5. Evidence-informed decision making

Policymakers and stakeholders considered evidences from the research results and approved the principles of colorectal cancer screening in Thai population with some recommendations on the design of the screening system as well as its feasibility at the national scale. Initially, the practice may be taken only in certain areas.

6. The National Health Security Office's board (Thailand) will consider and resolve whether to add or expand benefits and services.

3. Conducting research and generating evidences

Researchers studied cost-effectiveness of various population screening methods for colorectal cancer and determined who should be screened, at what age and at what frequency.

Evidence Generation

Resource

Governance/Institute

4. Preliminary results and policy recommendations

Capacity

Collaboration/Networks

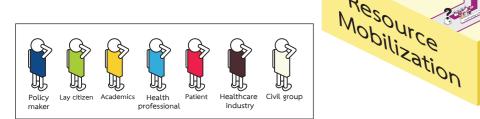
Building

The research team found that colonoscopy is one of the cost-effective methods. However, from expert meetings, recommendations given suggested that there was a limitation of service capability. If this policy is to be implemented, it should begin with screening the high risk group, age 60, at least once in their lifetime.

2. Selection of topics for benefits package development Population screening for colorectal cancer was one of the topics selected. This topic needed to study the cost-effectiveness of screening methods.

1. Nomination of topics for benefits package development

With a participatory process stakeholders nominated health problems and technologies to be studied through a topic selection activity of the project called 'Research for Development of Health Benefits Package under Universal Healthcare Coverage Scheme (UCBP)'.



Essential Elements of Health Priority Setting

Priority setting of health problems and solutions involves two major steps of evidence generation and evidenceinformed decision making. For instance, in Thailand, there was a research project of population screening for colorectal cancer. Thai elderlies are vulnerable to such disease. However, screening tests help identify cancers at an early and potentially curable stage. In this case, evidence generation activity studies the cost-effectiveness of population screening methods for colorectal cancer. Based on the economic evaluation results, the screening by means of colonoscopy in the high risk group, with first degree relatives (father, mother, siblings, son or daughter) having colorectal cancer, is one of the cost-effective methods. However, given the limitation of service capability, if this policy is to be implemented, it should begin with screening the high risk group, age 60, at least once in their lifetime.

Priority setting in particular health systems is implicated by a wide range of political, economic and sociocultural factors, through the four building blocks:

- Governing structure, functions and regulation of respective institutes and their interrelationships;
- Resource availability and mobilization to support priority setting activities;
- Capacity building programs for well understanding and knowledge concerning health priority setting among policymakers, researchers and other stakeholders including general public; and
- Collaboration and networks of local, international and global organizations whose aim is to strengthen UHC policy decisions.¹

