

U wordt vriendelijk uitgenodigd op de openbare verdediging van het proefschrift van

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'Introducing a human dimension in Thai health care: the case for family practice'

Op **donderdag 28 juni 2007**
om **18.30 uur**
in auditorium **P. Brouwer** van de
Faculteit Geneeskunde & Farmacie,
Laarbeeklaan 103, 1090 Brussel

Situering van het proefschrift

In Thailand scientific medicine was introduced in 1888. From its inception it was based on a biomedical model organized through hospital care provided by specialized physicians. Thai Doctors were and generally continue to be hospital doctors. In 1991 family medicine was introduced. In 2001, Primary Care Units (PCUs) were set up nationwide, based on the experience of the first family practices. The thesis presents the rationale for the introduction of family medicine and describes the process through which small scale experimental introduction eventually developed into a national policy. It focuses on the performance of doctors in the different ambulatory settings. Health care provider behavior is observed through simulated patients and patient satisfaction assessed through exit surveys. Several complementary studies with randomly chosen facilities and doctors in Bangkok as well as throughout provinces provide an empirical basis to build health policy upon. The added value to the Thai health care system resulting from the introduction of family medicine can be summarized as follows: (i) family practices appeared to increase patient-centredness, with improvement in responsiveness and control of cost; particularly in family-practice-health-centres rather than outpatient-departments of hospitals(ii) family practices were perceived by patients as better than non-family practices in the public as well as in the private sector. To change the paradigm of health care delivery several constraints a.o. in medical education, career perspectives offered and career choice still have to be overcome.

Curriculum Vitae

Pongsupap Yongyuth was born in Ayutthaya (Thailand) on the 18th of december 1965. He graduated MD in 1989 at the Mahidol University of Bangkok (Thailand) and obtained a Master in Public Health in 1996 at the Institute of Tropical Medicine of Antwerp (Belgium). Actually he is active as Family practice component manager and Deputy Director of the Health Care Reform Project phase II; as Health Policy Expert at the Health Policy and Planning Bureau, National Health Security Office and as Family practitioner in Ayutthaya, Thailand. His most recent articles concerning the thesis are Pongsupap Y and Van Lerberghe W (2006): Is motivation enough? Responsiveness, patient-centredness, medicalization and cost in family practice and conventional care settings in Thailand. Human Resources for Health, Vol 4:19; Pongsupap Y and Van Lerberghe W (2006): Patient experience with self-styled family practices and conventional primary care in Thailand, Asia Pacific Family Medicine Journal Vol 5 (1); Pongsupap Y and Van Lerberghe W (2006): Choosing between public and private or between hospital and primary care: responsiveness, patient-centredness and prescribing patterns in outpatient consultations in Bangkok. Journal of Tropical Medicine & International Health: Vol II (I): 81-89. And he has also a monography in preparation: Pongsupap Y and Van Lerberghe W: Introducing Family Medicine in Thailand, WHO Geneva.