

PAM THAILAND · MAY 2026

ECONOMIC COST & POLICY PRIORITIES

# The Economic Cost of Perinatal Mental Health Problems in Thailand

*Impacts on Mothers, Newborns, and Society,  
and  
Recommended Actions*

**USD 2.1bn**

**THB 68bn**

ANNUAL BURDEN

PUBLISHED BY

Perinatal Alliance for Mental Health Thailand and  
PAM Foundation

ECONOMIC ANALYSIS BY

Care Policy and Evaluation Centre,  
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THAILAND



# The Situation in Thailand

## FOUNDATIONS

Thailand has several important foundations for strengthening perinatal mental health care.

✔ Universal Health Coverage

✔ High antenatal care utilisation

✔ Existing mental health infrastructure

✔ Depression screening guidelines within antenatal care

✔ Increasing national awareness of mental health

## KEY CHALLENGES

Important challenges remain across five areas.

### Under-recognition and under-treatment

Despite screening tools being available, many women experiencing psychological distress remain unidentified or untreated

### Inconsistent screening and referral systems

Screening thresholds, referral pathways, and continuity of care vary across settings.

### Workforce limitations

Mental health specialists remain concentrated in Bangkok and urban centres.

### Stigma and barriers to care

Cultural stigma surrounding mental illness and motherhood may discourage disclosure and help-seeking.

### Inequities in access

Women in rural areas, migrant populations, and informal-sector workers may face additional barriers to care and social protection.

# The Cost of Untreated Perinatal Mental Health Problems in Thailand



## Perinatal mental health has substantial economic costs

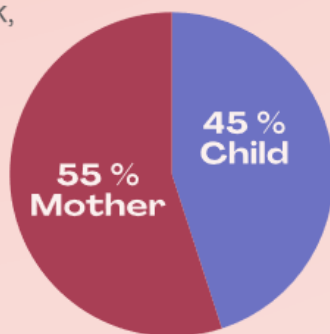
Mental Health problems during the perinatal period affect the child and mother long after this period ends, often for decades thereafter, with impacts on the family and the nation's future

THE ANNUAL COST TO THAILAND

# ฿68 BILLION

US\$ 2.1 billion, or ฿105,500 (US\$ 3,250) per woman. giving birth  
These costs are split almost equally between mothers and children.

Reduced ability to work, losses in wellbeing and length of life.



Poorer health and development, impact on education, future earnings and healthcare needs.



**97 %**  
OUTSIDE THE HEALTHCARE SYSTEM

Driven by long-term impacts on productivity and quality of life.



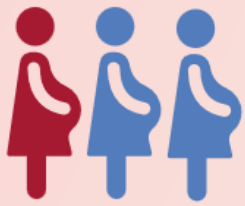
In Thailand, around **200,000 women each year** experience mental health problems during pregnancy or after birth, most commonly **depression and anxiety** influenced by social factors such as **poverty, violence, and gender inequality**. These conditions can have serious long-term effects on both mothers and children.

A new report led by the London School of Economics and Political Science, working in close collaboration with Thai academic and hospital partners and international experts showed:

## The human impact is profound

### MOTHER'S SITUATION

Up to **1 in 3** women in low and middle-income countries



experience **mental health problems** during pregnancy and after birth

**13%**

of **total quality and quantity of life loss** among women aged 15–49 worldwide is because of mental health problems

### IMPACT ON CHILDREN



In Thailand, only **14% of mothers** exclusively breastfeed, much below the World Health Organization's goal of 70%

**7%**

discontinue breastfeeding because of **poor mental health**



Each year, Thailand pays **฿64 million** to support premature and low birth weight babies due to untreated perinatal mental health problems

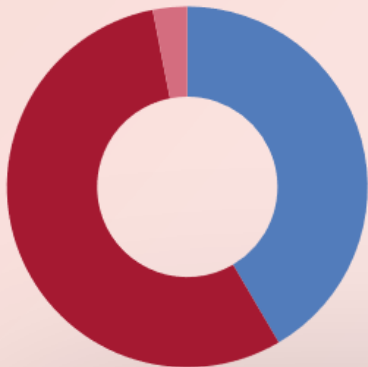


**9,500**

Cases of **childhood stunting** linked to **maternal depression** per year in Thailand

### WHERE DO THE COSTS COME FROM?

฿68 billion = 12% of Gross Domestic Product



- Productivity losses **฿37 billion**
- Quality of life losses **฿29 billion**
- Hospital costs **฿2 billion**

### GLOBAL CONTEXT

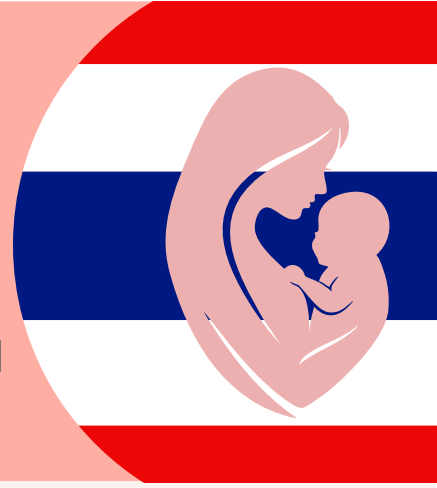


Cost per woman giving birth

\* Costs were estimated using a modelling approach, consistent with international standards and available via the **Global Economics of Mental Health website** (<https://gemmh.org/>). The model **follows mothers and their children over time** and uses the best available national data to estimate **impacts on healthcare use, income, and quality of life**. The findings are conservative and underestimate the true costs because some impacts were not included due to limited evidence.

# Policy Priorities for Perinatal Mental Health in Thailand

Building a coordinated, equitable, evidence-based system for mothers, babies, and Thailand



1

Stakeholder Collaboration & Engagement



Coordinate stakeholders, e.g. government, health services, professionals, through an alliance

- ✓ Reduce fragmentation
- ✓ Align policies
- ✓ Shared ownership

2

Map Existing Care Systems



Conduct a baseline assessment of PMH services across antenatal and postnatal care

- ✓ Identification practices
- ✓ Referral pathways
- ✓ Workforce distribution and skills

3

National Guidelines Development

Develop integrated, evidence-based national guidelines



4

Concurrent Solutions Delivery

Strengthen current practices



- ✓ Provide "toolkits"
- ✓ Implement specific Continuing Education courses
- ✓ Update existing professional training
- ✓ Educate broader communities & healthcare workers

5

National Research Agenda & Monitoring System

Build a strong evidence base and accountability through data and research



- ✓ Routine PMH surveillance
- ✓ Standardisation of tools
- ✓ Expansion of longitudinal studies
- ✓ Expansion range of studies' sites



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Overall



Thailand is well positioned to act to move from partial integration to a coordinated national PMH system which aligns governance, service delivery, and workforce capacity



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## CONCLUSION

### **Perinatal mental health problems represent a substantial but addressable public health and economic challenge in Thailand**

Thailand already has strong foundations: universal health coverage, antenatal infrastructure, and growing national awareness. Meaningful progress requires coordinated action across policy, workforce, and systems.

#### **Policy Leadership**

Coordinated national guidelines and stakeholder alignment

#### **Workforce Investment**

Training, distribution, and specialist capacity beyond Bangkok

#### **Cross-Sector Systems**

Consistent screening, referral, and continuity of care

***“Improving maternal mental health is therefore not only a healthcare priority, but an investment in future generations.”***