizing information in a clear and unambiguous manner so that residents are informed and can participate in community activities. An example includes creating informative signage to disseminate beneficial information within the community.

##### **2. Promoting the Message/Content Component**

This involves presenting clear, credible, and essential information related to local issues to ensure comprehensive understanding among residents and to encourage participation in discussions on local development.

##### **3. Promoting the Communication Channel Component**

This includes providing accessible communication channels so residents can stay informed about local news and activities, such as using

public notice boards, community loudspeakers, and the official village website.

#### **4. Promoting the Receiver Component**

This involves encouraging residents to be attentive to local issues and to actively engage in solving problems affecting the community. It also includes inviting community members to participate in important discussions relevant to the village.

Based on the proposed guidelines for public participation in local development in Ban Lung Village, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province, the researchers have suggested a participatory communication framework comprising sender, content, communication channel, and receiver components. These guidelines stem from the results of a quantitative study on public participation in local development. The researchers believe that enhancing participatory communication will significantly improve the effectiveness of community participation, as communication is a critical tool in disseminating information and encouraging involvement in local development activities.

### **Discussion of Results**

Based on the study on public participation in local development, conducted in Ban Lung Village, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province, the findings are discussed as follows:

#### **1. Level of Public Participation in Local Development**

The study revealed that the overall level of public participation in local development in Ban Lung Village was high (Mean = 4.17, S.D. = 0.68). When examining each aspect, the highest average score was for collaborative

engagement (Mean = 4.29, S.D. = 0.68), followed by empowerment of citizens (Mean = 4.18, S.D. = 0.70), information sharing (Mean = 4.17, S.D. = 0.70), consultation (Mean = 4.12, S.D. = 0.79), and active involvement (Mean = 4.10, S.D. = 0.77), respectively (see Table 4.3). These results are consistent with the framework of public participation in local development as proposed by Rattanaojmongkol (2010), which includes the dimensions of information dissemination, consultation, involvement, collaboration, and empowerment.

## **2. Factors Related to Public Participation in Local Development**

The research found that participatory communication is significantly correlated with public participation in local development at the 0.01 level of statistical significance, with a correlation coefficient of 0.830. When examining by component, the sender aspect had a correlation coefficient of 0.796, message/content had 0.845, communication channels had 0.838, and receiver had the highest correlation at 0.876. These findings align with the assertion by Puksawadde (2021), who noted that participatory communication is associated with public participation.

## **Recommendations**

1. This study focused on public participation in local development using a case study of Ban Lung Village, Sachorakhe Subdistrict, Dan Khun Thot District, Nakhon Ratchasima Province. Data were collected from community members holding local positions. Therefore, future studies should include the remaining 12 villages within the same subdistrict (which comprises 13 villages in total) to ensure more comprehensive and representative data, which can better inform strategies for enhancing public participation.

2. This research employed participatory communication and public participation frameworks to assess the level of involvement among residents in local development. It is recommended that future research incorporate additional theoretical frameworks or related factors that influence civic engagement in development. Doing so will help deepen understanding of public participation levels and their determining factors, and will yield diverse and effective strategies for encouraging citizen involvement in local development initiatives.

## References

- Chaiamnatt, N. (2017). *Public participation in local development of Saensuk Municipality, Mueang District, Chonburi Province* [Master's thesis, Burapha University].
- Constitution Drafting Committee. (2016). *Local administration*. Retrieved March 21, 2024, from [https://www.dga.or.th/wpcontent/uploads/2016/06/file\\_221a8ead\\_eab9b6d4ed9308c0403fc444.pdf](https://www.dga.or.th/wpcontent/uploads/2016/06/file_221a8ead_eab9b6d4ed9308c0403fc444.pdf)
- Kongyong, W. (2002). *Public participation in the development of Thung Naree Subdistrict, Pa Bon District, Phatthalung Province* (Research report). Hatyai University.
- Kromthong, S. (2014). *Public participation in local development: A case study of Huai Kaeo Subdistrict Administrative Organization, Bueng Na Rang District, Phichit Province* (Research report). National Institute of Development Administration.
- Phra Mahawiset Kantadhammo (Mungkhang). (2020). Public participation in community development of municipal towns. *Chulalongkorn*

*Journal*, 1(3), 48.

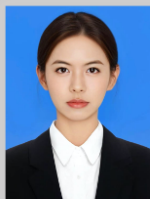
Phra Thawatchai Santidhammo. (2018). *Public participation in development and the problem of lack of participation in community development* [Master's thesis in Public Administration, Mahachulalongkornrajavidyalaya University].

Puksawadde, A. (2021). *Participatory communication innovation* (1st ed.). Chulalongkorn University Press.

Rattanaojmongkol, T. (2010). Public participation. *Journal of Public Participation*, 58(184), 23.

Sribuaiaam, K. (1997). *Guidelines for promoting participatory democracy under the Constitution of the Kingdom of Thailand* (2nd ed.). King Prajadhipok's Institute.

Thongwitthaya, S. (2001). *Participation of provincial administrative organization council members in local development: A case study of Nakhon Pathom Province* [Unpublished special project, Burapha University].



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# The Effectiveness of the Universal Health Coverage Policy: A Case Study of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province

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## Abstract

This research aimed to: (1) examine the level of effectiveness of the Universal Health Coverage policy in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province; (2) investigate the factors related to the effectiveness of the Universal Health Coverage policy in the same area; and (3) propose guidelines to enhance the policy's effectiveness. This study employed a quantitative research methodology. The target population consisted of households residing in Don Phatthana Village. The respondents included heads of households, household representatives, or legally competent family members capable of providing information. The research instrument was a questionnaire developed by the researchers, divided into three sections: Part 1 – general demographic information of the respondents; Part 2 – questions regarding participation factors; and Part 3 – questions on the effectiveness of the Universal Health Coverage policy. Data

were collected from February to August 2024 and analyzed using statistical software for social science research. The analysis involved frequency distribution, percentage, mean, standard deviation, and correlation coefficient ( $r$ ). The results as follows: 1) The overall effectiveness of the Universal Health Coverage policy was at a high level ( $\bar{x} = 4.53$ , S.D. = 0.40). When examining individual aspects, all dimensions showed high levels. The highest mean was found in project risk ( $\bar{x} = 4.51$ , S.D. = 0.50), followed by satisfaction ( $\bar{x} = 4.51$ , S.D. = 0.44), and participation ( $\bar{x} = 4.51$ , S.D. = 0.42). 2) The factor significantly related to policy effectiveness was public participation, which included four sub-dimensions: participation in decision-making, operational participation, benefit participation, and evaluation participation. These were statistically correlated with the policy's effectiveness at the 0.01 level, with an overall correlation coefficient of 0.703. Specifically, the correlation coefficients were as follows: participation in decision-making ( $r = 0.516$ ), operational participation ( $r = 0.499$ ), benefit participation ( $r = 0.603$ ), and evaluation participation ( $r = 0.703$ ). These results supported the proposed hypotheses. 3) The proposed guidelines for enhancing policy effectiveness include: promoting participation in decision-making, operations, benefit sharing, and evaluation.

**Keywords:** Effectiveness, Policy effectiveness, Policy, Universal Health Coverage policy

## Introduction

Thailand's healthcare system has undergone a significant transformation, evolving from traditional self-care practices rooted in local wisdom to a modern healthcare infrastructure increasingly reliant on contemporary medicine and advanced technologies. While the public sector



continues to serve as the primary healthcare provider, private healthcare services—both profit-oriented and non-profit—also play an important role in supporting public health delivery (Health Systems Research Institute, 2001). Historically, protective mechanisms against healthcare-related expenses existed in the form of state-sponsored charitable support for the poor, such as exemptions from medical fees (Pipatrojanakamol, 2004). The enactment of the National Health Security Act in 2002 was a watershed moment in Thai public health policy. It established that every Thai citizen is legally entitled to access standardized and efficient healthcare services. To facilitate this, the government established the National Health Security Fund, which finances and supports the operations of health service providers across the country to ensure equitable access to healthcare for all (National Health Security Office, 2019).

Thailand's Universal Health Coverage (UHC) is built upon the principle of health equity—ensuring that all individuals in society are entitled to essential health services regardless of socio-economic status. The primary objective of UHC is to safeguard the right to timely access to quality public health services that meet the actual health needs of the population (National Health Security Office, 2021). Known popularly as the “30 Baht Scheme” or the “Gold Card Scheme”, UHC is a legally guaranteed right for every Thai citizen from birth and throughout life. It covers a wide range of services including health promotion, disease prevention, diagnostics, treatment, and rehabilitation (National Health Security Office, 2019). Recent reforms have expanded service delivery options, allowing beneficiaries to receive primary healthcare services at any certified provider without the need for referrals, including cancer treatment at capable hospitals.

Additionally, changes to service registration can now be made immediately, and patient records are digitally connected to improve care coordination. These developments reflect the government's continued effort to enhance the quality and efficiency of healthcare services. Thailand has earned international recognition for achieving near-universal health coverage for its population. However, disparities remain in the benefit packages offered across different public insurance schemes. Moreover, the financial demands of maintaining the system have increased steadily due to rising healthcare needs, an aging population, and the growing complexity of diseases (National Reform Plan on Public Health, 2021).

The latest UHC policy, known as “One ID Card for Universal Care”, builds upon the original 30 Baht Scheme and aims to simplify access to healthcare services. Under this initiative, Thai citizens can receive medical care at any facility nationwide by simply presenting their national ID card. This system removes the need for complex hospital referral processes and allows for digital integration of medical records to enhance service continuity (Bureekul, 2021). According to Oupathum (2024), this policy represents a significant advancement in public health administration, designed to increase convenience and service quality for the public. To ensure the success and sustainability of this program, all involved stakeholders must not only adopt sound administrative practices but also adhere to ethical principles. It has been argued that good governance—transparency, accountability, and integrity—is the essential foundation for managing the “One ID Card for All Care” program. This initiative, which enables citizens to access health services using only their 13-digit identification number, embodies the ideal

of a unified and inclusive national health system (Pakdeejit, 2021; Oupathum, 2024).

Despite the successes of UHC, challenges remain. Prior to the nationwide implementation of the scheme, many Thai citizens—particularly those outside the formal employment system, rural populations, and low-income groups—lacked health insurance and bore the financial burden of healthcare costs (Petlert & Phosing, 2016, pp. 275-284). Access to health services was hindered by both personal and systemic barriers, with individual-level factors often impeding early or effective utilization of services (Mongkhonsuebsakul, 2022). Today, as the population grows older and diseases become more complex, healthcare facilities are increasingly overcrowded. Citizens rely more on institutional care than self-care, contributing to rising costs. The budget allocation system, which is based on population size rather than service demands, is often misaligned with actual healthcare needs.

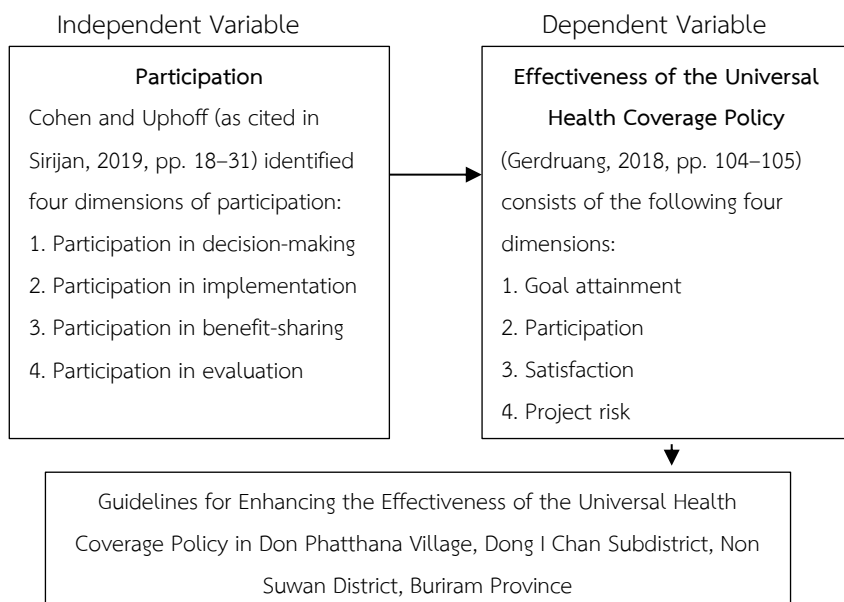
These ongoing problems serve as the basis for the present study, which focuses on the effectiveness of the Universal Health Coverage policy in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province. The researchers aim to evaluate how the policy performs at the community level, identify the factors contributing to its effectiveness, and propose practical recommendations. Ultimately, the findings of this study are expected to support future decision-making processes and contribute to the formulation of more effective public health policies that deliver equitable, high-quality healthcare services and promote the well-being of all Thai citizens.

## Research Objectives

1. To examine the level of effectiveness of the Universal Health Coverage policy: A case study of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province.
2. To investigate the factors related to the effectiveness of the Universal Health Coverage policy: A case study of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province.
3. To propose guidelines for enhancing the effectiveness of the Universal Health Coverage policy: A case study of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province.

## Research Scope

### Conceptual Framework



## **Research Hypothesis**

Based on the research objectives, literature review, relevant theoretical frameworks, and previous studies, the researchers formulated the following research hypothesis to explain the relationship between participation factors and the effectiveness of the Universal Health Coverage policy:

Participation—which includes decision-making, implementation, benefit-sharing, and evaluation—is significantly related to the effectiveness of the Universal Health Coverage policy in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province.

## **Research Methodology**

### **1. Research Population**

The research population consisted of households residing in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province. Respondents included heads of households, household representatives, or legally competent members capable of providing reliable information. A total of 160 households met the inclusion criteria.

### **2. Sample Group**

The sample group used in this study was drawn from the household population of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province. A total of 115 households were selected as the research sample, determined using the Taro Yamane formula with a margin of error of 0.05.

### **3. Sampling Method**

To select the sample of 115 households, the researchers employed probability sampling using simple random sampling, following these steps:

Step 1: Identify the households in Don Phatthana Village. The proportion of sample households was distributed by local community zones (known as khoom) as follows: Khoom Pratu Nam: 27 households, Khoom Wat: 12 households, Khoom Klang (Central): 26 households, Khoom Tai (South): 19 households, Khoom Rong Rian (School area): 31 households

Step 2: Perform Simple Random Sampling by preparing 160 slips of paper, each representing one household. The slips were placed in a container, and 115 households were randomly drawn to form the sample group.

#### **4. Variables and Levels of Measurement**

The variables used in this study were synthesized from theoretical concepts and previous research through a review of related literature. The research team identified and defined the variables and their levels of measurement as follows:

##### **4.1 Independent Variable and Its Measurement**

The independent variable in this study is the participation factor, which comprises the following aspects:

The participation variable was assessed based on the level of agreement indicated by the respondents in the questionnaire. The question asked: “To what extent do you agree with statements regarding your participation in the following areas: decision-making, implementation, benefit-sharing, and evaluation”. This variable was measured using an interval scale. When analyzed as a single composite variable, the scores

were regrouped into three levels of participation. The total score, derived from summing the scores of each item, ranged from 12 to 60 points. The interpretation was based on group-referenced criteria, categorized as follows: Low level: 12–28 points, Moderate level : 29–45 points High level: 46–60 points

#### 4.2 Dependent Variable and Its Measurement

The dependent variable in this study is the effectiveness of the Universal Health Coverage policy. This variable was assessed based on the level of agreement expressed by respondents in response to the following question:

“To what extent do you agree with the implementation of the Universal Health Coverage policy in terms of goal attainment, participation, satisfaction, and project risk”. This variable was measured using an interval scale. When analyzed as a single composite variable, the total score—calculated by summing the responses to the relevant questionnaire items—ranged from 12 to 60 points. Based on this total score, the researchers grouped the effectiveness of the policy into three levels: Low level: 12–28 points, Moderate level: 29–45 points, High level: 46–60 points

These group-referenced criteria were used to interpret respondents’ opinions regarding the effectiveness of policy implementation.

### 5. Data Collection Methods and Instruments

#### 5.1 Data Collection Procedures

For this research, data were collected through interviews using a structured questionnaire. The research team, consisting of four members, conducted data collection with a sample of 115 households in Don

Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province. The data collection process was carried out as follows:

#### 5.1.1 Preparation of the Research Team

Prior to data collection, the research team organized a planning meeting to review the procedures involved in each step of the data collection process. The purpose was to ensure a shared understanding of the research tools and methods among all team members.

#### 5.1.2 Data Collection Procedures

The process began with a study of the target area to facilitate efficient travel and logistical planning. The research team then visited the research site to introduce themselves, explain the objectives of the study to community members, and schedule interview appointments. Preparations for fieldwork included organizing the research team, transportation, and the necessary materials—particularly the questionnaire forms to be used during interviews.

### 5.2 Research Instrument

The instrument used for data collection in this study was a questionnaire, which was divided into three main parts as follows:

#### Part 1: General Information of Respondents

This section contained close-ended questions aimed at collecting general demographic data of the respondents. It consisted of the following items:

1) Gender – A close-ended question with only 2 predetermined answer choices. Respondents were asked to select one option that best described their gender. This section contained one question.



2) Age – A close-ended question with 5 answer choices. Respondents selected one age range from the provided options. This section also contained one question.

3) Education Level – A close-ended question with 8 answer choices. Respondents selected their highest level of education from the listed options. This section included one question.

#### Part 2: Questions Related to Participation Factors

This section assessed the respondents' level of participation across four dimensions. All questions were measured using a five-point Likert-type scale, which included the following levels: Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree. The section consisted of the following subparts:

1) Participation in Decision-Making – This part included 3 items. Each item was rated on the five-point scale, assessing how much respondents engaged in making decisions related to the policy or community matters.

2) Participation in Implementation – This part included 3 items. It measured the level of involvement in carrying out or executing actions related to the Universal Health Coverage policy.

3) Participation in Benefit-Sharing – This part consisted of 3 items, focusing on how respondents perceived their share in the benefits or outcomes resulting from the policy.

4) Participation in Evaluation – This section included 3 items to evaluate respondents' involvement in assessing or giving feedback on the outcomes or processes of the policy implementation.

### Part 3: Questions Related to the Effectiveness of the Universal Health Coverage Policy

This section aimed to assess the respondents' perceptions of how effective the Universal Health Coverage policy had been in their area. Like Part 2, this section used a five-point Likert-type scale: Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree. The content was divided into the following four dimensions:

1) Goal Attainment – This part included 3 items measuring the extent to which the implementation of the policy had achieved its intended objectives.

2) Participation – This part consisted of 3 items assessing the level of stakeholder or community involvement in the policy process.

3) Satisfaction – This dimension comprised 3 items that focused on respondents' satisfaction with the services or outcomes of the policy.

4) Project Risk – This final part included 3 items evaluating the respondents' perception of risks, problems, or obstacles that could affect the success of the policy implementation.

The scoring and interpretation criteria for all Likert-scale items were outlined in Table 1.

**Table 1**

*Details of Scoring Criteria and Interpretation for Likert-Scale Questions on the Effectiveness of the Universal Health Coverage Policy*

Level	Description	Score
Strongly Agree	The statement corresponds <b>most strongly</b> with the respondent's opinion.	5

Level	Description	Score
Agree	The statement corresponds <b>strongly</b> with the respondent's opinion.	4
Neutral	The statement corresponds <b>moderately</b> with the respondent's opinion.	3
Disagree	The statement corresponds <b>slightly</b> with the respondent's opinion.	2
Strongly Disagree	The statement corresponds <b>least</b> with the respondent's opinion.	1

### 3. Instrument Development for Data Collection

The research instrument was developed by the research team through the following steps:

3.1 Relevant literature, books, academic articles, and previous studies related to the effectiveness of the Universal Health Coverage policy were reviewed to establish the research framework, define the scope of the study, and support the development of the research instrument.

3.2 A conceptual framework was defined based on the dimensions of the effectiveness of the Universal Health Coverage policy.

3.3 Questionnaire items were drafted based on the conceptual framework, ensuring alignment with the research objectives, content, and the overall format of the questionnaire.

3.4 An interview questionnaire was constructed in accordance with the research objectives and content scope. The development process was carried out under the guidance of the research advisor.

3.5 The draft interview questionnaire was submitted to the research advisor for review. The advisor examined the content validity and identified any flaws or inconsistencies in the wording of the questions. The

goal was to ensure that the items were relevant to the research objectives, clearly defined terms, and appropriately targeted the research population. The revised questionnaire was then used to assess the instrument's quality.

3.6 Content validity was tested by having the research advisor evaluate the questionnaire. Revisions were made to ensure the content of each item was accurate and appropriate.

3.7 Construct validity was tested by determining whether the questionnaire items accurately reflected the theoretical concepts intended to be measured. This was done through discussions with the research advisor to validate the theoretical alignment.

3.8 Reliability testing was conducted to assess the internal consistency of the questionnaire. After the revised questionnaire was finalized, a pilot test (try-out) was conducted with 30 individuals from the research population in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province. The data collected from this pilot group were then used to calculate the Cronbach's Alpha Coefficient for the overall questionnaire, each section, and individual items. The overall reliability coefficient of the questionnaire was found to be 0.810. The reliability values for each section are shown in Table 2.

**Table 2**

*Reliability Coefficients of the Interview Questionnaire*

Section / Item	Reliability Coefficient (Cronbach's Alpha)
Part 1: Participation	0.455
Participation in Decision-Making	0.333
Participation in Implementation	- 0.398

Section / Item	Reliability Coefficient (Cronbach's Alpha)
Participation in Benefit-Sharing	0.169
Participation in Evaluation	0.226
Part 2: Effectiveness of the Universal Health Coverage Policy	0.791
Goal Attainment	0.483
Participation	0.158
Satisfaction	0.570
Project Risk	0.529
Overall	0.810

3.9 Revisions Based on Advisor's Recommendations

The interview questionnaire was revised according to the suggestions of the research advisor. Revisions included improvements in content, language, and wording to ensure accuracy and clarity. Once the modifications were completed and approved, the finalized version of the interview instrument was used for data collection with the target population.

Data Processing and Analysis

The research team began data processing by verifying the completeness and accuracy of all returned questionnaires. Each item was coded and entered into a computer for analysis using the Statistical Package for the Social Sciences (SPSS for Windows). The data analysis was conducted in two parts as follows:

1. Univariate Analysis

Univariate statistics were used to examine the characteristics of the sample on a variable-by-variable basis. The objective was to summarize the demographic and response profiles of the participants.

Descriptive statistics—including frequency, percentage, mean, and standard deviation—were used to describe the distribution and central tendency of the data. For Likert-scale items scored from 1 to 5, the mean scores were grouped into three interpretation levels: High = Mean score between 3.68 – 5.00, Moderate = Mean score between 2.34 – 3.67 Low = Mean score between 1.00 – 2.33

This classification allowed the researchers to interpret how strongly respondents agreed with each item.

## **2. Bivariate Analysis**

Bivariate analysis was employed to test hypotheses regarding the relationship between the independent and dependent variables. The correlation matrix method was used to examine the strength and direction of relationships. The primary statistical tool used was the correlation coefficient ( $r$ ). All statistical analyses were conducted using SPSS for Windows, a software package designed for social science research.

## **Research Results**

The study on the effectiveness of the Universal Health Coverage policy, with a case study of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province, presents the findings in four sections as follows:

### **Section 1: Level of Effectiveness of the Universal Health Coverage Policy**

This study collected data from 115 households in Don Phatthana Village, located in Dong I Chan Subdistrict, Non Suwan District, Buriram Province. The general characteristics of the respondents covered gender,

age, and education level. Among the respondents, 49 were male (42.60%) and 66 were female (57.40%). In terms of age, the largest group of respondents were aged 51–60 years (28.70%), followed by those aged 61 years and above (23.50%), 41–50 years (21.70%), 31–40 years (16.50%), and 20–30 years (9.60%). Regarding educational background, most respondents had low levels of formal education. Specifically, 26.10% had less than primary education, 33.00% had completed primary education, 18.30% had lower secondary education, and 17.40% had upper secondary education. Only a small portion of respondents held higher qualifications: 1.70% had a vocational certificate or diploma, 2.60% held a bachelor's degree, and 0.90% had attained education beyond the bachelor's level. The effectiveness of the Universal Health Coverage policy was assessed across four key dimensions: goal attainment, participation, satisfaction, and project risk. The findings revealed that the majority of households—83.10%—perceived the overall policy effectiveness at a high level (score range: 46–60 points). Meanwhile, 16.00% rated it at a moderate level (score range: 29–45 points), and only 0.90% perceived it at a low level (score range: 12–28 points).

The overall mean score for policy effectiveness was 4.52 with a standard deviation of 0.34, indicating a high level of perceived effectiveness. When broken down by dimension, the highest average score was found in goal attainment (mean = 4.53, SD = 0.40), followed by participation (mean = 4.51, SD = 0.42), satisfaction (mean = 4.51, SD = 0.44), and project risk (mean = 4.51, SD = 0.50). All dimensions were rated at a high level, suggesting that the policy has been implemented successfully and is positively perceived across multiple aspects by the local community.

## 1. Goal Attainment

When analyzing the individual items related to the effectiveness of the Universal Health Coverage (UHC) policy under the dimension of goal attainment, the findings revealed the following:

The highest level of agreement was found in the statement: “The UHC policy helps reduce high medical expenses by allowing citizens to pay only 30 baht per visit as set by the government”, with a combined percentage of 98.30% rating it at the high and highest levels. The second-highest agreement was observed in the statement: “The UHC policy allows people the right to choose and register with healthcare facilities they prefer”, which received 98.20% of responses at the high and highest levels. The third item, “The UHC policy helps strengthen positive relationships between healthcare providers and recipients”, was also rated highly, with 91.30% of respondents marking it at the high and highest levels.

Regarding the mean scores, the highest average was found in the item stating that the policy allows citizens to choose and register with their preferred healthcare provider, with a mean of 4.57 and a standard deviation of 0.57, indicating a high level of agreement. This was followed by the item related to reducing high healthcare costs, which had a mean of 4.53 (S.D. = 0.53), also rated as high. Lastly, the item regarding improving relationships between service users and providers scored a mean of 4.48 (S.D. = 0.65), which was likewise interpreted as a high level of agreement. These results suggest that, in terms of goal attainment, the Universal Health Coverage policy is perceived by the community as highly effective in ensuring access, affordability, and relational quality in healthcare services.



## 2. Participation

In analyzing the effectiveness of the Universal Health Coverage (UHC) policy in terms of participation, the results showed strong levels of agreement across the evaluated items. The highest percentage of agreement was found in the statement: “The UHC policy encourages public participation by allowing citizens to express opinions about health services for further improvement”, with 96.50% of respondents rating it at the high or highest level. This was followed by the item: “The UHC policy promotes public participation in health promotion activities, such as training sessions on disease prevention and control”, which received 95.00% of responses at high and highest levels. The third item, “The UHC policy enables citizens to participate in joint efforts such as eliminating mosquito larvae to prevent dengue fever”, was rated highly by 93.00% of respondents.

In terms of mean scores, the highest was for the item on health promotion activities ( $\bar{x} = 4.55$ , S.D. = 0.58), indicating a high level of participation. This was followed by the item on community efforts to control dengue fever ( $\bar{x} = 4.52$ , S.D. = 0.65), and finally, the item on participation through service feedback ( $\bar{x} = 4.47$ , S.D. = 0.62). All items were interpreted as reflecting a high level of effectiveness in fostering public involvement.

## 3. Satisfaction

Regarding the satisfaction dimension of the UHC policy’s effectiveness, the results showed a consistently high level of agreement. The item with the highest percentage of positive responses was: “Satisfaction with the policy’s principle of equal rights for all citizens”, which was rated as high or highest by 94.80% of respondents. This was followed by

“Satisfaction with the responsiveness and efficiency of healthcare personnel”, with 92.80%, and “Satisfaction with health services under the UHC policy, such as the performance of hospital staff”, which received 92.20%.

In terms of mean scores, the highest score was for satisfaction with hospital services ( $\bar{x} = 4.56$ , S.D. = 0.66), followed by satisfaction with the principle of equal access ( $\bar{x} = 4.49$ , S.D. = 0.59), and then satisfaction with the speed and service of healthcare personnel ( $\bar{x} = 4.46$ , S.D. = 0.65). All items were considered to be at a high level of satisfaction, suggesting that the policy is well-received by the public in terms of fairness, service quality, and professional performance.

#### 4. Project Risk

In evaluating the effectiveness of the Universal Health Coverage (UHC) policy in terms of project risk, the findings indicate that respondents perceived the policy as highly effective in mitigating risks and promoting responsible use of healthcare resources.

The highest percentage of positive responses (94.70%) was associated with the statement: “The UHC policy encourages citizens to comply with social measures, such as presenting their national ID card or official documents each time they receive medical services”. Following this, 93.00% of respondents agreed or strongly agreed with the statement: “The UHC policy ensures that the allocated budget is used efficiently to benefit the public, for example, through the provision of standard and safe medical equipment”. The third item, which received 90.40% positive responses, was: “The UHC policy utilizes its budget to procure quality medicines, ensuring that citizens receive effective treatment”.

When analyzing mean scores, the highest was again the item regarding compliance with social measures ( $\bar{x} = 4.59$ , S.D. = 0.59), indicating a high level of agreement. This was followed by the item related to budget allocation for quality medications ( $\bar{x} = 4.52$ , S.D. = 0.66), and the item on the use of budget for medical equipment to benefit public health services ( $\bar{x} = 4.52$ , S.D. = 0.62). All items were interpreted as reflecting a high level of policy effectiveness in managing risk-related aspects of implementation.

These results suggest that the UHC policy is not only perceived as equitable and accessible but is also viewed as a system that manages resources and public compliance effectively, minimizing potential risks within the healthcare system.

## **Section 2: Level of Participation in the Effectiveness of the Universal Health Coverage Policy**

The study of participation in the effectiveness of the Universal Health Coverage (UHC) policy in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province, focused on four key dimensions: participation in decision-making, implementation, benefit-sharing, and evaluation.

The findings revealed that the majority of respondents expressed a high level of agreement regarding their level of participation. Specifically, 83.10% of participants rated their participation at a high level (score range: 46–60 points). An additional 16.00% reported a moderate level of participation (score range: 29–45 points), while only 0.90% indicated a low level of participation (score range: 12–28 points).

Analysis of the mean scores and standard deviations across each dimension showed that the overall level of participation was high, with a mean score of 4.48 and a standard deviation of 0.30. When analyzed by individual dimension, the highest level of participation was observed in evaluation (mean = 4.53, S.D. = 0.42). This was followed by decision-making (mean = 4.51, S.D. = 0.38), benefit-sharing (mean = 4.45, S.D. = 0.44), and implementation (mean = 4.43, S.D. = 0.39), respectively.

These results suggest that citizens in Don Phatthana Village are most actively engaged in the evaluation of the UHC policy, reflecting a strong sense of civic responsibility and involvement in assessing health-related initiatives. Their substantial involvement in decision-making and benefit-sharing further underscores the effectiveness of the policy's participatory approach, while their engagement in implementation, though slightly lower, remains notably high.

### **1. Participation in Decision-Making**

When examining individual items related to participation in decision-making, the findings revealed that 97.40% of respondents agreed or strongly agreed that the UHC policy allows citizens to make their own decisions about which healthcare services to use, such as the 30-baht gold card scheme. This was followed by 94.40% who believed the policy supports village health volunteers (VHVs) in gathering health-related data through primary healthcare networks. An equal percentage (94.40%) agreed that the policy enables people to take initiative in accessing services via digital platforms such as the “Mor Prom” mobile application.

In terms of mean scores, the highest-rated item was the right to choose service access points like the gold card scheme ( $\bar{x} = 4.54$ , S.D. = 0.55), followed by support for VHVs in data collection ( $\bar{x} = 4.53$ , S.D. = 0.59), and access through digital health applications ( $\bar{x} = 4.44$ , S.D. = 0.76). All items were interpreted as high levels of participation in decision-making.

## 2. Participation in Implementation

Regarding participation in implementation, 94.80% of respondents acknowledged that VHVs provide public health education to community members. Additionally, 90.40% agreed that citizens participated in financial support activities, such as funding medical equipment for underserved facilities. Lastly, 89.50% reported that the policy encourages the public to seek emergency medical help through hotlines like 1669.

The item with the highest mean was public health education provided by VHVs ( $\bar{x} = 4.51$ , S.D. = 0.59), followed by public financial support for medical equipment ( $\bar{x} = 4.40$ , S.D. = 0.68), and use of the emergency hotline in health crises ( $\bar{x} = 4.38$ , S.D. = 0.72). All responses indicated strong engagement in implementation.

## 3. Participation in Benefit-Sharing

In terms of benefit-sharing, 94.80% of respondents reported that the UHC policy has made healthcare services more convenient. A further 93.00% agreed that everyone could access basic healthcare services for common illnesses, and 89.60% felt the policy ensures equal rights to healthcare for all.

The highest mean score was given to access to basic healthcare for common illnesses ( $\bar{x} = 4.52$ , S.D. = 0.62), followed by improved

convenience of public health services ( $\bar{x} = 4.49$ , S.D. = 0.59), and equal access to healthcare rights ( $\bar{x} = 4.35$ , S.D. = 0.66). These results reflect a high level of satisfaction and inclusion in the policy's benefits.

#### 4. Participation in Evaluation

For participation in evaluation, 99.20% of respondents reported being involved in assessing service quality by completing feedback forms at healthcare facilities. In addition, 93.90% stated they participated in evaluating problems faced by hospital staff, and 87.80% were involved in online feedback through applications like “Mor Prom”.

The highest mean score was for on-site satisfaction surveys to improve services ( $\bar{x} = 4.66$ , S.D. = 0.49), followed by evaluating staff-related issues ( $\bar{x} = 4.55$ , S.D. = 0.60), and online feedback participation ( $\bar{x} = 4.39$ , S.D. = 0.80). These results show that the policy strongly supports public engagement in continuous service evaluation.

### Section 3: Factors Related to the Effectiveness of the Universal Health Coverage Policy

This section focuses on analyzing the factors associated with the effectiveness of the Universal Health Coverage (UHC) policy. The analysis was conducted in line with the research framework, which examined the relationship between the policy's effectiveness and the level of public participation.

The research team utilized a correlation matrix to explore the relationship between the effectiveness of the UHC policy and various aspects of participation. The analysis employed the Correlation Coefficient ( $r$ ) to assess the strength and direction of the relationship between these

variables. All data were processed and analyzed using the Statistical Package for the Social Sciences (SPSS), and the results are presented in Table 3.

**Table 3**

*Correlation Coefficients of the Variables*

	A	B	C	D	E	F
A	1.000					
B	0.486**	1.000				
C	0.282**	0.298**	1.000			
D	0.376**	0.352**	0.451**	1.000		
E	0.717**	0.719**	0.720**	0.756**	1.000	
F	0.425**	0.516**	0.499**	0.603**	0.703**	1.000

**Note:** \* Statistically significant at the 0.05 level, \*\* Statistically significant at the 0.01 level

The analysis of the correlation coefficients between the independent and dependent variables was conducted to examine how participation factors relate to the effectiveness of the Universal Health Coverage (UHC) policy in the case of Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province.

The findings indicated that the independent variable—overall participation (A)—was significantly correlated with the effectiveness of the UHC policy. This relationship was statistically significant at the 0.01 level, with a correlation coefficient ( $r$ ) of 0.425, suggesting a moderate positive relationship. When analyzed by specific dimensions of participation, the results were as follows: Participation in decision-making (B) had a correlation coefficient of 0.516, indicating a moderate and statistically significant positive relationship with policy effectiveness, Participation in implementation (C) showed a correlation of 0.499, also at a moderate level, Participation in

benefit-sharing (D) presented a stronger relationship, with a correlation of 0.603, Participation in evaluation (E) demonstrated the strongest correlation, with a coefficient of 0.703, suggesting a strong and highly significant positive relationship with the effectiveness of the policy.

**Table 4**

*English Letter Codes Representing Variables*

English letter codes		Variable
A	Participation	
B	Participation in Decision-Making	
C	Participation in Implementation	
D	Participation in Benefit-Sharing	
E	Participation in Evaluation	
F	Effectiveness of the Universal Health Coverage Policy	

Based on the literature review, the research team formulated a hypothesis stating that participation—including decision-making, implementation, benefit-sharing, and evaluation—is related to the effectiveness of the Universal Health Coverage (UHC) policy. The findings confirmed that participation was significantly correlated with policy effectiveness, with a correlation coefficient of 0.425 at the 0.01 level of statistical significance. When broken down into specific aspects, participation in decision-making was found to have a correlation coefficient of 0.516, participation in implementation showed a coefficient of 0.499, and participation in benefit-sharing was correlated at a coefficient of 0.603. These results support the hypothesis and align with the findings of Chamsrirat (2018), who stated that participation is significantly associated with policy effectiveness.



## **Section 4: Guidelines for Enhancing the Effectiveness of the Universal Health Coverage Policy**

This section addresses the third research objective: to propose strategies for enhancing the effectiveness of the Universal Health Coverage (UHC) policy in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province. These guidelines are derived from quantitative findings and are intended to improve public participation, which was found to be significantly associated with policy effectiveness.

### **1. Promoting Participation in Decision-Making**

Citizens should be encouraged to make informed decisions about their healthcare rights and access. One effective method is organizing training sessions to educate the community about the 30-baht universal health card, allowing them to understand their rights and actively decide which services to use.

### **2. Promoting Participation in Implementation**

Support should be provided in the form of budgets or community contributions for the procurement of medical equipment, especially in resource-limited healthcare facilities. This would help ensure that all citizens have access to modern and efficient medical treatment.

### **3. Promoting Participation in Benefit-Sharing**

Information about healthcare rights—particularly related to the 30-baht scheme—should be made widely available to ensure that all members of the community can access basic healthcare services equally. Effective communication channels can reduce disparities in access and increase health equity.

#### 4. Promoting Participation in Evaluation

Citizens should be invited to participate in the evaluation of healthcare services through multiple channels. For example, online satisfaction surveys via the “Mor Prom” application and on-site surveys at healthcare facilities can be used to collect feedback. This data can help identify operational issues and improve the quality of service delivery.

Based on the findings of this study, it is evident that encouraging public participation in four areas—decision-making, implementation, benefit-sharing, and evaluation—can significantly enhance the effectiveness of the Universal Health Coverage policy. These recommendations, derived from a case study of Don Phatthana Village, emphasize that effective participation leads to more equitable access, improved service delivery, and a stronger overall healthcare system.

### Discussion of Results

The study on the effectiveness of the Universal Health Coverage (UHC) policy in Don Phatthana Village, Dong I Chan Subdistrict, Non Suwan District, Buriram Province revealed several key findings, which can be discussed as follows:

#### 1. The Level of Effectiveness of the Universal Health Coverage Policy

The results showed that the overall effectiveness of the UHC policy was rated at a high level ( $\bar{x} = 4.52$ , S.D. = 0.34). When analyzed by specific dimensions, each aspect was also found to be at a high level. The highest average score was observed in the area of goal attainment ( $\bar{x} = 4.53$ ,

S.D. = 0.40), followed by project risk ( $\bar{x}$  = 4.51, S.D. = 0.50), satisfaction ( $\bar{x}$  = 4.51, S.D. = 0.44), and participation ( $\bar{x}$  = 4.51, S.D. = 0.42), respectively.

These findings are consistent with the concept of “effectiveness” as defined by Gerduang (2018), who stated that policy effectiveness comprises four core components: goal attainment, participation, satisfaction, and risk management. The high scores across all dimensions reflect that the UHC policy implementation in this area is perceived to be successful and well-aligned with its intended outcomes.

## **2. Factors Associated with the Effectiveness of the Universal Health Coverage Policy**

The research findings revealed that participation was significantly correlated with the effectiveness of the Universal Health Coverage policy at the 0.01 statistical significance level, with a correlation coefficient of 0.425. When considered by individual aspects, it was found that participation in decision-making was correlated with the effectiveness of the Universal Health Coverage policy, with a correlation coefficient of 0.516; participation in implementation had a correlation coefficient of 0.499; and participation in benefit-sharing had a correlation coefficient of 0.603. These results are consistent with Chamsrirat (2018), who stated that participation is correlated with effectiveness.

## **Recommendations**

1. This study examined the effectiveness of the Universal Health Coverage (UHC) policy, using Don Phatthana Village in Dong I Chan Subdistrict, Non Suwan District as a case study. Data were collected from households residing in the area, specifically from heads of households, their

representatives, or adult members capable of providing relevant information. Therefore, it is recommended that future research expand to include nearby communities in order to collect more comprehensive and inclusive data. Such an approach would allow for a broader understanding of the effectiveness of the UHC policy in the context of local development.

2. Based on the findings of this study, the researchers assessed the effectiveness of the UHC policy using the effectiveness framework, focusing on local residents. The study suggests that future research should incorporate the following dimensions—goal achievement, participation, satisfaction, and project risk—as key indicators influencing public participation in the UHC policy. These elements should be adopted in subsequent studies to assess policy effectiveness, identify factors associated with successful implementation, and determine strategies for enhancing the policy's impact. This would provide a more diversified perspective on UHC policy effectiveness and contribute to improved policy outcomes.

## References

- Bureekul, T. (2021). *Good governance: From concept to practice in Thai society* (4th ed.). King Prajadhipok's Institute.
- Chamsirat, S. (2018). *Factors influencing the effectiveness of the management of the health security fund of Surat Thani Municipality* [Unpublished master's thesis, Prince of Songkla University].  
<https://kb.psu.ac.th/psukb/bitstream/2016/12566/1/435444.pdf>
- Gerdruang, A. (2018). *Principles of public policy evaluation*. Chulalongkorn University Press.

- Health Systems Research Institute. (2001). *Health insurance system in Thailand* (1st ed.). Health Systems Research Institute.
- Mongkhonsuebsakul, W. (2022). Thailand's Access to Healthcare Services: The reflection and inequality of Vulnerable Group. *SAU Journal of Social Sciences & Humanities*, 6(1), 55–69.
- National Health Security Office. (2019). *National health security scheme: Beneficiary handbook*. Saengchan Printing.
- National Health Security Office. (2021). *Handbook on national health insurance rights for the people, B.E. 2564 (2021)*.  
<https://stream.nhso.go.th/view/1/E-BOOK/TH-TH>
- National Reform Plan on Public Health. (2021). *National reform of public health 2021*. [http://nscr.nesdc.go.th/wp-content/uploads/2021/02/CR\\_07\\_020264-18.46.pdf](http://nscr.nesdc.go.th/wp-content/uploads/2021/02/CR_07_020264-18.46.pdf)
- Oupathum, M. (2024). Good Governance: The Foundation Of Healthcare Guarantee For Thai Citizens. *Academic Graduate Journal*, 2(3), 42-43.
- Pakdeejit, R. (2021). *Good governance: For public and private sector administration*. Chulalongkorn Book Center.
- Petlert, T. & Phosing, P. (2016). Public Policy Healthy Insurance. *Dhammathas Academic Journal*, 16(2), 275–284.
- Pipatrojanakamol, S. (2004). *Wisdom power: Toward the development of universal health coverage*. <http://64.115.27.97/digital/files/original/31376507481739125175e1d380570f36.pdf>
- Sirijan, A. (2019). People's Participation in Performance . *Journal of Roi Kaensarn Academi*, 4(1), 18–31.



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# An Analysis of Translation Strategies for Thai Food and Beverage Names into Chinese: A Case Study in Nakhon Ratchasima Province

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## Abstract

The research aims to analyze the translation strategies of Thai food and beverage names in the menus of restaurants and beverage shops into Chinese in Tambon Nai Mueang, Amphoe Mueang and Tambon Mu Si, Amphoe Pak Chong, Nakhon Ratchasima Province, and to improve and correct the incorrect and difficult-to-understand translation of Thai food and beverage names into Chinese in Tambon Nai Mueang, Amphoe Mueang and Tambon Mu Si, Amphoe Pak Chong, Nakhon Ratchasima Province. The names of Thai food and beverages in Chinese were classified according to the translation strategies of Saibua (2017), divided into 2 types: 1. Direct translation strategy 2. Interpretation translation strategy. There were 412 menus, divided into 2 types: 315 savory dishes and 10 sweet dishes. The savory dishes were divided into 4 types as follows: 79 fried and grilled dishes,

63 boiled, curry, and steamed dishes, 102 stir-fried dishes, 71 spicy salad, larb dishes, and 87 beverage dishes.

After collecting the data, the researcher analyzed the meaning and classified the names of the food and beverages. In addition, it was revised according to the two translation strategies mentioned above.

The researcher concluded the research results by calculating the percentage of the collected and analyzed results and categorizing the types of Thai food and beverage names translated into Chinese according to the two translation strategies. The analysis results found that out of the 412 Thai food and beverage names translated into Chinese, the most commonly used translation strategies were 81 percent, followed by the cognitive translation strategy at 19 percent.

**Keywords:** Translation strategies, Thai-Chinese Translation, Thai food and beverage names

## Introduction

Thai food, whether savory or sweet, has gained widespread popularity and has significantly contributed to promoting Thailand both domestically and internationally. According to statistics provided by the Ministry of Tourism and Sports in 2024, the number of Chinese tourists visiting Thailand increased compared to 2023, with the primary purpose of enjoying authentic Thai cuisine and beverages. This trend has positively impacted the nation's economic growth and has further enhanced Thailand's international reputation. Nakhon Ratchasima Province, being a large and strategic location, stands to benefit even more in the future with the introduction of the Thailand-China high-speed rail line linking Bangkok,



Nong Khai, and Vientiane. Two key stations in this line, situated in Mueang and Pak Chong districts, are expected to attract a larger influx of Chinese tourists.

At present, the Nai Mueang sub-district in Mueang district is home to a vibrant Chinatown area where Thai-Chinese businesses thrive. This area, located along Chom Phol and Pho Klang roads, is also home to several shrines and temples and serves as an important economic hub of the district. In contrast, the Mu Si sub-district in Pak Chong district is renowned for its natural tourist attractions, most notably the Khao Yai National Park. This park has become a landmark destination for tourists, including Chinese visitors and Chinese nationals residing in Thailand, seeking to experience the beauty of Thailand's natural landscapes. As a result, restaurants and beverage shops in Mueang and Pak Chong districts have started translating their menus into Chinese to cater to this growing demand.

The names of food and beverage items play a significant role in reflecting the richness of ingredients and the unique cultural practices of Thai cuisine. The translation of these names into Chinese not only facilitates cultural communication but also serves to promote the virtues of Thai food to the Chinese public. Restaurants often feature popular food and beverage items on their menus to attract Chinese customers, making it an essential selling point. The primary goal of restaurants and beverage shops is to ensure clear communication, helping Chinese-speaking customers easily understand the menu items available.

This research, therefore, focuses on analyzing the translation strategies used for Thai food and beverage names in restaurant and beverage shop menus in the Nai Mueang and Mu Si sub-districts of Nakhon Ratchasima

Province. The research examines translation strategies based on Saibua's classification, which includes two types of translation strategies: 1) literal translation and 2) free translation. This study also aims to improve and correct translations that are incorrect or difficult to understand, making the menu more accessible to Chinese-speaking customers.

## Research Objectives

1. To analyze the translation strategies of Thai food and beverage names into Chinese in the menus of restaurants and beverage shops in the Nai Mueang sub-district, Mueang district, and Mu Si sub-district, Pak Chong district, Nakhon Ratchasima Province.

2. To improve and correct the incorrect and difficult-to-understand translation of Thai food and beverage names into Chinese in the Nai Mueang sub-district, Mueang district, and Mu Si sub-district, Pak Chong district, Nakhon Ratchasima Province.

## Research Scope

This research focuses on analyzing the translation strategies of Thai food and beverage names into Chinese in Nakhon Ratchasima Province, and aims to improve and correct the incorrect and difficult-to-understand translations of Thai food and beverage names into Chinese. The names of food and beverages used in this research were selected based on the criterion of choosing restaurants that have Chinese-translated menus. The study specifically focuses on restaurants in two districts, with one sub-district from each: Nai Mueang sub-district, Mueang district, and Mu Si sub-district, Pak Chong district. The selection of these two districts is due to the fact that

both will be serviced by the Thailand-China high-speed rail line in the future, running from Bangkok to Nong Khai and Vientiane, passing through these two districts. Additionally, these areas are home to significant tourist attractions, ensuring that the districts will attract an influx of Chinese tourists in the future.

The selected restaurants for this research consist of a total of 13 establishments, as follows:

1. Restaurants in Nai Mueang Sub-district, Mueang District, Nakhon Ratchasima:

1) Chinese restaurant: Xiao Xiao Restaurant. This restaurant was selected because it offers both Chinese and Thai food, and its menu is translated into Chinese.

Beverage and Dessert Shops in Nai Mueang Sub-district, Mueang District, Nakhon Ratchasima:

7 shops were selected because their beverage and dessert menus are translated into Chinese:

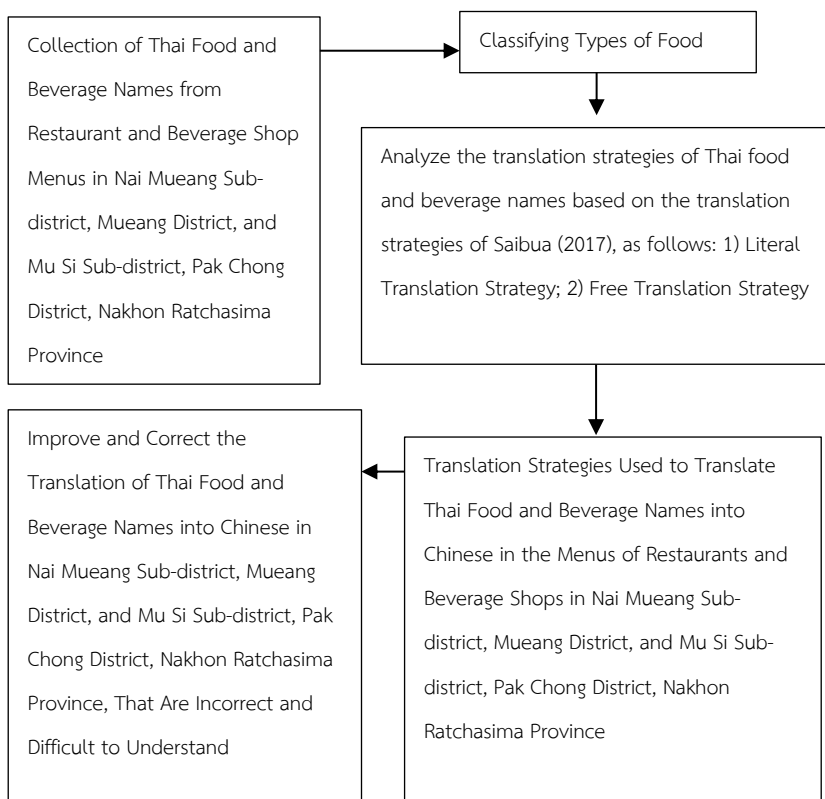
- 1) Café Amazon, Central Nakhon Ratchasima
- 2) Chatramu, Central Nakhon Ratchasima
- 3) Snow Icecream, The Mall Korat
- 4) All Coco, The Mall Korat
- 5) Yod Cha, The Mall Korat
- 6) Nobi Cha, Nakhon Ratchasima Rajabhat University
- 7) WE DRINK, Front of Rajamangala University of Technology Isan

2. Restaurants in Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima:

5 restaurants were selected for having Thai food menus translated into Chinese:

- 1) Pen Lao Restaurant
- 2) Krua 505 Khao Hom Nutrition, Khao Yai
- 3) Krua Khao Yai
- 4) Khao Tom Luek Heng
- 5) Krua Nam Prik Tua Kao

### 1. Conceptual Framework



## 2. Theories Related to the Research

Numtong (2020, p. 60) states that translation is a linguistic activity used in cross-cultural communication, where the translator acts as an intermediary between users of different languages. The core of translation is “meaning”, which requires an understanding of the source text and the ability to convey the meaning in a way that the target audience understands.

Saengaramuang (2020, p. 7) explains the German expert’s definition of translation, stating that translation is not just a process of code conversion, where the translator only acts as the code changer. We do not translate content in isolated chunks but rather translate the entire text as a whole. This is because language does not arise in isolation; it is influenced by specific situations and contexts that require communication, with cultural frameworks involved. Fairmeyer emphasizes that translation is a cultural transfer (Kulturtransfer), while Hönig and Kussmaul view the text as part of the social culture expressed through language. From this, we can conclude that translation is the reorganization of the text to align with a specified situation and to be part of the target culture.

Saibua (2017, p. 2) states, “Translation is the process of conveying the meaning of the original text to the translated text. This is the primary goal for translators, to transfer the information from the source language while preserving the most accurate meaning. It is a key factor in determining the quality of a translation. A quality translation is one that preserves the essence of the original text. When someone reads the translated text, they should have the same response as the reader of the original text. This is a meticulous task”.

Pinmanee (2019, p. 41) explains that “Translators must possess skills in reading, analysis, and interpretation, as well as writing skills. Writing is not about expressing one’s own thoughts but about conveying the thoughts of others. The translator must assume the role of another person, expressing their ideas in a different language. This means the translator must work with two linguistic systems and understand the social and cultural contexts of both the source and target languages”.

Based on the statements above, we can conclude that translation means the process of conveying the meaning from the source language into another language while maintaining the original meaning or as closely as possible, so that the recipient of the message understands it as accurately as possible.

## **Research Methodology**

### **1. Population and Sample**

#### **1.1 Population**

The population used in this study consists of the names of Thai food and beverages from restaurant and beverage shop menus that have been translated into Chinese in Nakhon Ratchasima Province.

#### **1.2 Sample**

The researcher selected the sample using purposive sampling. The scope of the data was drawn from the menus of restaurants and beverage shops in two districts of Nakhon Ratchasima Province, with one sub-district from each district: Nai Mueang sub-district in Mueang district and Mu Si sub-district in Pak Chong district. A total of 13 establishments were selected, with 412 names of food and beverages that have been translated

into Chinese and are in actual use. The researcher applied the following sampling methods:

1.2.1 Names of Savory Dishes – 315 names, divided into 4 categories:

- 1) Fried and Grilled Dishes – 79 names
- 2) Boiled, Curry, and Steamed Dishes – 63 names
- 3) Stir-fried Dishes – 102 names
- 4) Spicy Salads, Larb Dishes – 71 names

1.2.2 Names of Sweet Dishes – 10 names

1.2.3 Names of Beverages – 87 names

## **2. Research Instruments**

The translation principles of Saibua (2017) classify translation into two types: literal translation and free translation.

## **3. Data Collection**

3.1 Collect the names of food and beverage menus that have already been translated into Chinese as samples from restaurants and beverage shops in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima Province.

3.2 Classify the types of food and beverages and analyze the translation strategies used for the food and beverages.

3.3 Collect data from the sample group to identify which translation strategy is used most frequently and improve the menus that are incorrect or difficult to understand.

3.4 Verify and summarize the results.

## Research Results

### **1. Analysis of Translation Strategies for Thai Food and Beverage Names in Restaurant and Beverage Shop Menus Translated into Chinese in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima Province**

Before conducting the analysis, the researcher collected the names of Thai food and beverages that had been translated into Chinese from 13 restaurants and beverage shops in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima Province, with a total of 412 names. The researcher classified the names into two categories: food and beverages. The food category was further divided into two sub-categories: savory food and sweet food, with the savory food category further split into four types: fried and grilled, boiled, curry and steamed, stir-fried, and spicy salads/larb.

The research on analyzing the translation strategies for Thai food and beverage names into Chinese in Nakhon Ratchasima Province from the 13 restaurants in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, with a total of 412 names, classified the food into two categories: savory and sweet food. The savory food was further divided into four types: fried and grilled, boiled, curry and steamed, stir-fried, and spicy salads/larb, as well as the beverage category. Using the translation theory of Saibua (2017), which includes two strategies: literal translation and free translation, the results can be summarized as follows:



### 1.1 Fried and Grilled Dishes – 79 Names

Literal Translation: 61 names, which account for 77%.

Free Translation: 18 names, which account for 23%.

An example is shown in Table 1.

**Table 1**

*Table Showing Examples of the Analysis of Translation Strategies for Fried and Grilled Dishes*

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
1	ไข่ดัดไส้	蛋+卷 ไข่+ม้วน	Free Translation
2	หมูทอดกระเทียมพริกไทย	蒜香+胡椒+炸+猪肉 กระเทียม+พริกไทย+ทอด+เนื้อหมู	Literal Translation
3	ไก่ทอดกระเทียมพริกไทย	蒜香+胡椒+炸+鸡 กระเทียม+พริกไทย+ทอด+ไก่	Literal Translation
4	ปลากะพงราดพริก	香椒+浇+鲈鱼 พริกหอม+ราด+ปลากะพง	Literal Translation
5	ปลากะพงสามรส	三味+鲈鱼 สามรส+ปลากะพง	Literal Translation

### 1.2 Boiled, Curry, and Steamed Dishes - 63 Names

Literal Translation: 38 names, accounting for 60%.

Free Translation: 25 names, accounting for 40%.

An example is shown in Table 2.

**Table 2**

*Examples of the Analysis of Translation Strategies for Boiled, Curry, and Steamed Dishes*

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
1	แกงจืดไก่	鲜鸡+汤 ไก่สด+แกง	Literal Translation
2	ต้มยำปลากะพง	酸辣+鲈鱼+汤 เปรี้ยวเผ็ด+ปลากะพง+ซุป/แกง	Literal Translation
3	ต้มยำกุ้งก้ามกราม	酸辣+沼虾+汤 เปรี้ยวเผ็ด+กุ้งก้ามกราม+ซุป/แกง	Literal Translation
4	แกงอ่อมหมู	香+辣+茼蒿+汤+猪肉 หอม+เผ็ด+ผักชีลาว+ซุป+เนื้อหมู	Free Translation
5	แกงอ่อมไก่	香+辣+茼蒿+汤+鸡肉 หอม+เผ็ด+ผักชีลาว+ซุป+เนื้อไก่	Free Translation

### 1.3 Stir-fried Dishes - 102 Names

Literal Translation: 85 names, accounting for 83%.

Free Translation: 17 names, accounting for 17%.

An example is shown in Table 3.

**Table 3**

*Examples of the Analysis of Translation Strategies for Stir-fried Dishes*

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
1	ข้าวผัดปลาเค็ม	咸鱼+炒饭 ปลาเค็ม+ข้าวผัด	Literal Translation
2	ข้าวผัดพริกแกง	辣汁+炒饭 ขอสพริก+ข้าวผัด	Free Translation

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
3	หมูผัดพริกสด	鲜椒+炒+肉	Literal
		พริกสด+ผัด+หมู	Translation
4	ผัดผักเบบี๋คอตกุ้งแห้ง	生菜+炒+虾米	Free
		ผักกาดหอม + ผัด+กุ้งแห้ง	Translation
5	ผัดต้นอ่อนทานตะวัน	炒+ 向日+葵苗子	Literal
		ผัด+ดอกทานตะวัน+ต้นอ่อนทานตะวัน	Translation

1.4 Spicy Salads, Larb Dishes - 71 Names

Literal Translation: 60 names, accounting for 85%.

Free Translation: 11 names, accounting for 15%.

An example is shown in Table 4.

Table 4

*Examples of the Analysis of Translation Strategies for Spicy Salads, Larb Dishes*

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
1	ตำลาว	腌鱼+青木瓜+沙拉	Free
		ปลาดอง+มะละกอ+สลัด	Translation
2	ตำไทย	泰式+青木瓜+沙拉	Literal
		แบบไทย+มะละกอ+สลัด	Translation
3	ตำปู	咸蟹+青木瓜+沙拉	Literal
		ปูเค็ม+มะละกอ+สลัด	Translation
4	น้ำตกหมู	辣+拌+猪肉	Free
		เผ็ด+คลุก/ผสม+เนื้อหมู	Translation
5	ซุบหน่อไม้	凉拌+竹笋	Literal
		ยำ/ลาบ+หน่อไม้	Translation

## 5. Sweet Dishes - 10 Names

Literal Translation: 9 names, accounting for 90%.

Free Translation: 1 name, accounting for 10%.

An example is shown in Table 5.

**Table 5**

*Examples of the Analysis of Translation Strategies for Sweet Dishes*

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
1	ไอศกรีมมะพร้าวน้ำหอม	椰汁+冰淇淋 น้ำมะพร้าว+ไอศกรีม	Literal Translation
2	ไอศกรีมซอฟต์เสิร์ฟ รสสตอเบอร์รี่	草莓+冰淇淋 สตอเบอร์รี่+ไอศกรีม	Literal Translation
3	มะพร้าว น้ำหอมคว้านกะลา	清香+椰+果肉汁 กลิ่นหอม+มะพร้าว+เนื้อมะพร้าว	Free Translation
4	ปังเนยเยิ้มเชียงใหม่	清迈+鲜奶油+面包 เชียงใหม่+เนยสด+ขนมปัง	Literal Translation
5	พุดดิ้งไข่(วันมะพร้าว)	鸡蛋+布丁+(椰果) ไข่ไก่+พุดดิ้ง+(มะพร้าว)	Literal Translation

## 6. Beverages - 87 Names

Literal Translation: 79 names, accounting for 91%.

Free Translation: 8 names, accounting for 9%.

An example is shown in Table 6.

**Table 6***Examples of the Analysis of Translation Strategies for Beverages*

No.	Dish Name (in Thai)	Translation Analysis	Translation Strategy Used
1	ไข่มุกบราวน์ชูการ์ ชันเดย์	黑糖+珍珠+圣代 น้ำตาลทรายแดง+ไข่มุก+ไอศกรีม	Literal Translation
2	มัทฉะถั่วแดง ชันเดย์	红豆+抹茶+圣代 ถั่วแดง+มัทฉะ+ไอศกรีม	Literal Translation
3	ช็อคโกแลตโอรีโอ้สมูทตี้ ซอฟต์เสิร์ฟ	巧克力+奥利奥+雪顶 ช็อคโกแลต+โอรีโอ้+ยอดหิมะ	Free Translation
4	เอสเปรสโซ่	浓缩+咖啡 สกัดเข้มข้น+กาแฟ	Free Translation
5	ชากุหลาบน้ำผึ้ง	蜂蜜+玫瑰+茶 น้ำผึ้ง+กุหลาบ+ชา	Literal Translation

## 2. Improvement and Correction of the Translation of Thai Food and Beverage Names into Chinese in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima Province That Are Incorrect and Difficult to Understand

After analyzing the menus of each restaurant, the researcher found that there were some restaurants with incorrect translations and others that had misspelled Thai food names. The following are the suggested corrections:

### 2.1 Restaurant 505 Khao Hom Nutrition – 5 Dishes

1) 三层炸鱼路 (Sam Chan Thod Nam Pla - Thai translation: Three-layered fried fish with fish sauce) The researcher suggests using 五花肉 instead of 三层, as the latter refers to a building's floor level, while 五

花肉 correctly refers to pork belly. Additionally, 鱼露 should be used instead of 鱼路, as 路 means road, not fish sauce. The corrected translation is 五花肉炸鱼露.

2) 香脆猪肉( Moo Dad Diew - Thai translation: Crispy dried pork) The researcher suggests using 干 instead of 香脆, as 香脆 means crispy and aromatic, which may confuse customers into thinking it's crispy pork. The new translation is 猪肉干.

3) 鱼露蒸鲈鱼 (Pla Ka Pong Thod Nam Pla - Thai translation: Fried sea bass with fish sauce) The researcher suggests replacing 蒸, which means steaming, with 炸, as it refers to frying. The corrected translation is 鱼露炸鲈鱼.

4) 咸蛋炒虹 (Goong Pad Kai Kem - Thai translation: Stir-fried shrimp with salted egg) The researcher suggests using 虾 instead of 虹, as 虹 means rainbow, not shrimp. The corrected translation is 咸蛋炒虾.

5) 炒罗勒海鲜 (Pad Kra Pao Talay - Thai translation: Stir - fried seafood with holy basil) The researcher suggests using 圣罗勒 instead of 罗勒, as 罗勒 refers to basil, but in this case, it should refer to “holy basil”. The corrected translation is 圣罗勒炒海鲜.

## 2.2 Restaurant Nam Prik Tua Kao – 6 Dishes:

1) 炒鸡蛋鱿鱼和蔬菜 (Pla Muek Pad Kai Kem - Thai translation: Stir-fried squid with salted egg) The researcher suggests using 咸蛋 instead of 鸡蛋, as 鸡蛋 refers to chicken eggs, not salted eggs. The new translation is 咸蛋炒鱿鱼.

2) 炒鸡蛋鱼肉和蔬菜 (Nuea Pla Pad Kai Kem - Thai translation: Stir - fried fish with salted egg) Again, the researcher suggests

using 咸蛋 instead of 鸡蛋 for the correct translation. The corrected translation is 蔬菜炒咸蛋鱼肉.

3) 炒鸡蛋什锦海鲜和蔬菜 (Talay Ruam Pad Kai Kem - Thai translation: Stir-fried mixed seafood with salted egg) The researcher suggests using 咸蛋 instead of 鸡蛋, as 鸡蛋 refers to chicken eggs, not salted eggs. The new translation is 蔬菜炒咸蛋什锦海鲜.

4) 炒蟹肉和咖喱炒蔬菜 (Poo Nim Pad Pong Kari - Thai translation: Stir-fried soft-shell crab with curry powder) The researcher suggests using 软壳蟹 instead of 蟹肉, as 蟹肉 means crab meat, while the restaurant intended to say soft-shell crab. The corrected translation is 软壳蟹炒咖喱蔬菜.

5) 罗勒炒牛肉 (Pad Kra Pao Nuea - Thai translation: Stir-fried beef with holy basil) The researcher suggests using 圣罗勒 instead of 罗勒, as 罗勒 refers to basil, but in this case, it should refer to "holy basil." The corrected translation is 圣罗勒炒牛肉.

6) 调味鱿鱼泡菜 (Yam Pla Muek - Thai translation: Spicy squid salad) The researcher suggests using 凉拌 instead of 调味, as 调味 means seasoning, while the intended meaning is for "spicy salad". The corrected translation is 凉拌鱿鱼.

### 2.3 Restaurant Khao Tom Luek Heng – 5 Dishes:

1) 油炸鲭鱼 (Pla Insee Song Khrueng - Thai translation: Fried mackerel) The researcher suggests using 马鲛鱼 instead of 鲭鱼, as the latter refers to mackerel, while the restaurant intends to indicate a different type of fish. The corrected translation is 油炸马鲛鱼.

2) 柠檬尤鱼酸辣汤 (Tom Yum Muek Manao - Thai translation: Lemon squid spicy soup) The researcher suggests using 鱿鱼 instead of 尤

鱼, as the latter refers to a different type of fish. The corrected translation is 柠檬鱿鱼酸辣汤.

3) 罗勒皮蛋 (Kra Pao Kai Yiew Ma - Thai translation: Stir-fried holy basil with century egg) The researcher suggests using 圣罗勒 instead of 罗勒, as 罗勒 refers to basil, but in this case, it should refer to “holy basil”. The corrected translation is 皮蛋圣罗勒.

4) 煎鱿鱼配鸡蛋 (Pla Muek Pad Kai Kem - Thai translation: Stir-fried squid with salted egg) The researcher suggests using 咸蛋 instead of 鸡蛋, as 鸡蛋 refers to chicken eggs, not salted eggs. The corrected translation is 煎鱿鱼炒咸蛋.

5) 煎蛋沙拉 (Yam Kai Dao - Thai translation: Fried egg salad) The researcher suggests using 荷包蛋 instead of 煎蛋, as 煎蛋 refers to a fried egg, while the restaurant intended to refer to “fried egg” in a different context. The corrected translation is 荷包蛋沙拉.

#### 2.4 Restaurant Xiao Xiao - 2 Dishes:

1) 蒜香炸全蟹 (Poo Nim Thod Kratiem Prik Thai - Thai translation: Soft-shell crab with garlic and pepper) The researcher suggests using 软壳蟹 or 嫩蟹 instead of 全蟹, as 全蟹 means whole crab, while the restaurant intended to refer to soft-shell crab. The corrected translation is 蒜香炸软壳蟹 or 蒜香炸嫩蟹.

2) 咖喱炒全蟹 (Poo Nim Pad Pong Kari - Thai translation: Stir-fried soft-shell crab with curry powder) The researcher suggests using 软壳蟹 or 嫩蟹 instead of 全蟹, as 全蟹 means whole crab. The corrected translation is 咖喱炒软壳蟹 or 咖喱炒嫩蟹.



## Discussion of Results

The research analyzes the translation strategies for Thai food and beverage names into Chinese from 13 restaurants in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima Province, with a total of 412 names. The food was divided into two main categories: savory food (315 names) and sweet food (10 names). The savory food was further divided into four subcategories: fried and grilled (79 names), boiled, curry, and steamed (63 names), stir-fried (102 names), and spicy salads/larb (71 names). The beverage category contained 87 names. The researcher applied Saibua's translation strategies, which include two types: literal translation and free translation.

The researcher found that most menus in the restaurants and beverage shops in Nai Mueang Sub-district, Mueang District, and Mu Si Sub-district, Pak Chong District, Nakhon Ratchasima, predominantly used literal translation, accounting for 81%. In contrast, free translation was used less, accounting for 19%. The researcher also found that the results of this study were consistent with two other research studies: Patipa et al. (2023, p. 362), who studied translation strategies for Isan food names, Tongkaw and Shaoxian (2024, p. 1), who studied translation strategies for Northern food names into Chinese.

These three studies also found that literal translation was the most common strategy, which aligns with the findings of this research. However, other studies that did not align with this research found that transliteration with explanatory elements and word expansion translation were more commonly used strategies. This discrepancy can be attributed to the fact

that in the majority of the restaurants and beverage shops in Nakhon Ratchasima Province, literal translation was the most widely used translation strategy.

## Recommendations

1. In future research, it would be beneficial to study the names of Thai food and beverages translated into Chinese in key tourist areas of other provinces.

2. It is recommended to study the translation of food and beverage names into other languages.

## References

- Numtong, K. (2020). *Chinese to Thai translation skills* (1st ed.). Charansanitwong Printing.
- Patipa, K., Aeka, A., & Meesuksabai, J. (2012, April 6). *Translation strategies for Isan food names* [Paper presentation]. *The 5th National Conference and Research Presentation*, Bangkok, Thailand.
- Pinmanee, S. (2019). *Language, culture, and translation: Thai – English* (1st ed.). Chulalongkorn University Press.
- Saengaramruang, W. (2020). *Theories of Translation* (4th ed.). Chulalongkorn University Press.
- Saibua, S. (2017). *Principles of translation* (9th ed.). Thammasat University Press.
- Tongkaw, N., & Shaoxian, X. (2024). Translation Strategies of Northern Thai Food Names From Thai into Chinese. *Srinakharinwirot Research and Development Journal of Humanities and Social*

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