

Influence of State-sponsored Policies, Living Culture, Motivating Factors, Supporting Factors and Access to Public Health Services That Affect Quality of Life of Laborers in Large Goods Wholesale Markets in Thailand

By

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Abstract

The objectives of this research are: 1) to study opinions of laborers about factors influencing quality of life; and 2) to analyze relations of causal factors influencing laborers' quality of life. Population in the research are laborers working in large goods wholesale markets. Calculations of Hair, Black, Babin, and Anderson (2010) were used. A sample group of 600 people were obtained using a convenient randomized sampling method. Statistics used to analyze data were frequency, percentage, mean and standard deviation. Hypothesis testing based on structural equation analysis yielded values that were used to examine harmony and coherence of structural equation model with empirical data. Results showed that laborers' overall opinions about motivating factor ($\bar{x} = 3.86$) had the highest mean, followed by access to public health services ($\bar{x} = 3.63$), supporting factors ($\bar{x} = 3.59$), living culture ($\bar{x} = 3.46$) and state-sponsored policies having the lowest mean ($\bar{x} = 3.34$). Analysis results of state-sponsored policies (gov), living culture (cal), motivating factor (mot), supporting factor (con) and access to health care services (hel) showed path coefficients of 0.65, 0.54, 0.86, 0.75, 0.77, respectively. Examination of coherence between structural equation models revealed that all indices passed the standard criteria: $\chi^2 = 201.762$, $df = 180$, $GFI = 0.973$, $AGFI = 0.954$, $CFI = 0.997$, $NFI = 0.970$, $RMSEA = 0.014$, which passed all criteria for statistical significance (p - value) at 0.014. It can be concluded that analysis results were consistent with empirical data.

Index Terms — central market, central whole sales market, alien labor, agricultural produce

Introduction

To keep up with the world's globalization pace in accordance with the National Economic and Social Development Plan, Thailand's industrial and agricultural sectors must rely on foreign technologies. As an export-oriented country, Thailand falls into the middle-income category. Thus, the government has the Thailand 4.0 management plan that will make Thailand a new economy with new engines of growth and a higher-income country. Particularly, 3D jobs, namely Dangerous, Difficult, and Dirty, are jobs that most Thais do not want to do (Hongprayoon, 2010). Therefore, labor from neighboring countries is used making the role of labor in the manufacturing sector for 3D work more distinctive. Due to the increasing demand for labor by entrepreneurs, there is an influx of workers, not only in the industrial sector but also in the intense labor sector like transport and handling. Laborers are a very vulnerable group because they are subject to hard work with low wages. Their quality of life is considered merely a production factor. They are not given equal rights to wages and job security.

Currently, there are many types of legal workers who come to work in Thailand. Nationality verification workers (Myanmar, Cambodia, Laos) are the largest number of workers permitted and the number is increasing every year. They work as laborers or in transport. A lot of them are in large goods wholesale markets requiring many laborers. Especially, central markets for large agricultural products hire many workers who are not Thais. These workers live in crowded areas. They must take care of themselves. They claim that there are many limitations, and they have few options for work affecting their quality of life. They are exploited. They work hard but receive low wages. With unsanitary working and living conditions, they are prone to get sick. Their working environment is not in accordance with the Universal Declaration of Human Rights and International Labor Law of the International Labor Organization despite the government's efforts to provide welfare for these migrant workers through legal processes. As a result, Thailand is banned by many countries for violating fundamental human rights and human dignity.

The researcher, therefore, saw the importance of studying factors affecting quality of life of workers using a central market for large agricultural products in Thailand as a case study. The researcher wants to know factors that are useful for basic welfare administration and management that are necessary for workers for better quality of life and wellbeing. This will have a positive impact on Thailand's image and credibility and international recognition, benefiting the country's economy and increasing its competitiveness.

Literature Review

Concept of quality of life

The social development and development on quality of life is a tool to measure performance. It is the primary management of human development whether physically, emotionally, and socially, that enables a person to live in the society appropriately. They can live without suffering in their own condition. They can earn enough income for payment and have a well-being state. According to the necessities in society and to be able to live happily, [UNESCO \(1993\)](#) has defined 7 elements of quality of life as 1) Food, 2) Health, 3) Education 4) Environment and Resources, 5) housing and settlement, 6) Employment, and 7) values, religion, ethics, law and psychological factors. Similarly, the United Nations Educational, Scientific and Cultural Organization ([UNESCO\(1993\)](#)), quality of life is the level of well-being of a society and the degree of satisfaction with part of human needs. Therefore, the quality of life is the level of well-being, happiness, life satisfaction and the environment related to well-being in the life of an individual in society. For the elements of the quality of life of [UNESCO \(1993\)](#) and Campbell's (cited in [Suvadee Tanuwongviwat \(2001\)](#)), the composition of the quality of life proposed that there were 3 aspects: 1. Physical aspect consisting of pollution factors, population density and place of residence, 2. Social aspect consisting of education, health, and wellness of family, 3. Psychological aspect consists of factors of satisfaction, success, disappointment and frustration in life. This is consistent with the indicators of the quality of life of the [Department of Mental Health \(2002\)](#) consisting of 4 areas; Physical Domain, Psychological Domain, Social Relationships, and Environment.

Concept about Relationship between state-sponsored policies and laborers' quality of life

[Thamrongthanyawong \(2003\)](#), [Millet \(1954\)](#), [Van Meter and Van Horn \(1975\)](#), [Sabatier and Mazmanian \(1980\)](#), [Hambleton \(1983\)](#): the main principles of public policies are equality, continuity, improvement, punctuality, adequate service, budget allocation for achievement of policies' objectives, efficient use of resources. There are five main factors for policy implementation as follows: policy interpretation, diversity of departments, resources, and politics such as health insurance policies, human work policies, to respond to policy needs of people in a concrete way through acts, cabinet resolutions, royal decrees, ministerial regulations, rules of conduct, etc.

H1: State-sponsored policies affect laborers' quality of life of laborers in large goods wholesale markets in Thailand.

Concept about Relationship between culture and laborer's quality of life

Living culture is related to living and working. It can drive performance and other things if any organization or community has the same belief or practices. Living culture also affects actions, decisions, motivation. It is the culture that has been with a person since their birth. Different family background, ways of living, living environments affect beliefs, attitudes, and lifestyles of people from different generations. If people migrate, their culture changes to suit their new locations. In terms of health, each area has different concepts, beliefs, and practices. Therefore, ethnicity, culture, religion, traditions need to be considered when it comes to public health services, so they are consistent with people's lifestyle, society, culture, current situations and changes.

H2: Culture affects laborer's quality of life of laborers in large goods wholesale markets in Thailand.

Concept about Relationship between motivating factors and laborers quality of life

(Herzberg's two-factor theory) [Maslow \(1943\)](#) Employee needs are motivators for them to work hard. They consist of: 1) physiological needs: basic needs for living; 2) safety needs or a sense of safety and security; 3) belongingness and love needs by building relationships with others; 4) Self-esteem needs or self-respect and the need to gain esteem from other; 5) self-actualization needs, the highest individual needs. It can be seen that good quality of life is the cornerstone of basic needs, especially, physical and security needs. Therefore, development of guarantees for quality of life of workers is essential to enhancing workers' motivation and morale.

H3: Motivating factors affect quality of life of laborers in large agricultural wholesale markets in Thailand.

Concept about Relationship between supporting factors and laborers' quality of life

[McClelland \(1962\)](#) said that human needs came from learning in society, culture and environments that drive needs in people. The three needs are: 1) the need for achievement: the need for ability to perform tasks, carry out activities until goals are achieved; 2) the need for affiliation: the need for affection and friendliness from people around them; 3) the need for power: wanting to be in a position with commanding powers and wanting to influence other people.

H4: Supporting factors affect quality of life of laborers in large agricultural wholesale markets in Thailand.

Concept about Relationship between access to public health services and laborers' quality of life

Access to public health services: the United Nations stated that rights to health meant rights that the state guarantees to persons in its territory to ensure fairness and equality. Having rights to good health provided by the government is consistent with [Millet \(1954\)](#), [Brown and Lewis \(1976\)](#), [Penchansky and Thomas \(1981\)](#), [Gulliford, Morgan, Hughes, Beech et al. \(2001\)](#) and [Arpornpisan \(2016\)](#), who said that adequate services, ability to conveniently access service resources, recognition of service quality, efficiency and fairness results in satisfaction with the services received and good quality of life of people.

H4: Access to public health services affects laborers' quality of life of laborers in large agricultural wholesale markets in Thailand.

The Conceptual Framework

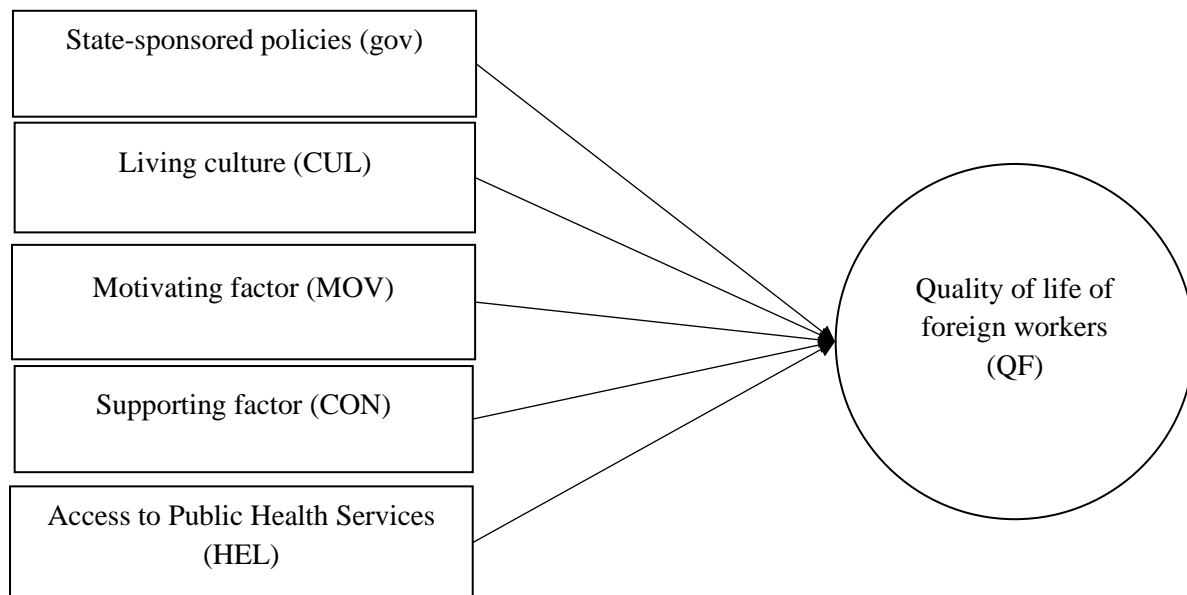


Figure 1. A Conceptual Framework

Research Methodology

This research methodology is qualitative research, the population is 600 laborers working in Simummuang Market and Talad Thai Market in Pathum Thani Province. The sample size was calculated using the calculation methods of [Hair et al. \(2010\)](#). Data were gathered from 600 laborers participating in this research study. The researcher used accidental sampling as a sample selection method.

The research instrument is a questionnaire that has been translated into various languages. It is a content validation and confidence tester. Cronbach's Alpha Coefficient was obtained by using the Item Objective Congruence (IOC) index, using the formula for calculating the conformity index of [Rovinelli and Hambleton \(1977\)](#). Refer to [Tirakanan \(2007\)](#). Determination of confidence of the questionnaire (reliability) by using the Cronbach's Alpha Coefficient formula as an indicator of the questionnaire accuracy ([Tirakanan, 2007](#)). The confidence test result has an alpha coefficient equal to 0.85. In the data analysis, descriptive statistics, percentage, mean and standard deviation and inferential statistics were used for statistical analysis of the relationship between independent variables and dependent variables. The hypothesis was tested using structural equation analysis with values used to check harmony and coherence of the structural equation model with the empirical data.

Research Results

Study results of personal background show most of the respondents were female, 323 women or 53.8%, and 46.2% were men. As for age, 37.7% and 26.8% of the respondents were aged between 20-25 years and 26-30 years. As for marital status, 79.0% of the respondents were married. Regarding education, 64.7% of the respondents finished primary school. Regarding types of residence, 90.7% of the respondents rented their accommodations. Regarding work duration, 40.2% of the residents could not give an answer. Regarding work hours per day, 61.5% of the respondents work 9-12 hours per day. Regarding daily wages, 77.7% of the respondents earn 301-500 baht per day.

Table 1. Opinion levels: state-sponsored policies, living culture, motivating factors, supporting factors and access to public health services

Opinion level, causal factor	Opinion level		Interpretation
	\bar{x}	S.D.	
State-sponsored policy			
Government-sponsored budget	3.69	.686	High
Legal rights	3.38	.772	Medium
Knowledge and information	3.34	.832	Medium
One-stop service	3.38	.808	Medium
Overview	3.34	.832	Medium
Living culture			
Belief	3.25	.788	Medium
Attitude	3.59	.678	High
Wellbeing	3.56	.574	High
Overview	3.46	.501	High
Motivating factor			
Working environment	3.88	.629	High
Relationship with colleagues	3.88	.670	High
Management and supervision	3.84	.739	High
Compensation and benefits	3.78	.820	High
Work stability	3.86	.539	High
Overview	3.86	.539	High
Supporting factor			
Duties and responsibilities	3.51	.804	High
Recognition	3.73	.710	High
Success and progress	3.54	.609	High
Overview	3.59	.619	High
Access to public health services			
Service Infrastructure	3.44	.684	High
Service process	3.44	.684	High
Access to medical care	3.71	.683	High
Customer satisfaction	3.97	.630	High
Overview	3.63	.463	High

For overall opinions of workers, it was found that motivating factors ($\bar{x} = 3.86$) had the highest mean, followed by access to public health services ($\bar{x} = 3.63$), supporting factors ($\bar{x} = 3.59$), living culture ($\bar{x} = 3.46$) and state-sponsored policies having the lowest mean ($\bar{x} = 3.34$).

Regarding workers' opinions on access to public health services, subsistence benefits and positive effects on management of welfare services of the Thai government for workers, there are four indicators: 1) budget support, 2) legal rights, 3) knowledge and information, and 4) one-stop service. Total data from the four indicators were moderately average ($\bar{x} = 3.34$). Only government budget support was at a high level according to workers' opinions with the average ($\bar{x} = 3.69$), while the other three indicators were at a medium level.

Opinions on living culture in each aspect: it was found that attitudes had the highest mean ($\bar{x} = 3.59$), followed by livelihood ($\bar{x} = 3.56$) and belief with the least value ($\bar{x} = 3.25$).

Regarding opinions on each aspect of motivating factors, it was found that working environments and relationships with colleagues had the highest mean ($\bar{x} = 3.88$), followed by job security ($\bar{x} = 3.86$), management and supervision ($\bar{x} = 3.84$), and compensation and benefits that had the highest mean ($\bar{x} = 3.78$).

Regarding opinions on supporting factors, it was found that recognition received the highest mean ($\bar{x} = 3.73$), followed by success and progress ($\bar{x} = 3.54$) and work and responsibility with the lowest mean ($\bar{x} = 3.51$).

Regarding opinions on access to public health services, overall customer satisfaction had the highest mean ($\bar{x} = 3.97$), followed by access to medical care ($\bar{x} = 3.71$). Infrastructure of service areas had the lowest mean ($\bar{x} = 3.44$).

Table 2. Study results of opinions about laborers' quality of life

	Laborers' quality of life	Opinion level		Interpretation
		\bar{x}	S.D.	
1.	Physical factor	3.52	.697	High
2.	Mental factor	3.62	.618	High
3.	Social factor	3.62	.824	High
4.	Environmental factor	3.48	.829	High
5.	Overview factor	3.52	.862	High

Opinion levels of quality of life were used as an indicator of four components including 1) body, 2) mind, 3) society and 4) environment based on the data of opinion levels of feelings about the four indicator factors. It was found that opinions of the four components were at a high level with the mean ($\bar{x} = 3.55$). When opinion levels of each component were considered, the majority had a high level of opinions, with only one sub-factor of the physical factor showing satisfaction with the ability to perform the task at an average level. Opinions were at a medium level ($\bar{x} = 3.37$). Similarly, for the main environmental component, there were two sub-components with a moderate mean opinion: 1) having opportunities to rest and relax ($\bar{x} = 3.34$). and 2) environment for physical and mental health ($\bar{x} = 3.39$).

The researcher analyzed relationship between independent variables to study relationship among variables. Correlation analysis was used between the five independent variables. Correlation between all obtained variables was positive and statistically significant at the level of 0.01. Correlation coefficient ranged from 0.28 to 0.62, and none of the pairs had a correlation greater than 0.85, indicating that no independent variables were correlated with each other. Therefore, there is no problem of multicollinearity (Kline, 2005). It was thus possible to test the hypothesis set of this research to study influence of independent variables on dependent variables by analyzing structural equations with a computer program.

Table 3. Analysis of relationship between independent variables

	GOV(X ₁)	CAL(X ₂)	MOT(X ₃)	CON(X ₄)	HEL(X ₅)
GOV (X ₁)	1	.268	.577	.227	.207
CAL(X ₂)		1	.438	.369	.561
MOT(X ₃)			1	.422	.243
CON(X ₄)				1	.225
HEL(X ₅)					1

Table 3 indicates that correlation between all obtained variables was positive and statistically significant at the 0.01 level. Correlation coefficient was between 0.207 and 0.577. None of the pairs had a correlation greater than 0.850, indicating that no independent variables were correlated with each other. It is thus possible to test the hypothesis of this research to study influence of independent variables on dependent variables by analyzing structural equations with computer programs.

Hypothesis testing of factors affecting labor quality in large agricultural wholesale markets in Thailand by analyzing the causal relationship model (structural equation model) based on empirical data

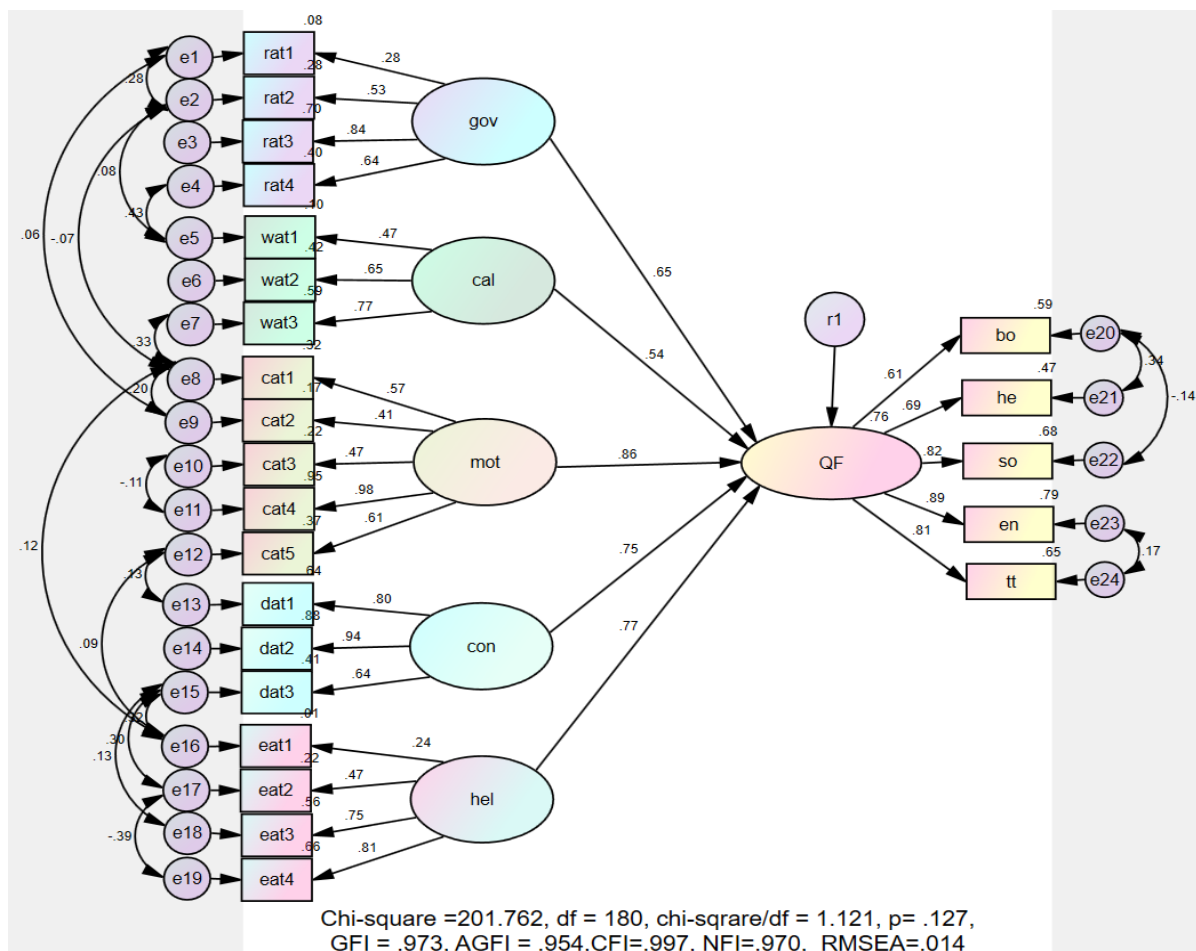


Figure 2. Results of the Structural Model

Conformity values between modified hypothetical structural equation models were more consistent with empirical data as determined by the conformance index $\chi^2 = 201.762$, $df = 180$, $GFI = 0.973$, $AGFI = 0.954$, $CFI = 0.997$, $NFI = 0.970$ and $RMSEA = 0.014$, which passed all criteria for statistical significance (p – value) at 0.014, which was statistically significant, therefore, accepting that the assumption that theoretical models are harmonious with empirical data.

Table 4. Influence of factors affecting quality of life of laborers in the large agricultural wholesale markets in thailand

Influence path	Path coefficient (influence value)
gov → QF	0.65
cal → QF	0.54
mot → QF	0.86
con → QF	0.75
hel → QF	0.77
Total coefficient and statistical significance of 75 (p – value) = 0.01	

The researcher selected the structural equation model (post-adjusted) to display the results of the analysis of the influence of factors directly influencing labor quality of life. The results are presented in Figure 4.3 and Table 4.11. Influence of factors and factor loadings of latent variables on observable variables showed: 1) state-sponsored policy (gov); 2) living culture (cal), 3) motivating factors (mot) 4) supporting factors (con) 5) access to public health services (hel) 0.65, 0.54, 0.86, 0.75 and 0.77 respectively.

From the above information, it can be clearly seen that laborers in large agricultural wholesale markets in Thailand believed that, when considering factors influencing laborers' quality of life in terms of activities related to the five quality-of-life service factors, they could perform at a high level with the coefficient of influence of all five factors being 76% and statistical significance of 0.01.

Table 5. Factor loading of latent variables to observable variables of independent variables (λ_x)

Latent variable	Observable variable	Factor loading value λ_x
1. gov	rat 1	0.28
	rat 2	0.53
	rat 3	0.84
	rat 4	0.64
2.cul	wat 1	0.47
	wat 2	0.65
	wat 3	0.77
3.mot	cat 1	0.57
	cat 2	0.41
	cat 3	0.47
	cat 4	0.98
	cat 5	0.61
4.con	dat1	0.80
	dat 2	0.94
	dat 3	0.64
5. hel	eat 1	0.24
	eat 2	0.47
	eat 3	0.75
	eat 4	0.81

When considering the value of the factor loading of latent variables, it was found that the influence of state-sponsored policies (gov) on laborers' quality of life (QF) had a mean total influence of 0.65. When each case was considered, it was found that supporting factors for knowledge and information had the greatest influence weight of 0.84 ($\lambda_{x13} = 0.84$) and budgets had the least weight of influence 0.28 ($\lambda_{x11} = 0.28$).

Influence of cultural factors of life (cal) on labor quality (QF) had a mean total influence of 0.54. When each case was considered, it was found that living cultural and well-being weighting had the highest weight of influence at 0.77 ($\lambda_{x23} = 0.77$) and belief had the lowest weight of influence 0.47 ($\lambda_{x21} = 0.47$).

Influence of motivating factors (mot) on labor quality of life (QF) had a mean total influence of 0.86. When each case was considered, it was found that compensation had the most influential weight of 0.98 ($\lambda_{x34} = 0.98$) and relationship with colleagues was the least influential 0.41 ($\lambda_{x32} = 0.41$).

Influence of supporting factors (con) on labor quality (QF) had a mean total influence of 0.75. When each case was considered, it was found that recognition had the highest influence weight 0.94 ($\lambda_{x42} = 0.94$) while achievement and progress had the least influence weight 0.64 ($\lambda_{x43} = 0.64$).

Influence of access to public health care services (hel) on labor quality of life (QF) had a mean total influence of 0.77. It was found that service recipient satisfaction had the greatest influence weight of 0.81 ($\lambda_{x54} = 0.81$) and infrastructure had the lowest influence weight 0.24 ($\lambda_{x51} = 0.24$).

Table 6. Factor loading of latent variables to the observable variables of the dependent variables (λ_y)

Latent variable	Observable latent	Factor loading λ_y
QF	Bo	0.61
	He	0.69
	So	0.82
	En	0.89
	Tt	0.81

When quality of life of laborers in large agricultural wholesale markets in Thailand is considered, the first indicator is the body, with factor loading of 0.61 ($\lambda_{y1}=0.61$). The second indicator was the mental aspect with factor loading of 0.69 ($\lambda_{y2}=0.69$). The third indicator was the social aspect with factor loading was 0.82 ($\lambda_{y3}=0.82$). The fourth indicator was the environment with factor loading of 0.89 ($\lambda_{y4}=0.89$). The fifth indicator was the overview with factor loading of 0.81 ($\lambda_{y5}=0.81$). Environmental indicators have the greatest factor loading, and body indicator had the lowest factor loading. This information reiterates that when overall factors were considered, laborers' quality of life was very good with the physical condition indicator that tended to be poor.

Discussion

Government-sponsored policies (gov) had an influence on laborers' quality of life (QF) of 0.65. Knowledge and information had loading factor of 0.84 ($\lambda_{x13} = 0.84$) with the highest influence, followed by one-stop service with factor loading of 0.64 ($\lambda_{x14} = 0.64$). Legal right had factor loading of 0.53 ($\lambda_{x12} = 0.53$). The factor with the least influence is budget with factor loading of 0.28 ($\lambda_{x11} = 0.28$). Knowledge and information had the greatest influence. Importance of recognizing legal rights and information is the first condition of entering Thailand for laborers' adjustment to their new lives. If laborers come into Thailand legally, they are entitled to legal rights, which include receiving government-provided services. The Li et.al. (2016) research found that increasing health care subsidies for citizens, training participation and integrated management were related as important factors. [Aday and Andersen \(1981\)](#), [Hambleton \(1983\)](#), and [Petcharaporn Chatchawanchanakit and Pannarat Arpornpisan \(2015\)](#) found that health service promotion by building knowledge, understanding, and various methods for developing awareness of legal rights and disseminating information were factors that affect workers' access to health services.

Living culture (cal) had an influence on labor quality (QF) of 0.54. Livelihood had factor loading of 0.77 ($\lambda_{x23} = 0.77$) had the most influence, followed by attitude with factor loading of 0.65 ($\lambda_{x22} = 0.65$). The least influential factor was belief with factor loading of 0.47 ($\lambda_{x21} = 0.47$). Livelihood had the highest influence. Importance of laborers' living culture in terms of overall livelihood in Thailand is therefore very important. Likewise, [Aday and Andersen \(1981\)](#), [Wichian Vitayaudom \(2013\)](#) and [Chimmami and Wongboonsin \(2014\)](#) said that culture directly influenced behavior, attitude and effectiveness, which was consistent with belief, way of life and other customs of society without cultural conflicts. [Arpornpisan \(2016\)](#) found that the management of service provided to workers must consider promotion to reduce social and cultural differences that were related to both their livelihood, attitudes and beliefs that could give workers more access to services.

Motivating factor (mot) with an influence on laborers' quality of life (QF) of 0.86, was the factor that influenced the quality of life of workers the most. Compensation and benefits had factor loading of 0.98 ($\lambda_{x34} = 0.98$) with the most influence, followed by stability of work

with factor loading of 0.61 ($\lambda_{x35} = 0.61$). Working environment had factor loading of 0.57 ($\lambda_{x31} = 0.57$). Management and supervision had factor loading of 0.47 ($\lambda_{x33} = 0.47$). The factor with the least influence is relationship with colleagues with factor loading of 0.41 ($\lambda_{x32} = 0.41$). Compensation and benefits had the highest influence, consistent with Maslow (1943), who said that physical needs and security needs were basic needs fundamental to enhancing motivation and morale at work. Likewise, [Chetsada Noknoi and Wannaporn Boripunt \(2014\)](#) found that quality of life of alien workers working in an establishment in Songkhla had adequate and fair compensation, safe working conditions and opportunities to develop their capabilities, collaboration, and relationships with others at a high level.

Supporting factor (con) had an influence on labor quality (QF) of 0.75. Regarding the influence of the supporting factor (con) on labor quality (QF), it was found that recognition had factor loading of 0.94 ($\lambda_{x42} = 0.94$) with the highest influence, followed by work and responsibility having factor loading of 0.80 ($\lambda_{x41} = 0.80$). The factor with the least influence was success and progress having factor loading of 0.64 ($\lambda_{x43} = 0.64$). Recognition had the most influence, which was consistent with real conditions of workers who came to work in Thailand, especially those who have been here for a long time. Once they have a stable job with satisfactory pays, they wanted to be recognized or entrusted by employers as supervisors. They also wanted to receive compliments for their duties and responsibilities that gave them more success, progress and pride. [Maslow \(1943\)](#) said that self-esteem needs were humans' drive for power and self-confidence, strength, and self-efficacy so they become independent.

Access to public health services (hel) had an influence on laborers' quality of life (QF) of 0.77. Regarding the influence of access to public health services (hel) on laborers' quality of life (QF), it was found that the satisfaction of service recipients had factor loading of 0.81 ($\lambda_{x54} = 0.81$) with the highest influence, followed by access to medical care with factor loading of 0.75 ($\lambda_{x53} = 0.75$). Service process had factor loading of 0.47 ($\lambda_{x52} = 0.47$). Infrastructure had factor loading 0.24 ($\lambda_{x51} = 0.24$) with the least influence. In line with the concept of [Millet \(1954\)](#) who studied important values of health care services with an aim to create satisfaction for service recipients. [Aday and Andersen \(1981\)](#) stated that access to real health services had five relevant factors as follows. 1. Public health policies are very important. Most of them focus on access to public health services provided by the state. 2. Features of the health service system, which is a service system that is sufficient in both materials, equipment and personnel widely distributed with a structure that can be accessed. 3. Characteristics of people receiving services 4. Objectives of people receiving health services such as the nature of the illness, the purpose of using the service, time of service, etc. 5. Customer satisfaction is about feelings of people who use health services in various aspects such as convenience of receiving service, service quality, the price to pay, coordination, care of the service providers and information.

Conclusion

Research results showed that the government should focus on budget allocation for better quality of life of workers and for better resource management, which is necessary for appropriate planning and implementation of a guideline to promote workers' quality of life.

Agencies that oversee rights to receive medical care to optimize quality of life should examine and evaluate use of budgets, promote, and formulate appropriate policies and practices for workers. In addition, government agencies should set rules for flexibility and comprehensiveness about the elements of quality of life, such as the Ministry of Public Health, the Ministry of Labor providing services that are consistent with labor mobility and policymaking for further networking.

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