

# In the battle against COVID-19, some Thai provinces cry foul

written by Mark Cogan | September 2, 2021



**Vaccination efforts in Thailand have recently shifted from Bangkok to the provinces. But all is not equal between provinces. At the start of the third wave, Bangkok justified taking most doses because it had more cases. But in the Northeast, Surin has faced a major outbreak but it receives a fraction of the vaccinations its neighbor Buriram receives. Mark S. Cogan examines how unclear criteria has perpetuated inequality and deprives those who need and deserve a vaccination.**

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Along a road in Surin Province, [a billboard reads](#), “Protect yourself from COVID, get a jab.” Medical personnel are featured prominently on the sign, an encouragement to locals to get vaccinated from the coronavirus.

Recently, the number of COVID-19 cases in Surin province increased to more than 100 per day, which in the northeast of Thailand is second only to Nakhon Ratchasima. The pandemic has hit Surin province hard. Many are out of work, [including the province’s fabled elephants](#) and their carers. Shops and restaurants are quiet as people mostly stay at home.

Despite a feeling of crisis, an increasing number of COVID infections, and the damage to the local economy, many in Surin feel that the province isn't getting the resources it needs to fight the pandemic, evidenced by the high number of people that still remain unvaccinated.

In the remote areas of the province which are adjacent to the Cambodian border, 95 percent of villagers are still not vaccinated, despite advertising suggesting they register with local village health volunteers. To date, mostly medical personnel, village headmen and village health volunteers have been inoculated, while many locals remain confused about how to register or complain that no one has reached out to them. Out of a population of 800,000, Surin province has only vaccinated roughly 100,000 people, mostly with Sinovac and AstraZeneca vaccines.

Surin stands in contrast with Buriram province, as politicians and policy experts have accused the Ministry of Public Health of being far too generous with the province's COVID-related resources. Buriram's allocation of large amounts of COVID-19 vaccines made headlines after former election commissioner Somchai Srisutthiyakorn made [critical comments about the Bhumjaithai Party](#), which controls the Public Health Ministry under Anutin Charnvirakul. Buriram is Anutin's constituency. Move Forward MP Sirikanya Tansakun [also made inquiries in July](#) to the Department of Disease Control, who failed to provide a substantive response. Sirikanya suggested that the allocation of vaccines should go first to the hardest-hit provinces, such as Bangkok, and provinces that are reopening to promote tourism, like Phuket.

The government's allocation plan from May suggests that some of this criticism had merit, as Buriram was one of the top ten provinces receiving domestically-produced AstraZeneca vaccines, ahead of some provinces that were hotspots of COVID-19 transmission, such as Pathum Thani, which reported more than 13,000 cases between April and July, compared to Buriram's 1,100 cases over the same period. According to the Ministry of Public Health, Buriram received more vaccines per capita than some of the most affected Thai provinces.

Thongthong Chantrangsue, former Permanent Secretary for the Prime Minister's Office, also [had issues with Buriram's seemingly preferential treatment](#), taking issue with police from Ban Mai Chaiyaphot Police Station of whom 11 officers received a third booster vaccination, ahead of millions of Thais who have yet to receive their first dose.

When the Ministry of Public Health revealed its delivery plan for the U.S.-donated 1.5 million doses of the Pfizer vaccine, again Buriram was one of the provinces that were [allocated a large number of vaccines](#), leaving many to wonder if the allocation was fair.

In general, [vaccine allocation is determined by the degree of the epidemic](#). Bangkok and surrounding provinces are in the first group, provinces with borders adjacent to neighboring countries comprise group two, while the remaining 49 Thai provinces round out group three. Allocation can change, experts say, according to the situation on the ground.

Both Surin and Buriram provinces border Cambodia in Thailand's lower northeast. Surin is also home to a large trade market at Chong Chom, the largest in the region. Many have warned that the area is a COVID risk, as people are moving frequently between provinces. In July, [approximately 2,000 Cambodian migrants returned home](#) via the Chong Chom border crossing due to the closure of worker camps during the pandemic. It was later discovered that 239 migrant workers contracted COVID-19, the Oddar Meanchey Provincial Health Department of Cambodia reported. Some have called on Thai Prime Minister Prayut Chan-ocha to recognize the importance of the border issue, particularly after three immigration officers were allegedly infected by Cambodian people coming back from high-risk areas. Immigration officers frequently come into contact with migrant workers before they are sent back to Cambodia. The concern is that while the adjacent two provinces share

borders with Cambodia, it is Buriram that is getting the majority of resources.

The sense of competition for resources among provinces, or a lack of transparency and equality in the distribution of COVID-19 vaccines, has prompted Amnesty International to [launch a campaign](#) urging the Thai government to take measures to ensure fair access to vaccines for all people. Over the course of two years, more than 8,000 people have died from COVID-19 in Thailand.

There have been numerous complaints, often from opposition MPs like Ekachai Song Amnat Charoen, from Ubon Ratchathani, [about the lack of equitable distribution of vaccines](#). Ekachai noted that his home province of Ubon Ratchathani had vaccinated 300,000 people out of a total population of 1.8 million, whereas Buriram had already vaccinated 600,000 of its 1.5 million residents.

The Thailand Development Research Institute (TDRI) recently reported that Buriram was ranked 11th among Thai provinces for vaccination, despite not meeting any criteria, such as the number of infected people, tourism income, or being one of the provinces in urgent need of vaccines. The report noted that Buriram was “[not considered a high-transmission area or major tourism destination](#) or province in urgent need of vaccines as announced by the Department of Disease Control in May.” According to TDRI, Buriram had vaccinated as much as 19% of its population as of early July.

Overall, Thailand’s vaccination rollout remains unequal, as there is a [large gap between the vaccination rates between the Bangkok Metro area and most of the rest of the country](#). *The Isaan Record* recently reported that Bangkok consumed 48% of the first doses of COVID-19 vaccines, 235% more than its share compared to the proportion of the population. Phuket’s share was 12 times higher than Isaan in terms of first doses, and 21 times higher for second doses.

The World Health Organization (WHO) generally advises that when resources are scarce, [governments should prioritize certain groups over others](#) before expanding distribution of resources to all population groups. When vaccines become available, as determined by the WHO’s Strategic Advisory Group of Experts on Immunization, resources should be allocated to frontline medical workers first, followed by people over the age of 65, and then people with underlying health conditions. Geographical concerns should also be taken into account.

However flawed, corrupt or political its distribution of resources may be, Buriram province has made some positive impacts. In May, Buriram Hospital unveiled its COVID vaccination plan, targeting several groups in terms of their occupation and potential to spread the virus, such as street vendors, supermarket workers, food distributors, and transport workers. While not deemed a priority province, Buriram has distinguished itself with an innovative program, that while may depart from WHO guidelines, is responsive to the needs of its communities.

Yet numerous stories about excess, such as an [elderly Buriram woman accidentally receiving two doses of vaccine on the same day](#), whereas most of Thailand has yet to receive their first dose reinforce the notion that the province is somehow either extremely fortunate or that its political influence by the Health Minister puts it before neighboring provinces.

Srisuwan Chanya, the Secretary-General of the Association to Protect the Thai Constitution, recently complained to Thailand’s National Anti-Corruption Commission (NACC) that Buriram’s allocation of vaccines was unfair discrimination and asked that the anti-corruption body investigate people responsible for the allocation of the third shot given to the police.

Given the mounting criticism of Buriram’s advantageous distribution of resources compared to Surin and other Isaan provinces, greater transparency and accountability are required from both public

officials, politicians and the Ministry of Public Health in justifying what appears to be distribution without clearly defined criteria.

In the battle against COVID-19, Thailand can ill afford allegations of favoritism or competition among provinces for pandemic-related resources. Such valuable resources, particularly in light of the government's perceived incompetence in both managing coronavirus outbreaks and the vaccination rollout, should be distributed based on a distinct set of criteria. Other Isaan provinces clearly have demonstrated sufficient need, and should not have to resort to public criticism in order to get the full attention of the Ministry of Public Health. It's unfortunate that they must cry foul in order to get scarce resources to administer to the needs of their populations.