



Country card

Thailand 2024





HI Team and intervention areas

HI Thailand has 56 staff members

Thailand



General data of the country



a. General Data

Country ¹	Thailand	Neighboring country (Myanmar)	France	
Population	69.950.844	54.806.014	67.499.343	
IHDI	0.646	0.581	0.90	
Maternal mortality	24	244	4	
Gender Development Index	1.007	0.953	0.987	
Population under HCR mandate	662.912	1.271.011	580.898	
INFORM index	4.1	6.2	2.3	
Fragile State Index	70	100	30.9	
GINI Index	35	30.7	32.4	
Population covered by at least one social protection benefit (%)	68	6.3	100	

b. Humanitarian law instruments ratified by the country

Humanitarian law instruments	Status
Mine Ban Treaty	Ratified in 1998
Convention on Cluster Munitions	Not signed
UN Convention on the Rights of Persons with Disabilities	Ratified in 2008

 $^{^{1}\,\}underline{\text{https://hinside.hi.org/intranet/jcms/pl1}}\,\,2540344/\text{fr/2020-update-country-indicators-2ndary-data-/-donnees-secondaires-}\\\underline{\text{mises-a-jour}}$



c. Geopolitical analysis

Thailand is a unitary state, the only Southeast Asia country never colonized by a European power. The majority of the population is Buddhist. Religion is a great influence on Thai's everyday life. The Thai culture is a mix of Indian influences, Chinese traditions, and elements that are uniquely Thai. Despite a strong unity of the Thai culture, each of the four regions composing Thailand has its own unique cultural and geographic features (Thailand is a country of some 70 ethnic groups). Thailand is the 50th largest country in the world and the 20th most populated country, with half of its population living in urban areas.

Over the last four decades, Thailand has made remarkable progress in social and economic development, moving from a low-income to an upper-income country in less than a generation. Thailand's economic fundamentals are sound, with low inflation, low unemployment, and reasonable public and external debt levels. While Thailand has been successful in stemming the tide of COVID-19 infections, the outbreak has led already to widespread job losses, particularly in tourism, affecting poor and middle-class households, and threatening hard-won gains in poverty reduction. Poverty declined substantially over the last 30 years from 65.2% in 1988 to 9.85% in 2018 (based on official national estimates). However, the growth of household incomes and consumption growth both have stalled nationwide in recent years. Inequality – as measured by the Gini coefficient – increased between 2015 and 2017. During this period, average household consumption per capita grew, but the household consumption of the bottom 40% of the population shrank.

Over the past 15 years, Thailand's prevalence of diabetes and hypertension have respectively tripled and quadrupled, and combined with high rates of road injuries, has negatively affected adult survival rate. Only 87% of 15-year-olds are expected to live past age 60.

Thailand has been a major destination country for asylum seekers and refugees from Myanmar for the past decades. However, Thailand is not a signatory to the 1951 Refugee Convention or its 1967 Protocol and does not have a formal national asylum framework.

A UNHCR Facilitated Voluntary Repatriation (FVR) process was put in place in the 9 temporary shelters since 2016. As of today, only 1,039 refugees returned to Myanmar through this process. Returns are far below the UNHCR expectations, which has revised its strategy since 2019 and is now considering migrant worker status as another durable solution for refugees. INGOs, through the Committee for Coordination of Services to Displaced Persons in Thailand (CCSDPT), also advocate for such status with the Thai authorities. More than 91,400 refugees remain confined in 9 camps as reported by UNHCR in August 2022, but the funds from institutional donors continue to fall. Since January 2017 the resettlement process to third countries (mainly USA, Canada and Australia) is over. Only family reunification and cases requiring medical treatment outside of Thailand have been considered for resettlement since then. Following the coup d'etat in Myanmar in February 2021, as well as deteriorating Covid-19 situation, all refugee cross-border movements between Thailand and Myanmar were stopped, including returnee movements under UNHCR's Voluntary Repatriation program.

On the other hand, after the Myanmar coup, tens of thousands of internally displaced people in South-East have crossed the border into Thailand. Some (estimates are unreliable, but up to 20,000) have managed to enter the formal refugee camps, despite the Thai Government strict policy of not receiving new arrivals into these shelters. Additionally, 20,000 – 30,000 of displaced people crossed the border into the border areas of Thailand outside of refugee camps, mainly from Karen and Karenni States. In some cases, displaced families stay only for few days and return back to Myanmar, while in some cases they stay on Thai soil for weeks or months.

Thailand Government has tried to limit the cross-border displacement by keeping the temporary displacement sites under the military control and limiting access to UNHCR and INGOs in terms of support. This has, however, changed in 2023 and again in 2024, when the authorities showed more flexibility, allowing the creation of Temporary Safety Areas (TSAs) and permitting limited access to the international organizations. At its peak, there were more than 9,000 people in five TSAs. The last TSA was closed on 21 January 2024.

According to the Royal Thai Government (RTG), 48,408 refugees have crossed into Thailand to flee fighting and seek protection since February 2021. As part of the on-going preparedness efforts, humanitarian agencies projected up to 40,000 people potentially seeking refuge in Thailand this year, from 1 January to the

end of December 2024. In carrying out this preparedness planning, humanitarian agencies took into consideration the SOPs of the RTG. In parallel to this, advocacy will continue for non-refoulement and



for humanitarian access for all those seeking protection in Thailand.

Summary of HI presence in the country

HI Operations in Thailand started in 1982 and operates along the border with Myanmar since 1984. The main activities since then have been: fitting refugees with locally-produced prostheses, community-based rehabilitation2, empowerment of people with disabilities and their inclusion in local communities (villages, neighbourhoods, etc.), and the prevention of mine and explosive ordnance accidents through risk education activities.

Since January 2016, the site is managed within the MyTh program (created in January 2016 with its regional office in Yangon), in line with the refugees' repatriation process, and aims at strengthening the coordination between HI activities in Myanmar and in Thailand around refugees' reintegration. MyTh Regional Strategy 2018-2020 has been developed and reviewed in 2023.

In 2024, the process of integration of Thailand and Myanmar into a regional South-East Asia (SEA) program has started, and is expected to be completed by January 2025.

a. Main achievements

- → HI is the sole actor in 9 camps doing awareness raising on mine/EO risk.
- → Funding is secured until 2025.
- → HI actively participates in main CCSDPT working group and meetings (health, livelihood, protection, Wash and education) as well as other coordination forum such as the Protection WG led by UNHCR, MoI meetings and camp management and other stakeholders.
- → HI established SHGs of people with disabilities to increase awareness on the rights of people with disabilities among camp population, structure and stakeholders and to assist their inclusion into community life and their access to services available.
- → HI has conducted a protection survey of persons with disabilities to document risk faced in the camps, especially by women and girls with disabilities.
- → HI is working with TBC to screen people with disabilities in all 9 camps.
- → Coordination with Karen ethnic groups, notably the Karen Department of Health and Welfare (KDHW) and Mae Tao Clinic has been reinforced to develop partnership in non-government controlled areas in Karen state.
- → Since 2022, coordination with Shan and Karenni health and education groups has been enhanced, in order to respond to the Rehab (especially prosthetics for amputees), EORE, social inclusion and MHPSS needs of the people displaced from Myanmar.

² Community-based rehabilitation (CBR) consists in involving and training the friends and family of disabled people in rehabilitation exercises and care to ensure their self-reliance.



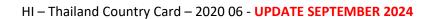
Overview on ongoing projects

Sectors of services where HI conducts projects and focus on beneficiaries and operational partnerships

Main sectors of intervention	Main activities	Beneficiaries	Partners	Location	Dates of beginning and end of the project	Donors
Rehabilitation	Assistive technology workshops producing orthoses, prostheses and technical devices; Rehabilitation centres providing physiotherapy and occupational therapy to people with disabilities and advice to their families/caregivers; Community volunteers supplying occupational therapy and physiotherapy at home; Development of rehabilitation return kits (consumables and counselling, with referral to HI Myanmar) Promotion of early detection of disabilities in children in partnership with other NGOs Chronic pain support for elderly Promotion of delay development among education system Capacity building trainings for NGOs, CBOs and Community Leaders on disabilities, early detection and referral mechanism. Provision of rehabilitation services, assistive devices and prosthetics to the people	People with disabilities (adults and children, including landmine survivors) Caregivers / family members Refugee health workers from partner INGOs	•Malteser International; •International Rescue Committee; •Siridohorn National Medical Rehabilitation Centre and School; •Mae Sot General Hospital; • Mae Tao Clinic; •Phrae Hospital; • Karen Women Organization KWO; •Rangsit University • Karen Department of Health and Welfare (KDHW)	Mae La, Umpiem Mai, Nu Po, Mae Ra Ma Luang and Mae La Oon Refugees Camps	30/12/2015 - 31/12/2025	EU UNHCR



	displaced from Myanmar in Thailand (2022).					
Disability Social Inclusion* (including MHPSS)	Advising Persons with Disabilities and their caregivers to access VolRep and facilitated return Support and empower DPO/Self-Help Groups Peer support and psychological support to PwD and their caregivers. Vocational Training Training of mainstream agencies and camp management structures on disability inclusion Awareness raising on disability inclusion	Persons with disabilities and their caregivers Self Help Groups Mainstream INGOs/Agencies Camp management Structures Community	UNHCR COERR TBC IRC Foundation of Empowerment of Persons with Disability Thailand	Mae La, Umpiem Mai, Nu Po, Mae Ra Ma Luang, Mae La Oon, Ban Nai Soi and Ban Mae Surin Refugee Camps	31/12/2015 14/09/2025	UNHCR PRM
Explosive Ordnance (EO) Risk Education	Provision of EORE/CPP trainings, briefings and sessions to the vulnerable target groups Mass awareness raising Integration of RE into KnED school' curricula Pre-departure EORE/CPP refresher sessions in the 9 temporary shelters in the framework of UNHCR facilitated Voluntary Repatriation process (on hold in 2022). Capacity building for the community response groups to the influx of displaced people from Myanmar to Thailand in 2022 (post-coup), accompanied with the provision of EORE materials.	All camp population with focus on most at risk groups (children, travellers, boarding students and refugees willing to return)	UNHCR KnED FilmAid	Ban Nai Soi, Ban Mae Surin, Mae La Oon, Mae Ra Ma Luang, Mae La, Umpiem Mai, Nu Po, Ban Don Yong and Tham Hin Refugees Camps	31/12/2015 14/09/2025	UNHCR PRM







Donors

United Nations High Commissioner for Refugees



US Department of State Bureau of Population, Refugees and Migration (PRM)



European Union





HI in Thailand has been consistently supported for several years by the 3 key donors that have continued providing funding for the protracted refugee crisis in Thailand: the Bureau of Population, Refugees and Migration (BPRM) USA, the European Union, and UNHCR.

As of 2024, those three donors continue to provide funding for Rehabilitation, EORE, and Disability & Social Inclusion / MHPSS services within the 9 refugee camps.

Following the humanitarian needs in the border areas of both Myanmar and Thailand instigated by the military coup in Myanmar in 2021, BPRM has added additional funding for the emergency response outside of the refugee camps as well. This additional funding for the influx and cross-border support has been renewed for the 2023/24 FY.

In 2023-24, HI Thailand also received emergency funds from MOFA-LUX, to support the influx and cross-border Rehab response (with adjoining components of MHPSS and EORE/CPP), predominantly for the displaced people affected by the ongoing crisis in Karenni State.