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COVID-19: Prayut's Dilemma - Save Lives or Jobs

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EXECUTIVE SUMMARY

- Thailand, a popular tourist location for Chinese tourists saw its first two Covid-19 cases imported from Wuhan tourists. The third was a Thai who had travelled to Wuhan and returned with the disease.
- Prime Minister Prayut Chan-ocha set up a national centre to fight COVID-19 and ordered drastic measures with active support and sound advice from health professionals. Thailand's strong health-care system, aided by more than a million health volunteers, was sufficiently prepared to cope with the new disease.
- After the Songkran holiday week in mid-April, the outbreak in Thailand appeared under control. The country of 70 million fared relatively well among ASEAN members, with low numbers of infections and deaths. Calls for an end to the state of emergency declared by Prime Minister Prayut and for a relaxing of curbs on business activity have emerged.
- Prayut is facing a dilemma: whether to continue the state of emergency and lockdowns to save lives while the risk from COVID-19 remains dangerously high, or to relax some curbs to save jobs and rescue businesses at a time when the Thai economy is heading into a recession.

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INTRODUCTION

Thailand's popularity among Chinese tourists – especially those from Wuhan – dangerously exposed the country to COVID-19. But before the situation grew too serious, Prime Minister General Prayut Chan-ocha took drastic measures to contain the deadly virus. He based these measures on sound advice from health professionals. By the week of the Songkran holiday in mid-April, the outbreak appeared under control in Thailand.

As of 17 April, there were 2,700 COVID-19 cases among Thailand's population of 70 million, or about 4 cases per 100,000 people. Forty-seven had died of the virus. By that time, more than 2.24 million people in 185 countries had been infected, and 154,215 of them had died.¹

As of the same date, the 10 ASEAN countries reported altogether 25,435 cases of COVID-19, with 1,050 deaths. ASEAN's four hardest hit members were Indonesia, with 5,923 cases and 520 deaths; the Philippines, with 5,878 cases and 387 deaths; Malaysia, with 5,251 cases and 86 deaths; and Singapore, with 5,050 cases and 11 deaths.²

What did Thailand do right? And what can its next move be?

INITIAL RELUCTANCE

Tourism accounted for about 16 percent of Thailand's GDP in recent years. In 2019, Thailand welcomed nearly 40 million foreign tourists. About 11 million of them, or 28 per cent, came from China, spending about 543,000 million baht (US\$17 billion) during their visit.³

The Prayut Administration was at first reluctant to take any measure that could hurt tourism or turn away Chinese tourists. In January alone, 1.03 million Chinese visited Thailand. The kingdom was among the top overseas destinations of Wuhan people before the Chinese city came under a total lockdown on 23 January. From 3 to 23 January, about 21,000 Wuhan Chinese entered Thailand as tourists.⁴

In the wake of an outbreak of a mysterious pneumonia in Wuhan, Thai health officials had on 3 January begun disease control surveillance in Bangkok and other popular tourist destinations for direct flights from Wuhan on 3 January. However, there was no ban on the entry of travellers from China, and these were simply subject to thermal scans on arrival like all other inbound visitors. In February, the number of Chinese arrivals in Thailand dropped to 160,564, chiefly because of China's own restrictions on overseas travel.⁵

On 13 March, Thailand began to impose new restrictions on travellers — not only those coming from China, but also those from Hong Kong, Macau, South Korea, Iran and Italy. All visitors from these “hot zones” were required have a “fit to fly” doctor's assurance and health insurance coverage of at least US\$100,000. They must enter state quarantine if they had high fever. If they were healthy, they must still stay home or stay in their hotels for 14 days. These measures were a convenient way of reducing tourist arrivals without offending China.

But it was already too late. The deadly virus had entered Thailand via infected Chinese tourists from Wuhan.

The first COVID-19 case in Thailand was a 61-year-old from Wuhan who arrived at Bangkok's Suvarnabhumi International Airport on 8 January. She was found to have a high fever, and was rushed to hospital. On 12 January she returned to Wuhan.⁶ The second case, found on 13 January, was also a Wuhan tourist. The first Thai diagnosed with the virus was detected on 15 January. She was a 74-year-old grandmother who had visited Wuhan and become unwell after her return. She survived to warn the Thai public about the dangerous new disease.

PRAYUT LED THE FIGHT AGAINST COVID-19

Public dissatisfaction with the Prayut government began to increase when facial masks and hand sanitiser disappeared from the open market after they were gazetted as “controlled products” on 4 February. Demand for these goods soared when the government advised people in Thailand to wear masks in public and to wash their hands frequently. These much-needed products soon emerged for sale at exorbitant prices on the online black market.

Prayut has often been criticised for being indecisive and inarticulate. He has no direct control over any of the 18 political parties in the government coalition. But he did finally act to control the worsening coronavirus situation in the country. On 12 March – the day the WHO officially declared COVID-19 a worldwide pandemic – he set up the Centre for the COVID-19 Situation Administration (CCSA), with himself as its head, to spearhead the national campaign against the outbreak. One of its first objectives was to secure a steady supply of masks and hand sanitiser for frontline health personnel and for the broader public.

On 15 March, without consulting Commerce Minister Jurin Laksanawisit, Prayut sacked the director-general of the Commerce Ministry's Department of Internal Trade, Vichai Pochanakij. He held this senior official responsible for failing to stop the hoarding of masks and hand sanitisers and to halt price gouging.

On 22 March, the daily number of newly diagnosed cases of the virus rose to an unprecedented 188. Rioting broke out in the provincial prison in Buriram on 29 March, after all visits were suspended. Fortunately, Prayut received active support and sound advice from a large team of senior medical school professors, experts on contagious diseases and public health professionals; and necessary drastic measures could be implemented without delays.

The CCSA's televised daily briefing from Government House, delivered by its spokesman Dr Thaweetilp Wissanuyothin, quickly captured national attention. The 43-year-old physician is a knowledgeable mental-health specialist. His smooth delivery of up-to-date statistics and useful information on the outbreak situation has managed to calm anxious Thais. Thanks to his briefings, public understanding began to increase, and this in turn helped generate growing cooperation with and support for the health measures that the government had taken.

On 25 March, Prayut declared a state of national emergency, to last from 26 March to 30 April. In effect, he took government power into his own hands under the 2005 Royal Decree on Government Administration in Emergency Situations. This has allowed him to bypass ministers, cut red tape and issue direct orders to get things done quickly.

LOCKDOWNS AND THE CANCELLATION OF SONGKRAN

Like many “hot zones” around the world, Thailand closed down shopping malls, sport stadiums, boxing arenas, bars, restaurants, schools and universities, and other venues in order to minimise close contact among people. Government officials and office employees began to work from home. Social distancing under the slogan “Stay Home, Stop the Germ, Help the Nation” started in earnest. Community efforts to provide food for the needy and additional assistance to struggling families were organized.

As of the end of 2019, official records showed there were about 3 million foreign workers in Thailand. At the approach of the Songkran holiday, a large number of workers from Myanmar, Cambodia and Laos returned home, but many others continued to work. By the end of the Songkran week, some 1.27 million foreign workers had applied to extend their expiring work permits, about 1 million of them from Myanmar.⁷

How these foreign workers have coped with the pandemic is a bit of mystery. There have been no reports of serious infection among them. Their home countries also reported low levels of infections: as of 17 April, 138 cases in Myanmar, 122 in Cambodia and only 19 in Laos, without any deaths.

As the COVID-19 outbreak in Thailand continued, several provinces went into unprecedented lockdowns. Movement in and out of these provinces was severely restricted. Also, and for the first time, the public holidays on 13-14 April to mark Songkran, the beginning of the traditional Thai new year on 13 April, were cancelled.

The Ministry of Culture issued guidelines on how to stay safe during Songkran.⁸ Thais were strongly advised against travelling to visit parents for family reunions, for fear of bringing the virus to the old and vulnerable. If they lived together with their parents, safe physical distancing must be observed. Throwing water as part of the traditional celebration of the new year was prohibited.

Moreover, starting on 3 April, a nationwide curfew from 10 p.m. to 4 a.m. was imposed. A nationwide ban on the sale of all alcoholic beverages soon followed. While unpopular, these measures slowed the spread of COVID-19, flattening the infection curve down to fewer than 50 newly diagnosed cases a day and saving many lives. Last year, 517 people were killed in 30,212 road accidents during the Songkran week. During this year’s Songkran week (11-17 April), only 150 people were killed in 9,764 road accidents, according to the CCSA.

Provincial governors have been given special authority to impose additional measures. But they were also to be held directly responsible, should the infection situation in their respective provinces deteriorate.

The governor of Phuket, Phakaphong Tavipatana, was abruptly transferred from the island on 15 April. Phuket had the highest COVID-19 infection rate in the country — at 46 cases per 100,000 people, compared with Bangkok’s 24 cases per 100,000 — chiefly because of delays in closing down entertainment places and beaches in the province.

Prayut assigned the Supreme Commander of the Royal Thai Armed Forces, General Pornpipat Benyasri, to head an operations centre overseeing law enforcement and security matters during the emergency. General Pornpipat sought the public’s cooperation at checkpoints where soldiers assisted police and local authorities in checking documents and arresting violators of the curfew. Military officers were also appointed to head emergency operations centres at Thailand’s international airports in order to ensure the strict compliance of all air travellers with stringent health regulations.

A STRONG HEALTH-CARE SYSTEM

Even though Thailand is still a middle-income developing country, its public health system is strong. Thailand was ranked 77 among 189 countries in the UNDP’s 2020 Human Development Perspectives Report, well ahead of the Philippines (106), Indonesia (111) and Vietnam (118). The life expectancy at birth of every new born Thai is projected at 76.9 years, which is second in ASEAN only to Singapore’s 83.5 years.⁹

A 2019 Economist Intelligence Unit study ranked Thailand sixth in the world, and the best in ASEAN, in preparedness for a major infectious disease outbreak, ahead of Malaysia and Singapore which came at 18 and 24 respectively.¹⁰

Thailand has about 155,000 hospital beds nationwide, about 80 per cent in state hospitals; the rest are in private hospitals and clinics. The Thammasat University’s Medical School Hospital set up a field hospital with 308 beds to treat COVID-19 patients from Bangkok and surrounding areas.

In 2017, Thailand was ranked fifth in the world in medical tourism by the World Travel and Tourism Council.¹¹ With foreigners now unable to travel to Thailand for care, some private hospitals have introduced “health watch” packages of a 14-day stay and a coronavirus test, at a cost starting at 50,000 baht per person. At the same time, many of them have also joined state hospitals in providing free tests for COVID-19 and emergency treatment for those infected.

The Thai public health system also benefits immensely from an army of 1.04 million village health volunteers in the provinces and 15,000 community health volunteers in Bangkok. These volunteers have become the unsung heroes in the fight against COVID-19. They helped save lives by risking their own, going out to visit 11 million households nationwide. They explained safe social distancing and the basic symptoms of COVID-19, and they highlighted the availability of free testing and medical care. They helped with contact tracing and in identifying active coronavirus cases among high risk groups. By 17 April, the CCSA’s records showed that 142,589 tests had been conducted, and the virus detection rate was down from 3.82 per cent to 1.41 per cent.¹²

A new flexible treatment protocol has been introduced to maximise the use of health personnel and resources. Each COVID-19 patient usually needs intensive care for only one week; after that the patient can be moved to an isolation facility or a “hospitel” — a hotel converted into a quasi-hospital — and thus free up a hospital bed and medical equipment for a new patient.

Prayut, who is concurrently the defence minister, has also mobilised military doctors and paramedics in fighting COVID-19. The Royal Thai Navy’s Queen Sirikit Hospital in Sattahip set up the first state quarantine to accommodate 138 Thais evacuated from Wuhan on 4 February. The facility also accepted 83 Thai students from Milan on 23 March for a 14-day isolation period.

Word soon spread that conditions in the Sattahip facility were not as bad as previously feared.¹³ Hence, there was no reason to avoid state quarantine. The so-called “Sattahip Model” became the example of best practice for local quarantine elsewhere in the country.

Another major source of danger from COVID-19 came with the thousands of Thai who fled South Korea to return home. Their sudden influx and its scale forced Thai authorities to allow them to forego state quarantine. However, health officials were alerted to the need to track these workers and to advise them to stay home for 14 days after their arrival. Health volunteers were also deployed to monitor them and to offer support — checking their temperature, and providing masks to their family members — during their voluntary home quarantine.

Thailand did not encourage Thai students studying overseas and other Thais working outside of the country to rush home. They were instead advised to stay put if they felt safe. The state quarantine facility at Sattahip could accommodate only about 200 Thai returnees a day. Thais wishing to return home must register with Thai embassies or consulates in the countries where they find themselves and wait their turn to travel back to Thailand.

Because of this limitation on intake into the Sattahip facility, thousands of Thais had to wait several weeks in Malaysia. Many desperate Thais swam across the river that forms part of the Thai-Malaysian border to return illegally. They were arrested on arrival and sent for immediate screening and quarantine.

The government had to set up emergency quarantine facilities in the three southernmost provinces of Pattani, Narathivat and Yala to screen and isolate Thai returnees from Malaysia. The three provinces had earlier been hit by infections from Thai Muslims returning from Islamic gatherings in Malaysia and Indonesia.

THE NATIONAL AGENDA AND TEAM THAILAND

On 7 April, the Prayut cabinet endorsed a massive package worth 1,900 billion baht to fund emergency expenditures. Overcoming the pandemic was declared the “national agenda”, requiring the support of all in government, society and economy coming together as “Team Thailand”.

About 1,000 billion baht from new public borrowings would go into subsidies and economic recovery schemes, starting with a monthly cash handout of 5,000 baht to 14 million poor for three months.

The Bank of Thailand will utilise its cash on hand to inject new liquidity into the crippled Thai economy, with 500 billion baht of soft loans for small and medium-size enterprises, and 400 billion baht for buying corporate bonds and supporting debt roll-overs.

All ministries and public enterprises will sacrifice part of their budget allocation in order to make contributions to the central fund for emergency spending.

On 17 April, Prayut appealed to the 20 wealthiest Thai families to join “Team Thailand” and do what they could to help. First in the pack, CP Group founder Dhanin Chearavanont, had already set up a mask factory with high-tech equipment urgently imported from China. The first lot of 100,000 masks was donated to Chulalongkorn Hospital on 15 April.

Also joining “Team Thailand” was the Supreme Patriarch of Thai Buddhism, who instructed all monasteries to work with local communities in providing free meals. One enterprising monk at Wat Phai Lom in Nakhon Pathom offered specially blessed masks at 50 baht apiece. Within just a few days, online sales had to be suspended after 100,000 masks were ordered.¹⁴

CONCLUSION

With the approach of the end of the emergency on 30 April, Prayut is facing a life and death dilemma. He may extend the state of emergency to contain COVID-19 for one more month until the end of May and continue to save lives, or end the emergency and ease lockdowns to revive livelihoods and rescue the faltering Thai economy.

Overcoming the pandemic will restore public confidence in Prayut, giving him a vote of confidence. But lowering his guard and relaxing the lockdowns too soon will risk a deadly surge of new COVID-19 infections.

¹ Johns Hopkins University, “the COVID-19 Dashboard by the Center for Systems Science and Engineering”, at www.coronavirus/jhu.edu/map.html, accessed 18 April 2020.

² Ibid.

³ “นักท่องเที่ยวต่างชาติปี 62 โต 4.2% จีนเข้าไทยเฉียด 11 ล้านคน” [Foreign tourists in 2019 increased 4.2%, nearly 11 million Chinese visited Thailand], *Isra News*, 23 January 2020 (www.isranews.org/isranews-short-news/84811-tourism.html, accessed 13 April 2020).

⁴ “ห้ามจีนเข้าไทย ... ป้องกันไวรัสโคโรน่าได้หรือ” [Banning entry of Chinese... Will it prevent the spread of the corona virus?], *Khom chat luek*, 27 January 2020 (www.komchadluek.net/news/scoop/412904, accessed 12 April 2020).

⁵ The Ministry of Tourism and Sports, “International Tourist Arrivals in Thailand 2019” at www.mots.go.th/more_news_news.php?cid=521&filename=index, accessed 13 April 2020.

⁶ An account of the Wuhan patient’s ordeal appears in “หญิงชาวจีนผู้ติดเชื้อโคโรนาไวรัสสายแรกในไทย เล่าประสบการณ์เฉียดตาย ชื่นชม จันท. การแพทย์ไทยดูแลดีมาก” [Chinese lady, the first coronavirus case in Thailand recalls her near-death experience, praises Thai medical personnel’s excellent treatment], *Thai Post*, 30 January 2020 (www.thaipost.net/main/detail/55893, accessed 10 April 2020).

- ⁷ *Prachatai*, “Weekly report on the labour situation for the week of 12-18 April 2020” at www.prachatai.com/journal/2020/04/87255, accessed 19 April 2020.
- ⁸ “วธ. ออกแนวปฏิบัติสงกรานต์” [Ministry of Culture issues Songkran guidelines], *Manager Online*, 7 April 2020 (www.mgonline.com/qol/detail/9630000036151, accessed 10 April 2020).
- ⁹ The UNDP, “2020 Human Development Perspectives Report” at www.hdr.undp.org, accessed on 16 April 2020.
- ¹⁰ “Singapore lags behind Thailand and Malaysia in pandemic preparedness, says EIU”, *The Straits Times*, 25 October 2019 (<https://www.straitstimes.com/singapore/health/singapore-lags-thailand-and-malaysia-in-pandemic-preparedness-says-economist>, accessed 16 April 2020).
- ¹¹ “Medical tourism report released”, *The Bangkok Post*, 28 November 2019 (www.bangkokpost.com/travel/1803964/medical-tourism-report-released, accessed 19 April 2020).
- ¹² See the CCSA’s Facebook page (www.facebook.com/ThaiCovidCenter), accessed 19 April 2020.
- ¹³ “กักตัวไม่น่ากลัวอย่างที่คิด” [Quarantine is not as dreadful as previously thought], *Ejan News*, 4 April 2020 (www.ejan.co/news/5e886d761fb25, accessed 16 April 2020).
- ¹⁴ “หน้ากากอนามัย ‘นะปัดตลอด’ หลวงที่น้ำฝน ยอดทะลุ 1 แสนชิ้น [‘*Na pad talot*’ surgical mask by Luang Pi Nam Fon sells more than 100,000 pieces], *Sayam rat*, 29 March 2020 (www.siamrath.co.th/n/142746, accessed 7 April 2020).

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