

## **Prioritizing Wellbeing of Rural Households of the Northeast of Thailand: A Comparison of Changes over a Decade (2005-2016)**

<sup>1</sup>Buapun Promphakping, <sup>1</sup>Nopparat Rattanaprathum, <sup>2</sup>Pompen Somaboot,  
<sup>2</sup>Ninlawadee Promphakping and <sup>2</sup>Pattaraporn Weeranakin

<sup>1</sup>Department of Social Development,

<sup>2</sup>Faculty of Humanities and Social Sciences, Khon Kaen University,  
Research Group on Wellbeing and Sustainable Development (WeSD), Khon Kaen, Thailand

---

**Abstract:** Thailand has undergone a rapid change over the last four decades. These changes do not only apply to the structure of socio-economic determinant factors of quality of life but also to the views or perceptions of the people towards their own wellbeing. This study analyzes the changes that occurred in the ways rural people of the Northeast of Thailand prioritize their wellbeing. The data for this analysis is derived from two survey panels on values and goals, administered across the same households, the first in 2005 and the latter in 2016. The study found that of 10 items that were ranked as very important to household wellbeing, when compared between 2005 and 2016, almost all remained the same. However, changes in the priority of these items were evident. Good health retained the highest rank while having a room or a house to live in and all family members being together during special festivals ranked, unchanged at 5 and 10th, respectively. The study concluded that the priority of items concerned with subjective aspects (good family relationships, having children obtain higher education and having well-behaved children) were in decline whereas items concerned with objective wellbeing (access to food, water, healthcare services) were ranked higher.

**Key words:** Wellbeing, values, rural households of the Northeast, Thailand, socio-economic

---

### **INTRODUCTION**

Thailand's economic and social change since the introduction of the National Economic and Social Development Plan has been rapid (Gregor *et al.*, 2008). It may take as long as a 100 years for an industrial society in the West to experience the same level of change. The economic or physical change was evident as at the beginning of development, the focus was on building infrastructure including dams and roads. Later, social infrastructure such as hospitals and schools were improved. In only two decades Thailand transformed from a country with low income of the same level as many countries in Africa to become a middle income country. In 1987, some economists considered Thailand as one of the Newly Industrialized Countries (NICs). Particularly, economists of the World Bank viewed Thailand's rapid infrastructural or economic change as an 'economic miracle'. Within the context of rapid physical change or economic growth, there are continual debates and different interpretations regarding the Thai people's conception and values of change. In the beginning,

academics from western countries remarked that Thailand was a modern but not developed country (Jacobs, 1971). This remark implied that Thailand had made significant physical or infrastructural changes but had not changed sufficiently in terms of institutions and practices or in the thinking of the people in the society. The same remark can be found both in academic society and in the general public. That is to say economic modernity has invaded the traditional way of life of people in the rural areas where the traditional institutions way of life and culture still exist. Meanwhile, objective change within the Thai society is the opposite to the traditional way of life, especially in the past few years during which Thailand has experienced political conflict leading to two coups d'état (2006 and 2014). A group of researchers conducted a study to investigate the political opinions of rural people and the conclusion implied that the political ideas or values of people in the rural areas especially the North and the Northeast have shifted towards democracy (Mukdawijitra, 2012; Laungaramsri, 2014). The differences in academic opinions mentioned above might partially be caused by an assumption that the

---

**Corresponding Author:** Buapun Promphakping, Department of Social Development, Faculty of Humanities and Social Sciences, Khon Kaen University, Research Group on Wellbeing and Sustainable Development (WeSD), Khon Kaen, Thailand

thinking methods and values of people in a society are determined by objective conditions including the economic and infrastructural ones surrounding them. Such an idea makes the academic society pay less attention to subjective conditions which include people's thinking processes and values. When it comes to research to explore people's ideas or subjective characteristics, there usually are doubts or weaknesses in terms of the research methodology since subjectivity of people varies in accordance with their locality, social conditions and culture. However, the academic society is aware of the importance of the subjective conditions of people in the society. A comparative analysis that emphasizes the change in 'perception' within exact periods of time is likely to enable us to better understand the importance and relationship between the objective and subjective conditions.

In 2002, the "Wellbeing in Developing Countries" (WeD) program conducted a survey of the quality of life of rural populations in Thailand. Data obtained were analyzed and presented such as 'Wellbeing in Developing Countries Researching Wellbeing; From Concepts to Methodology' (Gregor, 2006), 'Measuring Wealth across Seven Thai Communities' (Clarke, 2006) and 'Wellbeing in Developing Countries; Conceptual Foundations of The WeD Programme' (Gregor, 2006; Gough *et al.*, 2006). Later, the Research Group on Wellbeing and Sustainable Development (WeSD) was established at Khon Kaen University in 2010 and has continuously conducted research studies on wellbeing and development. In 2016, WeSD received a budget to conduct a survey of the quality of life in the same villages with the same households as the 2005 survey. This study analyzes and compares both surveys to determine subjective changes among the rural population, during the past 10 years. This study is composed of three sections. The first is a review of studies on quality of life and value systems in Thai society. The second section will describe the research methodology and the last one will present the analysis and discussion of the data obtained as follows.

**Research objective:** To analyze and compare the priority of items that are considered to be very important for household wellbeing between 2005 and 2016.

**Literature review:** The studies on perceptions and thinking methods of Thailand's rural population are usually classified as cultural studies. Some of the pioneers in this field of study include Benedict (1934) and Herbert (1965). This kind of study considers that people's thinking methods, values and ideologies are

stored in cultural institutions such as political institution (feudal system) and religious institution. These studies attempt to clarify human acts or behaviors. In a study conducted by Herbert Phillips in the village of Bang Chan in the proximity of Bangkok, Sentence Completion Technique (SCT), a technique popular among clinical and educational psychologists, was employed. Later, social psychologists turned to focus their studies on values and a number of survey tools were developed. For example, Milton Rokeach, an American social psychologist created a survey form called the Rokeach Value Survey (RVS) (Rokeach, 1973), which was later applied and used in a study of the value systems of Thai society by Sanit Samakkarn and Suntree Komin. According to Rokeach, values are divided into two types; instrumental values or preferable modes of behavior to achieve goals and terminal values or desirable end-states of existence. Overall, a value is not a feeling or thought that may change easily but it is the common belief of a society, which is relatively persistent in nature. Therefore, a value is a tool or foundation for members of a particular society to rank the importance of items around them. It is also considered a foundation or force for an individual person to make a decision to show or not to show a certain behavior.

According to studies on the values of Thai society (Settho, 1989; Samakkarn, 1976; Komin and Samakkarn, 1979) some of the significant values are as follows; adherence to Buddhism; upholding the monarchy; looking up to the rich; admiring and honoring powerful people; respecting elders; being fun-loving; being fond of luxury; believing in supernatural powers, charms and luck; making merit or donating materials; telling exaggerated stories for fun having self-confidence; competing for a better position, being envious and having a fear of being taken advantage of consumption of expensive goods and love for freedom. Although, from an academic point of view, values are beliefs that are permanent at a level, they can also change over time. Moreover, these values usually consider or give importance to core or national culture but ignore or do not try to understand subculture. Employment of a standard tool developed from another society and culture may have certain limitations since it does not reflect the values of a particular society. Most importantly, the values of subculture or emerging values are often considered to have negative impacts on or be hazardous to the core society. On one hand, the studies of objective characteristics have been developed under the concept of quality of life. Basically, people's quality of life consists of two pillars or foundations. The first one involves objective quality of life including

welfare systems, living standards, lifestyles and living conditions. The other pillar of quality of life is subjectivity including well-being, satisfaction with life and delight. From its beginning as a part of health research, the quality of life studies have grown and progressed continuously. Health Related Quality of Life (HRQoL) has been developed as a tool to measure health-related quality of life over time. On the other hand, quality of life studies have been integrated into the context of development studies, especially as an attempt to answer questions on development that is not aimed at economic growth but at human development. A later, WeD program suggests that quality of life is a subcomponent or a pillar of wellbeing (Promphakping, 2006).

This study focuses on the necessities that enable the wellbeing of rural households. Such necessities are judged using subjective criteria or perception of the target group. We view that such judgment is based on the value system and concerns prioritization of factors surrounding the target group. Most importantly we will conduct a comparison to analyze any changes that occur. In the next part we will discuss the research methodology in detail.

## **MATERIALS AND METHODS**

As mentioned earlier, the WeD program recognizes quality of life as a part of wellbeing and has investigated the quality of life of target populations. The WeD program views that an individual's perception of quality of life and the quality of life experience is based on cultural context. Thus, this research study is a process to enable each individual person to reflect on or report what he/she thinks is important for his/her household to achieve wellbeing. WeD's QoL research is divided into three phases. The first phase involves a survey of components of quality of life and makes use of participatory methods and ethnography for data collection. In the second phase, the data obtained are reviewed and analyzed, using the conceptual framework of quality of life. An attempt is made to integrate such data into the concepts of health-related quality of life, subjective wellbeing and other related psychological concepts. The final phase is to create measures to be employed in the survey or collection of quality of life data (Camfield, 2005).

The tool used in this study is a questionnaire on the perception of necessities that enable the wellbeing of households. The questionnaire was developed by WeD program and consists of 43 close-ended questions for respondents to evaluate how necessary each item in

question is for their households to achieve wellbeing. The respondents have to choose one of three levels that are: not necessary, necessary and very necessary.

At that time, the WeD program conducted the study in four countries, namely Thailand, Peru, Ethiopia and Bangladesh. In Thailand, the study was conducted in two regions; the South and the Northeast. In the Northeast, three villages were purposively selected, using the distance from cities as the criterion. The three selected villages were located in the provinces of Khon Kaen, Roi-et and Mukdahan. The first data collection was performed in 2002.

The second data collection was a project implemented by the Research Group on Wellbeing and Sustainable Development (WeSD). This research was evolved from the WeD program and continues its research in to wellbeing and development even after the WeD program came to an end. For the second data collection, the same questionnaire was administered with some items deleted. The items deleted were those considered insignificant or repetitive. The modified questionnaire was used with members of the same households who participated in the first survey under the WeD program that comprised of a total of 184 respondents. In the second survey, there were a total of 194 respondents. The analysis of this study is based on data obtained from the same number of households (184) in both surveys.

Descriptive statistics were employed in data analysis. The rank or priorities of items were justified by the frequencies of answers to the question 'what is considered to be very important to your household's wellbeing' and then comparing between in 2005 and 2016.

## **RESULTS AND DISCUSSION**

The analysis of the necessities that enable wellbeing of rural households of the Northeast: changed over a decade (2005-2016) and is presented in two parts: general characteristics of rural households and change in necessities that enable the wellbeing of households.

**General characteristics of rural households:** More than half of the respondents (60%) were female. Almost all of the respondents were Buddhists (98.90%). The largest group of respondents (41.80%) was those aged between 30 and 59 years followed by the age groups of 60 years or over (30.40%) and 15-29 years (27.70%). With regard to marital status, the majority of respondents were married (66.30%) whereas 23.90% of them were single and <10% were widowed or divorced. Concerning economic status

the largest group of respondents earned average income (40.80%) while 30.40% were rich and 28.80% were poor (Table 1).

**Prioritizing wellbeing (2005 and 2016):** Table 2 summarizes the things that were rated as ‘very important’ for the wellbeing of the households by the respondents. Items that were listed in the top ten for 2005 were healthiness, being debt-free, healthy family relationships, access to enough food on a daily basis having a room or house to live in access to enough water having their children receive a high level of education having well-behaved children, access to health services and all family members being together during special festivals. After 10 years, almost all these items remained on the list. This is except for having their children receive a high level of education which fell out of the top ten to rank 14th while good behavior or being a good person moved up into the top 10. It is appropriate to say that the 10 things

that were considered to be very important for household wellbeing hardly changed during the period of 10 years (2005-2016).

However, Table 2 shows a significant change in the priority of items. There are three things considered to be very important for household wellbeing for which the rank remained unchanged, at the top (health), 5th (having a room or house to live in) and ranking 10th (all family members being together during special festivals).

There were four items that had their importance ranking lowered these were being debt-free (down to 7th from 2nd) healthy family relationship (down to 6th from 3rd), having children receive formal education (down to 14th from 7th) and having well-behaved children (down to 8th from 7th). With respect to household debt, it has been chronic and difficult to solve. Chronic indebtedness of farmers in Thailand has been an important problem for decades. The government established the Bank of Agriculture and Agricultural Cooperatives (BAAC) from the beginning of 1970s in order to enhance the access to credit for farmers. The loans provided by the BAAC are to support farmers to invest in their agriculture. However, the prices of agricultural commodities are subject to fluctuation and most small farmers are unable to pay off their debts. Furthermore, when the government introduced a policy to stimulate consumption, promoting economic expansion and growth, household debt was somewhat promoted by this consumption. The ability of rural households to pay-off debt was low and therefore chronic indebtedness was regarded to be spoiling their household wellbeing. However, the government has introduced a number of policies to prolong the indebtedness of rural farmers, for instance, the One Village One Million Baht Scheme, the Rice Mortgage Scheme, debt suspension or renewal of BAAC debts. Although being debt free is important for the households, the priority is lower than before as becoming debt free may be difficult to achieve. The drop in the rankings of having children receive formal education having a

Table 1: General characteristics of rural households in the Northeast

General characteristics	Percentage (n = 184)
<b>Villages</b>	
Ban lao kwian hak	24.50
Ban manao	25.00
Ban tha ngam	24.50
Non nongwat community	26.10
<b>Gender</b>	
Male	44.00
Female	56.00
<b>Religions</b>	
Buddhism	98.90
Islam	1.10
<b>Age</b>	
15-29 years	27.70
30-59 years	41.80
60 years or over	30.40
<b>Marital status</b>	
Single	23.90
Married	66.30
Widowed/divorced	9.80
<b>Economic status</b>	
Poor	28.80
Average	40.80
Rich	30.40

Table 2: A comparison of percentages and rankings of the top 10 factors considered very necessary for household wellbeing in 2005 and 2016

Factors very necessary for wellbeing	2005	Ranking	2016	Ranking	Change in ranking
Healthiness	92.40	1	81.00	1	No change
Being debt-free	88.60	2	71.20	7	Down
Healthy family relationship	84.80	3	72.30	6	Down
Access to enough food on a daily basis	83.70	4	81.00	2	Up
Having a room or house to live in	81.50	5	73.90	5	No change
Access to enough water	80.40	6	78.30	3	Up
Having children receive a higher level of education	79.30	7	63.00	14	Down
Having well-behaved children	79.30	7	70.10	9	Down
Access to health services	72.80	9	70.10	8	Up
All family members being together during special festivals	67.40	10	67.40	10	No change
*Good behavior/ being a good person	65.20	13	75.00	4	Up

\*New factor ranked 4th in 2016 but not making it into the top 10 in 2005

good relationship and having well-behaved children reflected a social and cultural change in the rural community. In previous times the parents relied on the support of their children in their old age and agricultural lands would be divided and inherited by the siblings. During the transition of the Thai economy, agricultural lands were becoming scarcer and families supported their children to earn their livelihoods outside of agriculture. Education is usually seen by parents who are able to finance their kids through higher education as an important means to ensure success in earning a living outside of agriculture or to be able to mobilize away from agricultural poverty. Migration to work away from home gradually led to disintegrated family relationships. Moreover, people in rural areas have experienced that education is not a magic means to bring them out of poverty. Parents are therefore adjusting their expectations regarding support from their children in old age. Having good family relationships having their children receive a higher level education and having well-behaved children are therefore lower in the villager's priority.

There are also four items that people considered to be very important which rank their priorities in 2016 higher than in 2005. The first three items were found in the top ten of both 2005 and 2015 these were access to enough daily food (ranked 4th in 2005 and 2nd in 2016) access to enough water (ranked 6th in 2005 and 3rd in 2016) and access to health services (ranked 9th in 2005 and 8th in 2016). These findings are surprising in that daily food and clean water have not been serious issues for at least the past 2 decades. The possible reason for the high priority could be that people in rural areas are more dependent on foods that they do not produce themselves. Although, rice as a staple food, continues to be grown by the households, other items of food such as meat, fish, different kinds of vegetables, etc., are mostly sourced from daily markets. Similarly, the concern regarding the access to clean drinking water reflects the dependence of rural people on bottled water produced by businesses. The increased priority of the access to daily water and food may be due to the incomes of rural households. While daily food and water require daily spending, the incomes of rural households fluctuate, seasonally and are incompatible with the increased consumption demanded by the households. Regarding the priority of access to health services, the change in priority is minimal. This reflects the highest importance of good health which in order to be achieved requires good access to health services.

The fourth item, for which the rank was moved up from 13th in 2005 to 4th in 2016 is being of good behavior or a good person. Being a good person is related to

religious values which include austerity, freedom from greed, integrity, kindness, generosity, etc. After the economic crisis in 1997, these values were promoted by the state by reason that Thai people were too deeply entrenched in Western or capitalist values and that resulted in the economic crisis. More recently, the values have concerned being a good person and this has been even more accentuated and strongly promoted by the state. The move up in the priority of this item obviously reflects the state campaign and the reason given by the state is to lead society to wellbeing for all.

## CONCLUSION

The assumption of the analysis of this study is that rural socio-economic change will alter values. This study is particularly concerned with values pertaining to the wellbeing of households and these values were observed by prioritizing the items that are very important to wellbeing. This study found that there was only a slight change in the items that are important for household wellbeing; almost all of the top 10 items remain the same. Such findings confirmed Milton Rokeach's theory of values (Rokeach, 1973) that values are beliefs that are relatively enduring in nature (but are alterable).

However, this research also revealed that there were obviously changes in the priority that people gave to these items. A comparative analysis disclosed that health, having a room or house to live in and all family members being together during special festivals retained the same priority, they were ranked 1st, 5th and 10th in both 2005 and 2016. This confirmed the findings of research in the Northeast of Thailand (Camfield, 2005) and elsewhere (Jongudomkarn and Camfield, 2006; Jongudomkarn, 2006; Krobbuaban and Prompakping, 2011) that health is the leading component of objective wellbeing.

Items where the ranking moved down were concerned with socio-cultural aspects; these were good family relationships, children's schooling and having well-behaved children. These items can be considered as subjective aspects of wellbeing. Meanwhile, this study found that the items whose ranking moved up were concerned with economics or the objective dimension of wellbeing these are access to food, water and health. In wellbeing debates, it has been well established and recognized that wellbeing is comprised of both subjective and objective aspects (Prompakping, 2006). However, the relationships between the two aspects remain an area of contention. The finding of this study suggests that the subjective aspect has been weakened while the objective dimension appears to be more important in the wellbeing of people in the Northeast of Thailand. It is however,

necessary to recognize that 'subjective' and 'objective' conditions are transferable, i.e., relationships can be a means to obtain services and goods, being a good person can enhance their status and enable the control of resources. But the finding of this study provides a solid basis to conclude that in the transformation of rural Northeast Thailand, the values and priorities of people, regarding items (factors) that are important for their wellbeing, are more oriented towards the objective aspect.

#### ACKNOWLEDGEMENTS

This research study is funded through the Research Funding of Humanities and Social Sciences Faculty (Revenue fund in 2016), Khon Kaen University, Thailand and this research paper is a part of the study entitled, "Changes of Socio-economic and their Impacts on Wellbeing of Rural the Northeast of Thailand in a Decade". We would like to thank the grant and the representatives who participated in the data collection.

#### REFERENCES

- Benedict, R., 1934. *Patterns of Culture*. Vol. 8, Houghton Mifflin Harcourt, Boston, Massachusetts, Pages: 295.
- Camfield, L., 2005. Researching quality of life in developing countries. Economic and Social Research Council, Swindon, UK.
- Clarke, R., 2006. *Measuring Wealth Across Seven Thai Communities*. University of Bath, Bath, England, UK.
- Gough, I., M.J.A. Gregor and L. Camfield, 2006. Wellbeing in developing countries: Conceptual foundations of the WeD programme. Economic and Social Research Council, Swindon, UK.
- Gregor, M.A., 2006. *Researching wellbeing: From concepts to methodology: Wellbeing Developing Countries (WeD)*. University of Bath, Bath, UK.
- Gregor, M.J.A., L. Camfield, A. Masae and B. Promphaking, 2008. Wellbeing, development and social change in Thailand. *Thammasat Econ. J.*, 26: 1-27.
- Herbert, P.P., 1965. *Thai Peasant Personality: The Patterning of Interpersonal Behavior in the Village of Bang Chan*. University of California Press, Berkeley, California, Pages: 235.
- Jacobs, N., 1971. *Modernization without Development: Thailand as an Asian Case Study*. Praeger, New York, USA.,.
- Jongudomkarn, D. and L. Camfield, 2006. Exploring the quality of life of people in North Eastern and Southern Thailand. *Soc. Indicators Res.*, 78: 489-529.
- Jongudomkarn, D., 2006. [Holistic health: Methodology for human wellbeing (in Thai)]. *J. Humanities Soc. Sci.*, 23: 58-79.
- Komin, S. and S. Samakkarn, 1979. [Thai values and values systems: A tool for survey]. National Institute of Development Administration, Bangkok, Thailand, (in Thai).
- Krobbuaban, B. and B. Prompakping, 2011. Meanings and indicators of well-being in health in the perspective of the farmers in the northeast of Thailand. *J. Med. Assoc. Thailand*, 94: 242-249.
- Laungaramsri, P., 2014. *Contested Citizenship: Cards, Colors and the Culture of Identification*. In: *Ethnicity, Borders and the Grassroots Interface with the State: Studies on Mainland Southeast Asia in Honor of Charles, Keyes, F. and Amos, J. (Eds.)*. Silksworm Books Publisher, Chiang Mai, Thailand, pp: 143-162.
- Mukdawijitra, Y., 2012. Money is not a Decisive Factor in Election: Anthropology of Thais Vote Buying. In: *People Politics of (Post) Thaksin Era*, Panyakaew, W. (Ed.). Chiang Mai University, Chiang Mai, Thailand, pp: 29-50 (in Thai).
- Prompakping, B., 2006. [Wellbeing: Concept and research issue (in Thai)]. *J. Humanities Soc. Sci.*, 23: 1-31.
- Rokeach, M., 1973. *The Nature of Human Values*. Free Press, New York, USA., ISBN-13: 978-0029267509, Pages: 438.
- Samakkarn, S., 1976. *A full Purse Never Lacks Friend in Thai Family and Relative System*. Bunnakij Trading, Bangkok, Thailand, (in Thai).
- Settho, R., 1989. [Social Structure and Thai Culture]. Thaiwattanapanich Printing, Bangkok, Thailand, (in Thai).