

Disability budget analysis in Thailand

Background paper for the Global Disability Inclusion Report



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Acknowledgements and disclaimer

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Disclaimer:

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Introduction

This background paper to the 2025 Global Disability Inclusion Report seeks to provide an insight into the scale, composition and evolution of disability-specific public expenditure in Thailand between 2020 and 2024. The Global Disability Inclusion Report includes comparative budget analysis of 14 low- and middle-income countries including Thailand, that was elaborated in a dedicated background paper on financing disability inclusion (Cote and Banks 2025; Knox-Vydmanov and Cote 2025). Within this analysis, Thailand emerged one of the top four countries in terms of level of expenditure. It is also a country where expenditures exist across a range of sectors. This brief seeks to provide greater explanation of the key features and trends in disability-specific expenditure. It is worth highlighting that, while disability inclusive budgets combine a mix of disability-specific and mainstream expenditures, this brief focuses primarily on disability-specific expenditures. This is in line with the approach discussed further in the background paper to the Global Disability Inclusion Report focused on financing (Knox-Vydmanov and Cote 2025)

Overall trends

The budget analysis in this paper draws on publicly available documents on the Thai budget.

The Thai budget is primarily organised around allocations to different Ministries and agencies. Public budget documents are available for each Ministry or agency and are organised according to a combination of departments, plans, outputs and activities. The reliance on publicly available documents creates various challenges for the analysis, which are discussed further in the Global Disability Inclusion Report background paper on financing (Knox-Vydmanov and Cote 2025). For example, some budget lines may relate to a broader population than persons with disabilities, and not be disaggregated in a way that allows identification of these expenditures. Some of these issues are discussed throughout the paper in relation to specific sectors and budget lines. The analysis in this paper also focuses on budgeted – rather than actual – expenditure, which is much more readily available in public documents.

There are several budget lines across the Thai national budget that specifically focus on persons with disabilities. These items are presented in Table 1 and can be summarised as follows:

- The **Disability Allowance** is a non-contributory cash benefit for persons with disabilities. The budget for the allowance is disbursed to Local Administrative Organisations (LAOs) with oversight from the **Ministry of Interior** (Department of Local Administration), while policy development and design of the Disability Allowance is managed by the Department of Empowerment of Persons with Disabilities under the Ministry of Social Development and Human Security.
- Education-related disability expenditure is found within the budget for the **Office of the Basic Education Commission** within the Ministry of Education. This Office is the destination for most of the Ministry's education expenditure as whole (252 or 328 billion baht in 2024 (Budget Bureau 2023)). Specifically, the expenditure on disability is found within Plan 3 on Human Development under Output 4 "Children with disabilities have access to education and capacity development".
- The main health-care-related disability expenditure is found under the **National Health Security Office (NHSO)** which manages Thailand's Universal Health Coverage scheme. Specifically, a budget line for "Medical Rehabilitation Services" exists under the NHSO. It

should be noted that this line not only covers persons with disabilities, but other groups (most notably older persons) as discussed later in this report. Other health-related disability expenditures are found under the Ministry of Health and relate to:

- Allowance for medical rehabilitation for persons with disabilities
- Services for people with mental and behavioural disabilities
- Under the Ministry of Social Development and Human Security, the **Department of Empowerment of Persons with Disabilities** performs a number of functions relating to supporting persons with disabilities, including administration/coordination, promotion of accessibility, and managing the country's disability registration system.
- Under the **Ministry of Tourism and Sports**, a specific budget line for "Promoting and Developing Sports for Students with Disabilities and Special Individuals" exists under Output 1 on "Promotion the development of sports and recreation for the public".
- Another notable component of disability spending in Thailand is the **Fund for Empowering Persons with Disabilities in Thailand**. This is managed by the Department of Empowerment of Persons with Disabilities but sits apart from the budget. While the fund may legally draw on a range of financing sources (including the national budget), in practice it is primarily financed from fines on employers not complying with the disability employment quota system. The annual expenditure of the fund (for available years) is listed at the bottom of Table 1, but not included in the grand total of budgeted expenditure.

It is worth highlighting some relevant expenditures which are not included in the analysis:

- **Employment-related social protection benefits:** Disability budget analysis in the Global Disability Inclusion Report only focused on expenditures captured in national budgets. For consistency, expenditures on social protection benefits linked to employment were not included in the analysis in any country. In Thailand, these include benefits paid to public servants in the case of disability, and disability-related benefits paid by the Social Security Office.
- **Local government expenditure:** Provision of services to persons with disabilities is often an important part of the activities of local governments. For example, in Thailand, local governments provide different kinds of support to persons with disabilities under the function of providing social welfare. As in other countries, detailed data on local government expenditure on disability is scarce in Thailand. These expenditures are therefore not included in the analysis. One notable exception is the payment of the disability allowance which exists as a budget line under the Ministry of Interior, but is administered by LAOs.

Table 1: Disability-specific budgeted expenditure in Thailand by budget line, baht (millions, nominal values), 2020-2024

Ministry / Programme / Budget line	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024
Ministry of Interior	18,564	19,033	22,428	22,986	23,654
Disability Allowance	18,564	19,033	22,428	22,986	23,654
Ministry of Education	2,625	2,804	2,488	2,808	2,628
Office of the Basic Education Commission (Plan 3 Human Development. Output 4 Children with disabilities have access to education and capacity development)	2,625	2,804	2,488	2,808	2,628
Returning teachers to students with disabilities	1,515	1,526	1,387	1,671	1,684
Provisions of Education in Special Schools	138	142	125	94	75
Capacity Development of children with disabilities by Special Education Centers	286	270	222	187	185
Construction, Renovation, and Repair of School Buildings and Auxiliary Facilities for Children with Disabilities	299	508	575	557	351
Improvement of Quality of Education for Children with Special Needs	334	306	125	247	280
Scholarships for Autistic and Children with Disabilities under Khun Phum Foundation	53	53	53	53	53
National Health Security Office (NHSO)	841	877	891	822	837
Medical Rehabilitation Services under the National Health Security Office	841	877	891	822	837
Ministry of Social Development and Human Security	864	886	632	809	778
Department of Empowerment of Persons with Disabilities	864	886	632	809	778
Disability Administration	63	97	59	87	44
Strengthen Capacity and Participation of Organizations for Persons with Disabilities and their Networks	33	35	22	22	15
Promotion of Accessible Facilities for Persons with Disabilities	23	62	55	144	164
Disability Rights and Registration	304	311	255	258	285
Skill Development for Persons with Disabilities	87	58	48	38	10
Salary and benefits of staff under Department of Empowerment of Persons with Disabilities	266	265	270	260	261
Ministry of Health	37	13	16	11	17
Department of Medical Services (Output 1 Health Knowledge is Transferred. Subsidy Budget. Allowance for Medical Rehabilitation for Persons with Disabilities)	37	9	14	9	14
Allowance for medical rehabilitation for persons with disabilities	37	9	14	9	14
Department of Mental Health (P4: Measure for specific targeted groups)	4	2	2	3	
Improve Quality of Life for People with Mental or Behavioral Disabilities	4	2	2	3	
Ministry of Tourism and Sports	16	10	2	2	2
Output 1: Promotion the development of sports and recreation for the public. Project 1: Promotion of Physical Activity, Sports, and Recreation. Subsidy.	16	10	2	2	2
Promoting and Developing Sports for Students with Disabilities and Special Individuals	16	10	2	2	2
Grand total	22,861	23,546	26,533	27,439	27,916
<i>Fund for Empowering Persons with Disabilities in Thailand</i>		1,331.19	1,395.79	1,432.28	

The level of disability-specific expenditure in Thailand (at 0.14 per cent of GDP) is higher than some other middle-income countries included in budget analysis for the Global Disability Inclusion Report. Of 11 low- and middle-income countries included in analysis, Thailand ranked fourth highest in terms of expenditure, at 0.14 per cent of GDP (Figure 1). This level of expenditure is slightly higher than 0.1 per cent of GDP, which was identified in the Global Disability Inclusion Report as an approximate threshold at which countries can begin implementing a basic package of support for persons with disabilities.

Figure 1: Disability-specific government expenditure as a percentage of gross domestic product (GDP), latest year

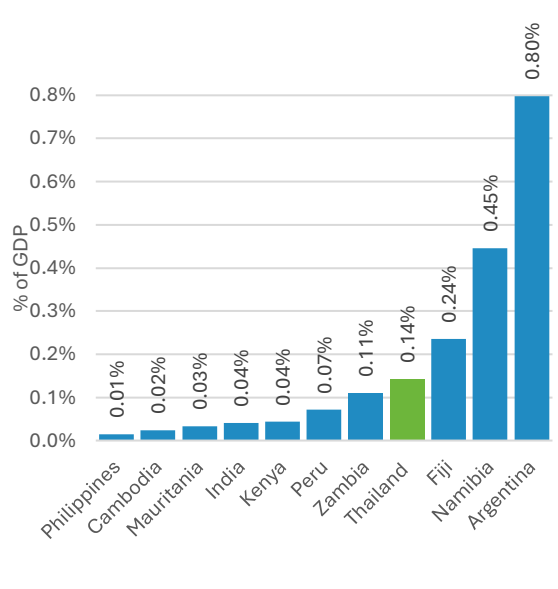
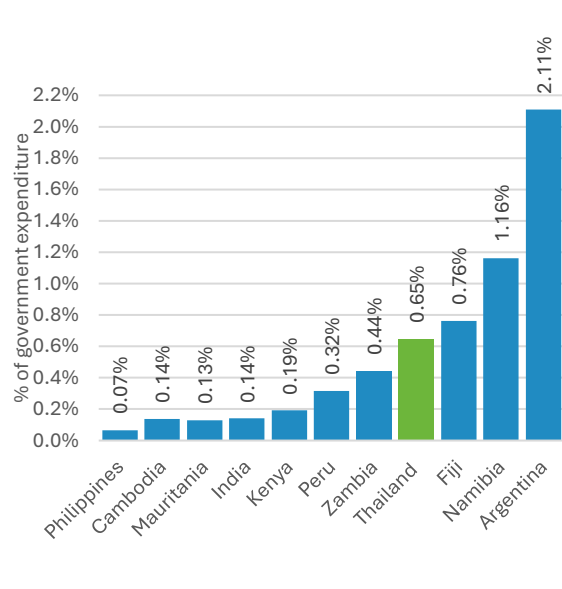


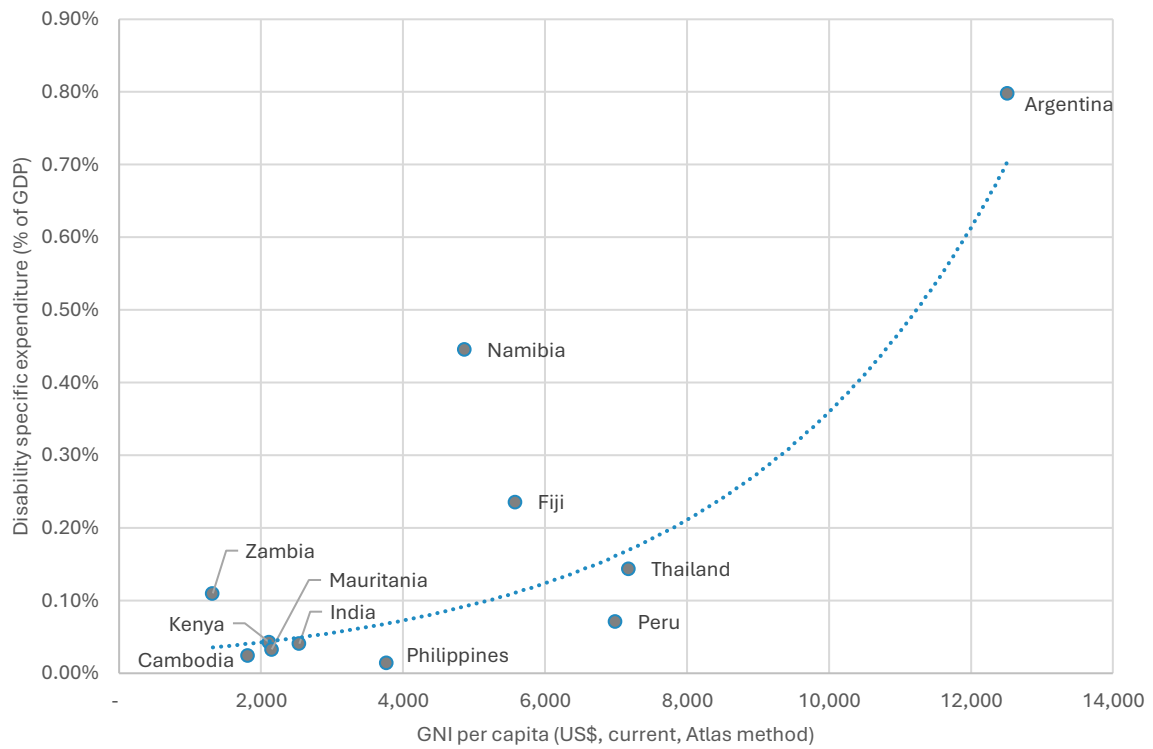
Figure 2: Disability-specific government expenditure as a percentage of total government expenditure, latest year



Source: Cote and Banks (2025)

Nevertheless, the analysis in the GDIR suggests that expenditure on disability in Thailand is low in the context of the country’s aspirations to reach high-income status. Thailand is an upper-middle income country and has set a goal of becoming a high-income country by 2037. Indeed, most of the countries included in Figure 1 and Figure 2 have a significantly lower level of economic development than Thailand, with only Argentina, Fiji and Peru being peer countries with upper-middle income status. Thailand ranks second highest in GNI per capita, but ranks fourth in terms of expenditure. This is illustrated in Figure 3 which shows that Thailand spends significantly less than Fiji and Namibia on disability (as a share of GDP) despite being a wealthier country. It is also worth noting that levels of expenditure in high income countries are significantly above the levels found in low- and middle-income countries. While data is not readily available on total disability expenditure, OECD countries spend an average of 1.5 per cent of GDP only on social protection for people with disabilities of working age (OECD 2023).

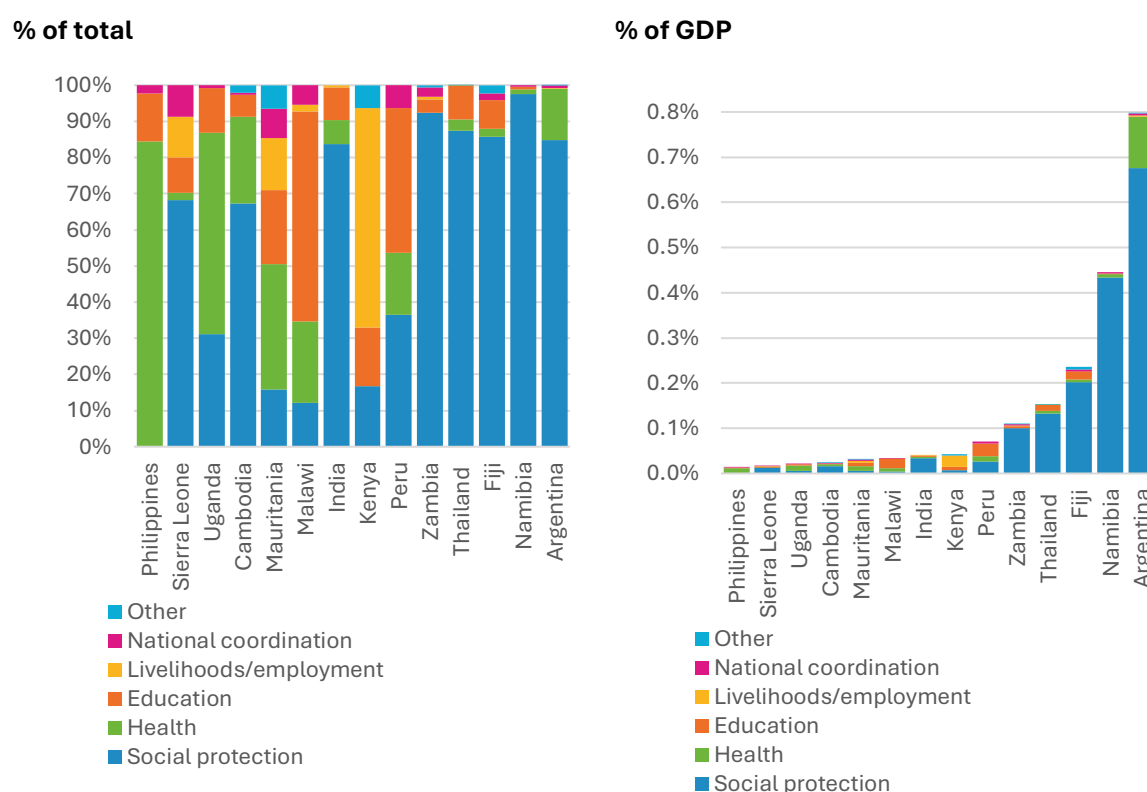
Figure 3: Correlation between disability-specific expenditure (% of GDP) and GNI per capita



Source: World Bank and OECD (2024) and consolidated budget analysis undertaken for the Global Disability Inclusion Report (Author's calculations)

Social protection – and specifically the disability allowance – dominates disability expenditure in Thailand. In the 2024 fiscal year, THB 23.7 billion was allocated to the disability allowance, making up 85 per cent of the THB 27.9 billion total disability expenditure. This reflects the experience of other low- and middle-income countries included in disability budget analysis in the Global Disability Inclusion Report. Data in Figure 4 shows that for countries with higher spending on disability as a share of GDP (to the right of each chart), social protection made up by far the largest share, mainly in the form of non-contributory cash benefits.

Figure 4: Disability-specific expenditure by sector, latest year

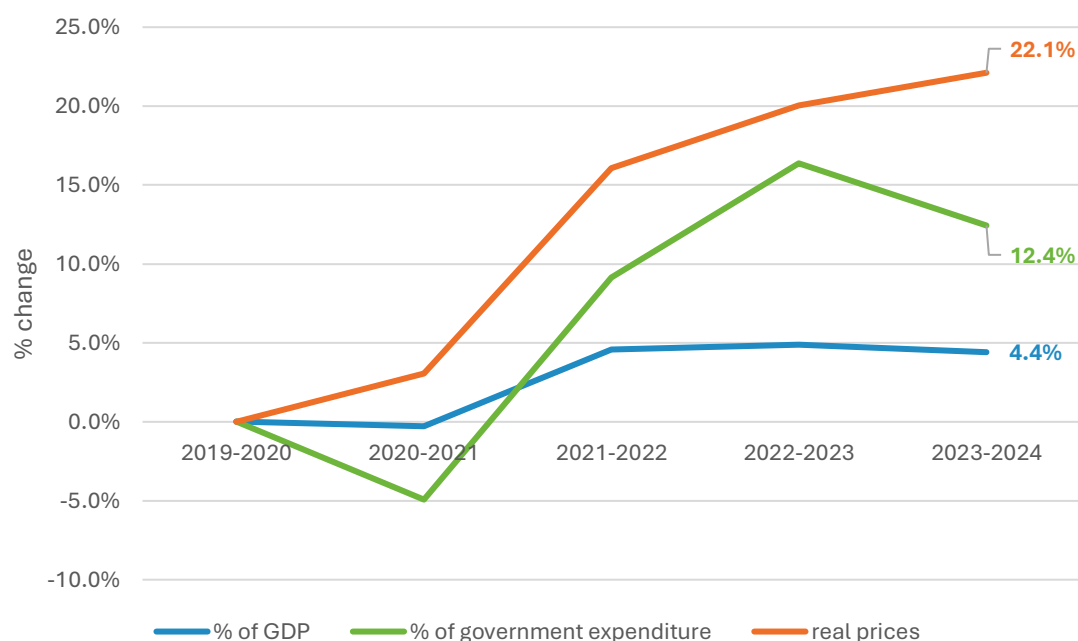


Source: Consolidated budget analysis undertaken for the Global Disability Inclusion Report (Author’s calculations)

Note: Latest year is 2025 for Zambia, 2024 for Cambodia, Fiji, India, Kenya, Mauritania, Namibia, Peru, Thailand and Uganda; 2023 for Argentina, Malawi and Sierra Leone; and 2019 for the Philippines

There has been a modest increase in disability expenditure in Thailand since 2020. Table 1 indicates that nominal expenditure increased from THB 23 to 28 billion between fiscal years 2020 and 2024. These nominal values do not take account of changes in prices and the broader economic and fiscal context, therefore, Figure 5 shows how expenditure changed relative to GDP, government expenditure and in real prices (taking account of inflation). Disability expenditure increased by 22 per cent in real terms and by 12 per cent as a share of total government expenditure. Compared to GDP, expenditure increased by around 4 per cent, which indicates economic growth in the country outpaced increased in government expenditure over the period. The main driver of this increased expenditure was the disability allowance, and the drivers of this are discussed below.

Figure 5: Percent change in expenditure on disability, FY 2020-2024



Source: Authors' calculations based on budget analysis for Global Disability Inclusion Report

Social protection

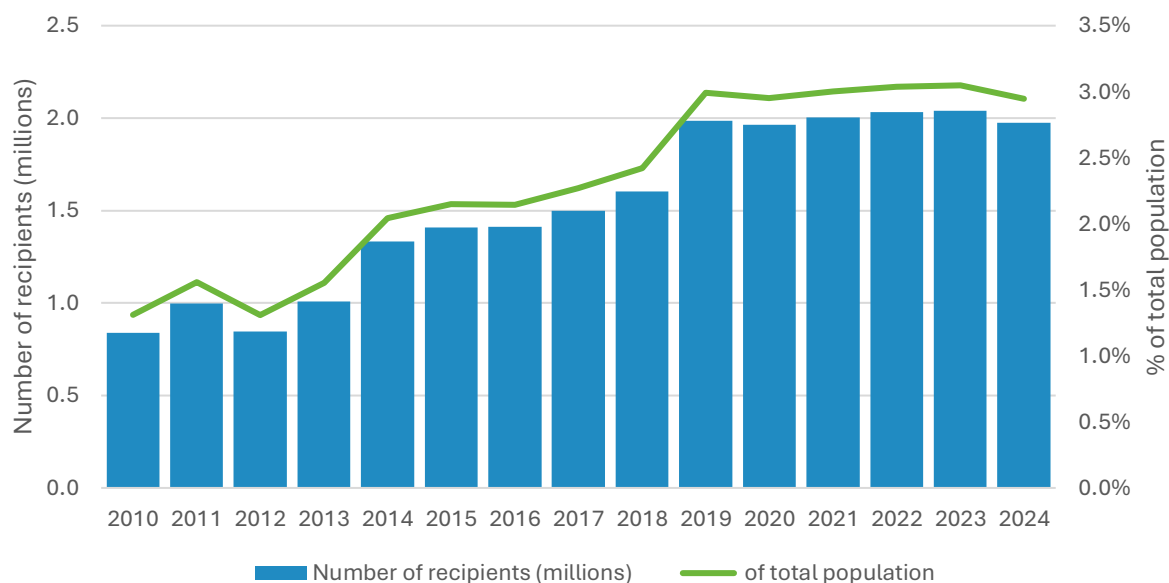
Dominating the landscape of public expenditure for persons with disabilities in Thailand is the disability allowance. The scheme provides a cash benefit to all persons with disability who have a disability ID card, although the application to the scheme is not automatic on receiving the card. The benefit level is THB 800 per month, which is increased to THB 1,000 for persons with disabilities who also have a State Welfare Card and children with disabilities (under 18 years old). This section describes some of the key dimensions of the disability allowance in international comparison, and how these relate to levels of expenditure.

The coverage of the disability allowance has increased significantly in the last fifteen years.

Since the introduction of the scheme in its current form in 2010¹, the number of recipients has more than doubled from 0.8 million to around 2.0 million. The number of recipients has been relatively stable since 2020, which means that scheme coverage has not been a core driver of the increased level of expenditure between 2020 and 2024 (described above). As a share of the total population of Thailand, the number of recipients has increased from 1.3 per cent to 2.9 per cent in 2024. The 2022 Disability Survey indicates that 43 per cent of persons with disabilities are receiving the disability allowance, however, some care is required in interpreting this figure. The 2022 Disability Survey identifies 6 per cent of the population as having a disability, however, the survey uses a mix of activity limitations and impairments that does not directly match the eligibility criteria for the disability allowance.

¹ Disability allowances existed from 2003 but were targeted at those without any source of income, and administered by local authorities.

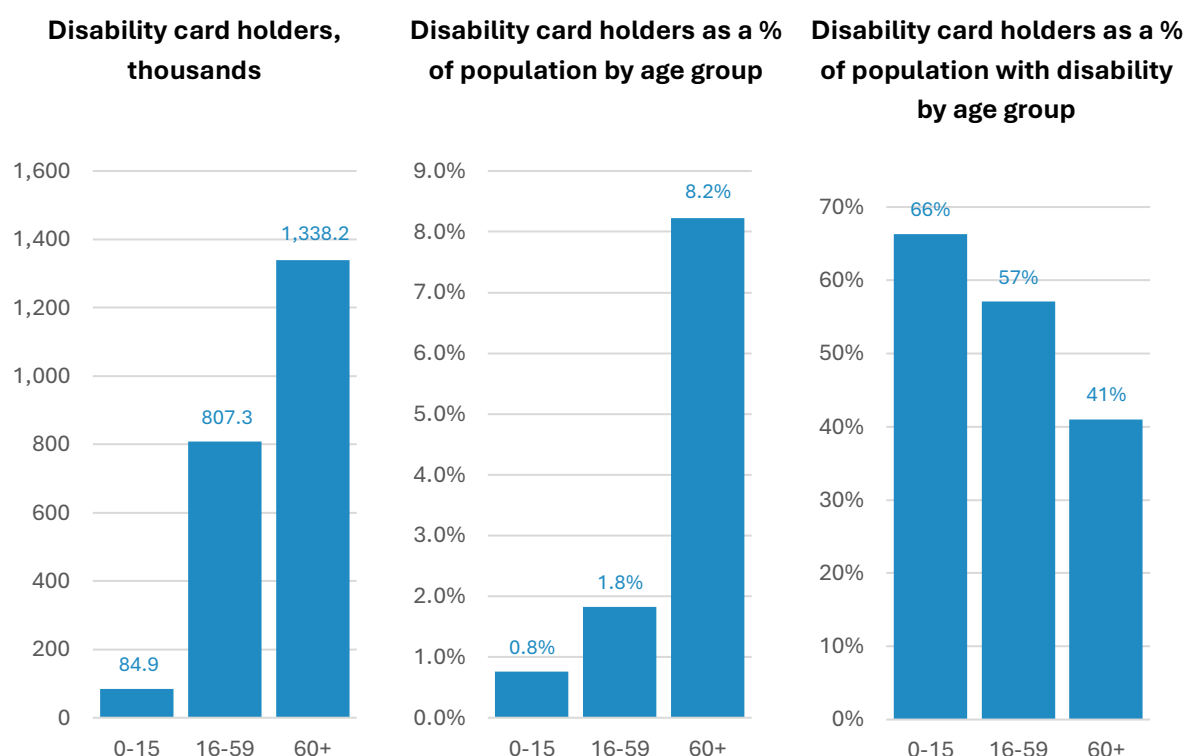
Figure 6: Coverage of the disability allowance, number of recipients and per cent of total population, 2010-2024



Source: Authors' calculations based on social security and population data from NESDC (2025)

The majority of disability allowance recipients are over the age of 60. While age-disaggregated data is not available on disability allowance recipients, it is available for disability card holders, 99 per cent of which receive the disability allowance. As indicated in Figure 7 (first panel), 1.3 million of the 2.2 million disability card holders are over the age of 60 as of 2025, equal to 60 per cent of all card holders. Meanwhile, 807,000 are age 16-59 (36 per cent) and 85,000 are children age 0-5 (4 per cent). When comparing to the total population in each age group, this means that 8 per cent of the population over 60 are receiving a disability allowance, compared to 2 per cent of those 16-59 and 1 per cent of children aged 0-15 (panel 2 of Figure 7). While this may suggest that older people are over-represented as disability allowance recipients, the picture is complicated when considering the fact that disability prevalence rises sharply with age. When comparing holders of the disability card to disability prevalence by age (according to the 2022 Disability Survey), coverage is lower for older persons (41 per cent) than for those 15-59 (57 per cent) and 0-15 (66 per cent) (panel 3 of Figure 7). In general, these figures need to be interpreted with caution for various reasons. First, measurement of disability is particularly challenging for children, which may affect the indicators in the 2022 Disability Survey. Second, Thailand has near-universal coverage of old age pensions and allowances meaning that the vast majority of older persons with disabilities would receive some allowance, even if not the disability allowance.

Figure 7: Coverage of disability card by age group, 2025



Source: Authors' calculations based on disability card recipients, single year of age population data from UN Population Division (2024) and disability prevalence data from the 2022 Disability Survey (2023).

Note: The 2022 Disability Survey only disaggregates prevalence by the age groups 0-17 and 18-59, and 60+. The disability prevalence for these age groups (as a percentage of the total population) are used as the denominator in panel three of the Figure.

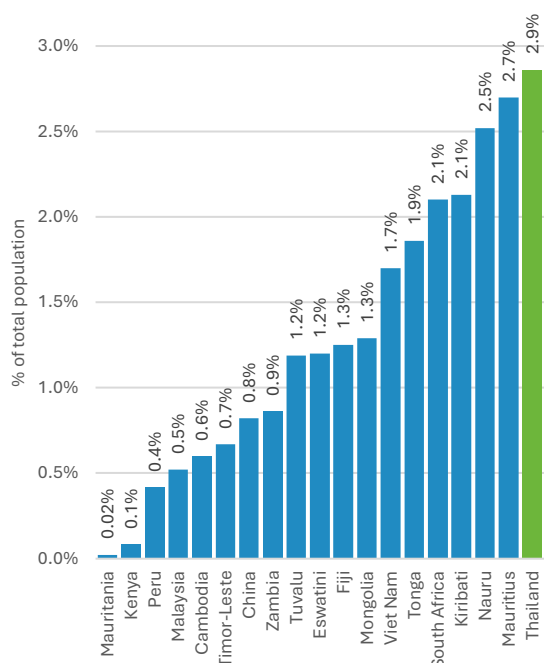
The coverage of the scheme is higher than many middle-income countries. Figure 8 shows the coverage of the total population by disability benefits in a selection of low- and middle-income countries where they exist. This indicator is chosen as it is the best available measure of coverage across such countries, given significant issues of comparability of disability prevalence data. By this measure, Thailand's coverage – at 2.9 per cent of the population – is the highest of the countries included. This higher coverage is driven by several factors including the non-means-tested nature of the scheme, the way disability is assessed in Thailand, and the fact that the benefit is paid to older persons.

However, when compared to more developed countries, the disability allowance coverage remains well below average. Given Thailand's upper-middle-income country status – and aspiration to become a high-income country – this comparison is potentially more relevant to the country's future ambitions. Figure 9 shows data from the OECD on the proportion of the working age population by disability benefits. Thailand is added to the Figure, using the indicator for coverage of disability cards for the population age 16-59 (1.8 per cent) highlighted above in Figure 7 (panel 2). While there are some caveats on the comparability of this indicator², it suggests that coverage in

² The two caveats are: (a) the OECD uses the age group 20-64, while the Thailand data uses the age group 16-59. One would expect the indicator for Thailand to be higher when using the 20-64 age group given the higher coverage of the disability allowance at older ages; (b) the indicator for Thailand only includes the disability allowance benefit and not social insurance/employment-related benefits. Available data from

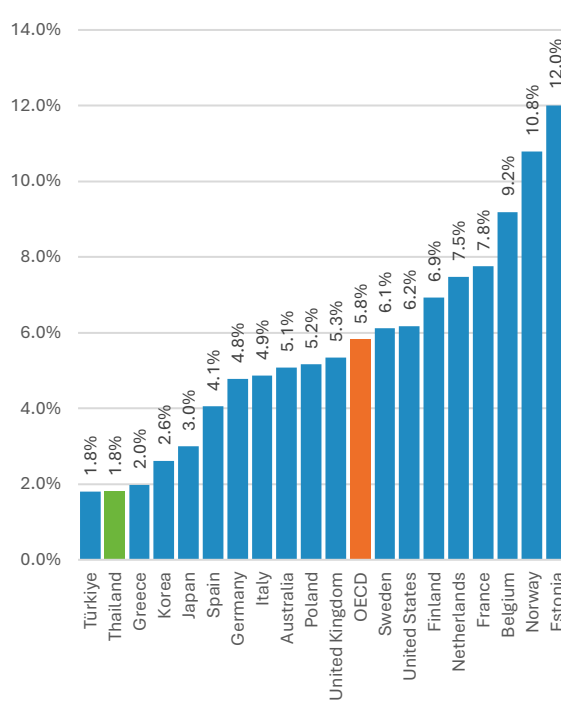
Thailand (1.8 per cent) is well below the average for OECD countries (5.8 per cent), but closer to the level in high-income Asian countries such as Republic of Korea (2.6 per cent) and Japan (3.0 per cent).

Figure 8: Coverage of non-contributory disability cash benefits as a percent of total population, selected countries (latest year)



Source: Statistical annexes to the Global Disability Inclusion Report

Figure 9: Percentage of working age population receiving disability benefits in selected OECD countries and Thailand



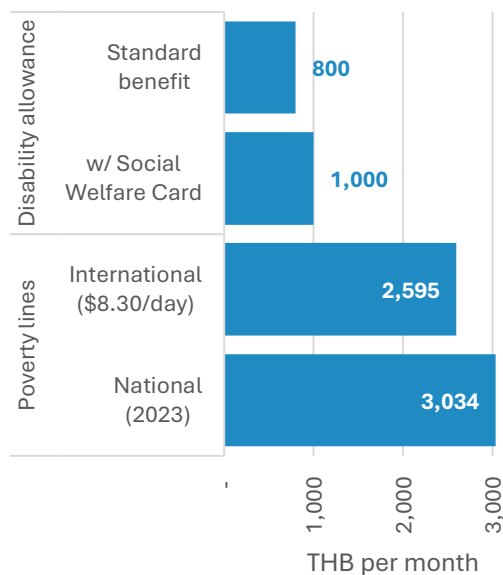
Source: OECD (2022)

Benefit levels in Thailand fall below both national and international poverty-related benchmarks.

Both the standard and maximum benefit available under the disability allowance are equal to less than one third of Thailand’s national poverty line as of 2023 (THB 3,034 per month) which is likely to be higher in 2025 (Figure 10). The disability allowance is around half the relevant international poverty line for an upper-middle income country (2,142 per month, which is equal to 8.30 international dollars per day). Poverty lines, which usually aim to represent the cost of covering an individual’s basic needs, are an important reference point for setting social protection benefit levels. However, it is widely recognised that these typically under-estimate costs incurred by persons with disabilities. A relevant poverty-related benchmark for disability benefits would therefore be above the poverty line.

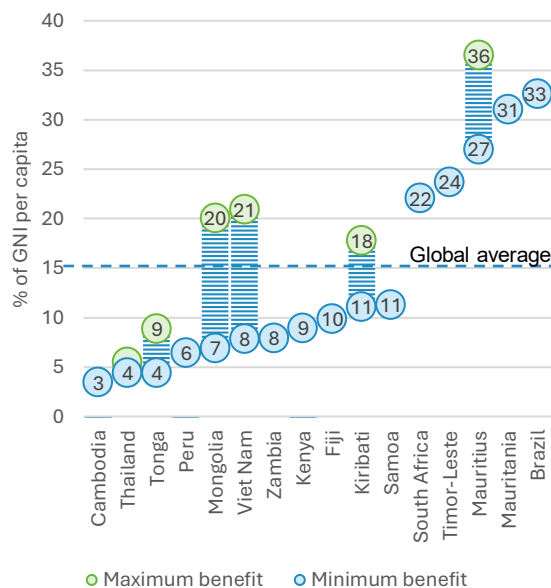
the SSO indicates 20,440 invalidity benefit recipients – but without information on which proportion are working age. Nevertheless, adding these beneficiaries would make little different to the overall indicator as the number is small compared to the 804,000 people age 16-59 with a disability card (and receiving the disability allowance. Data is not readily available on the number of people receiving disability benefits through the system of benefits for civil servants.

Figure 10: Benefit level of disability allowance compared to national and international poverty lines, 2025



Sources: The national poverty lines is from NESDC (2025) and the international poverty line is calculated using data from the IMF (2025).

Figure 11: Benefit level of disability cash benefits, per cent of GNI per capita, selected countries (latest year)



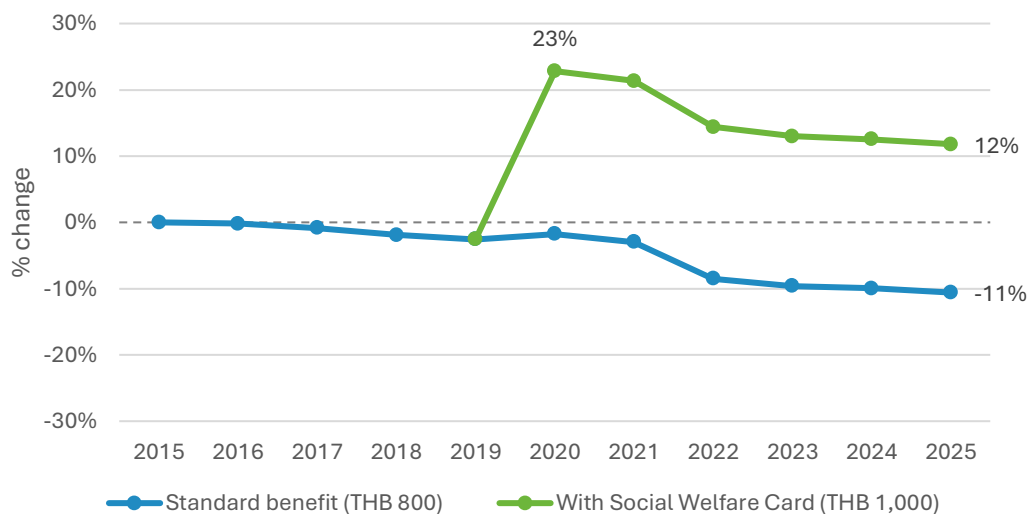
Source: Cote and Banks (2025)

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The disability allowance benefit in Thailand also falls below benefit levels in other middle-income countries. Figure 11 shows the benefit level for non-contributory disability benefits in a variety of countries, as a share of GNI per capita. This indicator measures adequacy relative to the level of economic development of a country, which also provides some indication relative to prevailing incomes and wages. By this measure, the benefit in Thailand (between 4 and 6 per cent of GNI per capita) is one of the lowest in the world (Figure 11). It falls short of the average for non-contributory disability benefits globally (15 per cent of GNI per capita) and well below those found in countries such as Brazil and South Africa, which are upper-middle-income countries with long-established non-contributory disability benefits.

The infrequent adjustment of the disability allowance benefit also means that the benefit adequacy has fallen over time. Figure 12 shows the percent change in the real purchasing power of the disability allowance benefit since the last adjustment to the standard benefit in 2015, taking account of changes in consumer prices. Over the period, price inflation means that the THB 800 monthly benefit is worth 11 per cent less than it was in 2015. This was particularly affected by relatively high inflation in 2022 (exceeding 6 per cent). The introduction of the increased benefit of THB 1,000 for Social Welfare Card beneficiaries and children with disabilities who are under 18 years old in 2020 represented a 23 per cent increased relative to the original THB 800 value in 2015. However, subsequent price inflation means that this is now worth only 12 per cent more than the 2015 benefit value. More frequent benefit adjustment could better protect recipients of the disability allowance from increases in consumer prices.

Figure 12: Percent change in real value of disability allowance, 2015- 2025



Source: Authors' calculations based on consumer price inflation data from IMF (2025)

Introducing a multi-tiered disability benefit could provide a way to increase adequacy for those with the greatest support needs in a way that is fiscally sustainable. Thailand can be characterised as providing disability benefits with a comparatively low adequacy, but to a relatively large population of persons with disabilities, who likely have very diverse levels of disability-related costs. Increasing the benefit for all current recipients may not be the most cost-effective use of resources. An alternative would be to introduce different levels of benefits linked to the level of support needs. This could, involve, for example:

- **Introducing a higher benefit level for those with the greatest disability-related support needs and costs.** This would require an adjustment of the disability assessment and determination system to move beyond a single certification, to identify different levels of disability.
- **Maintaining the lower benefit level for all those with a disability card.**
- **Thailand might also consider introduction of an additional cash benefit for those with the highest care and support needs.** This might apply, for example, to those requiring full time care. This would likely represent a smaller portion of those covered by higher benefit for those with high disability-related support needs and costs, as noted above.
- **Careful consideration is also required for in-kind benefits which can support people with different kinds of support needs.** There are various in-kind benefits that can make a significant contribution to reducing disability-related costs. These include care and support services, specialised transportation service and support to housing adjustments.

One important consideration would also be how these benefits interact with other social protection benefits, such as the old age allowance and State Welfare Card.

Education

Expenditure on education for persons with disabilities is at the higher end of the range for countries included in analysis in the Global Disability Inclusion Report. In all countries surveyed, disability-focused education expenditure is small as a share of GDP. However, Thailand ranks among one of the top four countries in terms of expenditure, exceeding 0.01 per cent of GDP (Figure 13). In a smaller number of countries, disability-focused education expenditure was also compared to total education expenditure. Thailand is among three countries (alongside Peru and Ghana) where disability expenditure is between 0.6 and 0.7 per cent of total education expenditure. This is significantly higher than in Zambia and Cambodia (around 0.1 per cent of total education expenditure, or less). It is, nevertheless, notable that these levels of expenditure fall well below those defined in a 2023 international Call to Action to Ensure Inclusive and Equitable Quality Education which called governments to commit to progressively increase budgetary allocations for disability-inclusive education towards being at least 5 per cent of education budgets by 2030 (UNESCO 2023).

Figure 13: Disability-focused education expenditure % of GDP, latest year

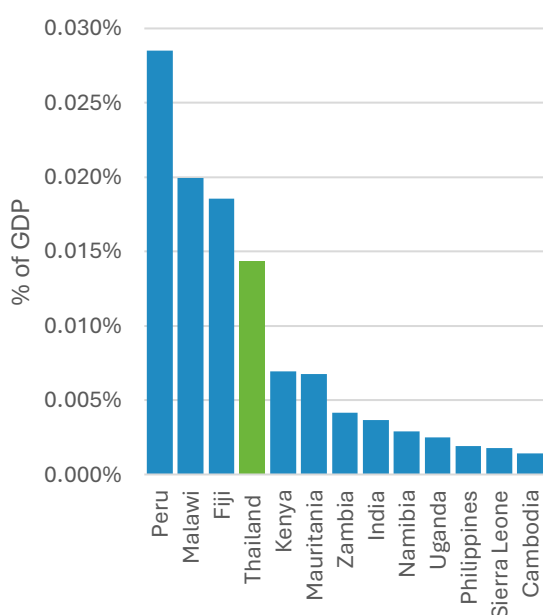
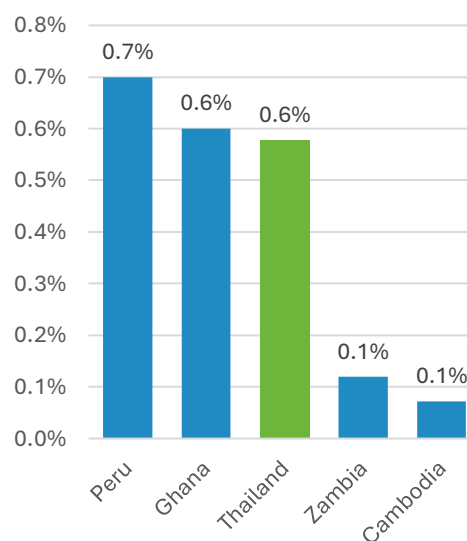


Figure 14: Disability-focused education expenditure as a share of total education expenditure, 2024



Source: Consolidated budget analysis undertaken for the Global Disability Inclusion Report (Author's calculations) and UNESCO et al (2021).

Note: The figure for Ghana relates to 2015, all others relate to 2024.

Thailand is also notable in terms of focusing expenditure on education in mainstream educational settings. In many countries, disability budget allocations within the education sector focus on segregated special schools, rather than inclusive education which supports attendance of mainstream schools. Thailand's system has notable strengths in this respect. The majority of children with disabilities attending school are in a regular classroom (76 per cent of boys and 86 per cent of girls) (UNICEF 2025). This appears to be reflected in the disability-focused budget allocations in Thailand, in particular:

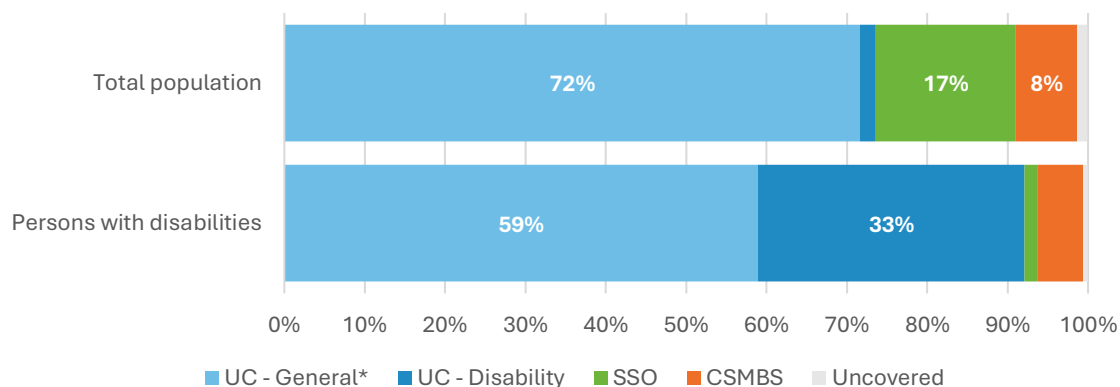
- Around two thirds (64 per cent) of the disability education budget in 2024 was in the form of the “Returning teachers to students with disabilities” which **finances teaching assistants for children with disabilities**. These are primarily deployed in mainstream schools.
- The next largest budget lines relate to **infrastructure** (Construction, Renovation, and Repair of School Buildings and Auxiliary Facilities for Children with Disabilities) and **broader efforts to improve inclusive education** (Improvement of Quality of Education for Children with Special Needs) and make up a further 24 per cent of the budget (in 2024).
- Budget lines specifically relating to **special schools** (“Provisions of Education in Special Schools” and “Capacity Development of children with disabilities by Special Education Centers”) made up only around 10 per cent of the budget in 2024.

Despite these positive elements, significant gaps remain in education of children with disabilities. Compared to the near universal school attendance of children without disabilities³, only 91 per cent of girls and 80 per cent of boys with disabilities aged 5-9 are in school. This gap appears to widen at older ages (UNICEF 2025).

Health care

Most persons with disabilities in Thailand are covered by the country’s Universal Coverage Scheme. Thailand has three main public health insurance schemes: the Universal Coverage Scheme (UCS), the Social Security Fund (SSF) for contributing private sector workers, and the Civil Servant Medical Benefits Scheme (CSMBS). The vast majority of those not covered under the SSF and CSMBS are automatically eligible to be covered under the UCS. Thailand’s health insurance system has achieved virtually universal coverage (over 99 per cent) with around three quarters of the total population covered by the UCS (Figure 15). Coverage of the UCS is even higher among persons with disabilities as measured by the 2022 Disability Survey, reaching over 90 per cent.

Figure 15: Total population and persons with disabilities by type of health insurance, 2022



Source: National Statistics Office and UNICEF (2023)

Persons with a disability card have access to an expanded package of benefits under the UCS.

This includes the right to access a range of rehabilitation services free of charge and to access assistive devices according to the type of disability they experience. Persons with disabilities can also access services in any public health facility without requiring referral. In total, both

³ The figure is 99.5 per cent for boys and 99.8 per cent for girls.

administrative and survey data indicate that around 1.3 million people with disabilities are registered under the UCS classified as having a disability (NHSO 2023; National Statistics Office and UNICEF 2023). It is notable, however, that within the population of persons with disabilities in the 2022 Disability Survey, most access the general scheme (59 per cent) rather than the expanded package for people with disabilities (33 per cent) (Figure 15).

The budget analysis only partly captures expenditure on health care for persons with disabilities. Under the NHSO, a dedicated budget line exists for Medical Rehabilitation Services delivered under the UCS scheme. On one hand, this may represent an over-estimation of the costs of rehabilitation services for persons with disabilities. This budget line covers various groups including older persons and other patients (potentially with short-term rehabilitation needs) in addition to persons with disabilities. In the 2022 fiscal year, persons formally registered as having a disability under the UCS made up 16 per cent (152,000) of a total 953,000 patients reached under the scheme. On the other hand, this may represent an under-estimate of actual expenditure. First, it is not clear whether support for assistive devices is included under this budget line, and this may be captured elsewhere. Second, the budget line may not include a range of other specialised services and medicine provided to persons with disabilities, as well as services relating to general health care needs.

One other potentially relevant budget line under the NHSO is that linked to long-term care. Since 2016, Thailand has been implementing a long-term care programme primarily focused on supporting older persons with significant care needs (NHSO 2020). The budget for this item was THB 1.3 billion in FY 2023. While the scheme remains primarily focused on older persons, it also covers persons with disabilities with significant care needs. Given the focus on older persons, this budget line was not included in the overall analysis.

Conclusion

The analysis of disability-specific expenditure in the Thai national budget highlights some positive aspects, and important progress. The overall level of expenditure is higher than many middle-income countries, and above a threshold at which countries can begin implementing a basic package of support for persons with disabilities (0.1 per cent of GDP). The disability allowance, which makes up the bulk of disability expenditure – has expanded coverage significantly over the last decade, and coverage is higher than many other developing countries. Disability-related education expenditure – while seemingly modest – has positive aspects such as a focus on education in mainstream settings. Finally, health expenditure reflects Thailand’s achievements in extending universal health coverage to persons with disabilities, with additional support provided for rehabilitation and assistive devices.

Nevertheless, important gaps remain, not least when considering Thailand’s upper-middle-income country status. Disability expenditure in Thailand is less significant when comparing to other upper-middle-income countries, and falls well below the levels found in high-income countries. Similarly, despite the successes in expanding disability allowance coverage, this remains at the lower end of what is found in OECD countries. Moreover, the benefit level of the disability allowance falls far short of relevant national and international benchmarks for benefit adequacy, while the flat rate value does not take account of the variety in levels of disability related costs. An important step to address this would be the development of a multi-tiered benefit structure for the allowance, alongside an expanded array of in-kind benefits. Likewise, continued efforts and

investments are required to fill significant remaining gaps in school attendance of children with disabilities, and to ensure disability-related health care costs are adequately covered.

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