

INCLUSIVE SOCIAL PROTECTION IN ASEAN: LITERATURE REVIEW OF POLICY APPROACHES IN MALAYSIA AND THAILAND

NORDIN, W.^{1*} – ROSMAN, N. F.² – RASHID, R. A.³

¹ *Faculty of Social Sciences and Humanities, Universiti Kebangsaan Malaysia, Selangor Malaysia.*

² *Centre of Languages and Generic Development, University College Sabah Foundation, Sabah, Malaysia.*

³ *Faculty Arts and Creative Media, University College Sabah Foundation, Sabah, Malaysia.*

**Corresponding author
e-mail: P154599[at]siswa.ukm.edu.my*

(Received 30th January 2026; revised 11th April 2026; accepted 24th April 2026)

Abstract. This article conducts a literature-based comparative review of social protection frameworks in Malaysia and Thailand, with a focus on inclusivity for marginalized communities. Guided by Amartya Sen's Capability Approach, the study synthesizes academic publications, policy documents and program evaluations published between 2010 and 2025. Malaysia's centralized universalist model provides broad coverage and fiscal stability but struggles to reach informal workers, indigenous groups and geographically remote populations. Thailand's community-based and participatory model enhances cultural responsiveness and local engagement but faces challenges of fiscal sustainability, fragmented governance and uneven regional implementation. The comparative analysis highlights that neither model alone achieves full inclusivity. Instead, the study proposes a hybrid ASEAN model that combines Malaysia's centralized guarantees and financial coherence with Thailand's participatory mechanisms and cultural adaptability. Such a framework offers a more balanced and sustainable pathway toward inclusive, people-centred social protection systems across ASEAN, particularly in the context of post-pandemic recovery and demographic change.

Keywords: *ASEAN, social protection, inclusivity, marginalized communities, comparative policy*

Introduction

The Association of Southeast Asian Nations envisions itself as a regional community that places people at the center of its development agenda. This vision is grounded in the principles of equity, dignity and inclusive participation. A key component in realizing this aspiration is the establishment of social protection systems that safeguard vulnerable populations from socio-economic risks. These populations include ethnic minorities, indigenous communities and the urban poor who often face structural barriers in accessing welfare services. Although ASEAN has adopted several regional frameworks to promote social inclusion, the implementation of these commitments at the national level remains uneven. Some member states have expanded coverage through broad national programs, while others rely on locally driven initiatives. Both approaches present challenges. National programs may overlook the specific needs of marginalized groups, whereas local schemes often struggle with limited resources and fragmented delivery.

This study focuses on Malaysia and Thailand as two ASEAN countries with contrasting approaches to social protection. Malaysia has developed a centralized

system that offers wide coverage but faces difficulties in reaching rural and indigenous populations. Thailand has implemented community-based programs that encourage local participation but encounter issues related to funding and policy coherence. In response to these dynamics, this study aims to analyze the social protection policy approaches adopted in Malaysia and Thailand, with particular attention to their structural design, implementation mechanisms and levels of inclusivity. It evaluates the effectiveness of existing schemes in extending coverage to vulnerable groups, especially in the context of post-pandemic recovery and demographic shifts. Using Amartya Sen's Capability Approach as a guiding framework, the study identifies the strengths and limitations of universal and targeted models. Ultimately, it proposes a hybrid model of social protection that integrates national policy alignment with community-level engagement, offering a more inclusive and sustainable pathway for ASEAN member states.

Literature review

ASEAN's normative commitments to social protection

ASEAN has formally endorsed social inclusion and protection through declarations such as the ASEAN Declaration on Strengthening Social Protection (2013) and the ASEAN Socio-Cultural Community (ASCC) Blueprint 2025. These documents emphasize universal access, equity and the empowerment of vulnerable groups. However, scholars note that ASEAN's commitments are often aspirational rather than binding, with implementation delegated to national governments. This "soft law" approach reflects ASEAN's principle of non-interference but raises questions about the consistency of member states' policy responses. While regional frameworks promote inclusivity in theory, the lack of enforceable mechanisms limits their practical impact, leaving marginalized groups dependent on the will and capacity of national governments.

Theoretical approaches to social protection and inclusion

The academic literature on social protection identifies two broad paradigms: universalist approaches and targeted or community-based approaches. Universalist models aim to provide equal access to social protection for all citizens, often through centralized schemes. These approaches promote equity but may overlook the specific needs of marginalized groups. In contrast, targeted or community-based approaches emphasize responsiveness to local contexts, allowing policies to be tailored to cultural and socio-economic realities. However, such models often face issues of scalability, uneven resource allocation and policy fragmentation. From a governance perspective, inclusivity involves not only coverage but also meaningful participation, cultural recognition and empowerment of marginalized communities. The capability approach, advanced by Amartya Sen, further enriches this debate by framing social protection as a means of expanding individuals' substantive freedoms and capabilities. This highlights the importance of designing policies that go beyond risk mitigation to actively promote human dignity and social participation.

Marginalized communities and social protection in Southeast Asia

Marginalized groups in Southeast Asia, including ethnic minorities, indigenous populations and urban poor communities, face structural barriers to accessing social protection. Studies highlight issues such as geographical remoteness, language barriers and discrimination, which hinder effective participation in national programs. In Malaysia, indigenous groups in rural areas often experience exclusion from centralized schemes due to logistical challenges and lack of culturally tailored services. In Thailand, while local participation is stronger, regional disparities in funding and administrative capacity undermine consistent access. These dynamics reveal that inclusivity requires not only policy coverage but also institutional mechanisms that respond to socio-cultural diversity.

Comparative public policy in ASEAN

Comparative studies within ASEAN remain limited but are increasingly important in identifying transferable lessons across diverse contexts. Cross-country analyses of social protection reveal both shared challenges such as fiscal sustainability and informality of labor markets and divergent strategies shaped by political, economic and cultural factors. For example, while Malaysia prioritizes centralized efficiency and universal coverage, Thailand emphasizes local participation and community empowerment. This divergence underscores the need for hybrid models that combine the strengths of both approaches. Comparative policy scholarship argues that regional frameworks like ASEAN must balance respect for national sovereignty with the promotion of common standards for inclusivity, thereby fostering learning across member states.

Materials and Methods

Research design

This article is grounded in a literature-based review that applies a narrative synthesis approach. Relevant materials were gathered from academic databases such as Scopus, Web of Science, JSTOR and Google Scholar, as well as from policy repositories including ASEAN, ILO, UN and national government reports. The review covered publications produced between 2010 and 2025 in both English and Malay. Studies and reports were included if they addressed social protection policies and their implications for marginalized groups in Malaysia and Thailand, while sources unrelated to policy design or inclusivity were excluded. Extracted information was organized into a comparative matrix and examined thematically across four dimensions: coverage, accessibility, cultural responsiveness and sustainability. Recognized limitations of this review include possible publication bias, language restrictions and methodological variation across the selected studies. To deepen the analysis, the study employs a comparative public policy design, which allows for systematic examination of how different states interpret and implement ASEAN's commitments on social protection. This approach is particularly effective in highlighting similarities, divergences and trade-offs between Malaysia and Thailand. By focusing on inclusivity, the study evaluates not only the breadth of policy coverage but also the degree to which marginalized communities are substantively engaged in policy design and implementation.

Case selection

Malaysia and Thailand were selected as case studies for several reasons. First, their contrasting policy orientations offer valuable grounds for comparison. Malaysia has historically pursued a centralized and universalist model of social protection, with federal-level schemes aimed at broad population coverage. In contrast, Thailand has emphasized community-based, participatory approaches, allowing local actors and grassroots organizations to play a more active role in program delivery and oversight. This divergence reflects not only institutional differences but also distinct governance philosophies, making the two countries ideal for examining the trade-offs between universality and localized inclusivity (ASEAN Secretariat, 2013; Ramesh, 2012). Second, both Malaysia and Thailand hold significant relevance within ASEAN. As founding members, their policy experiences carry weight in shaping regional norms and debates on social protection. Malaysia's emphasis on centralized schemes has been influential in framing ASEAN's discussions around universal coverage, while Thailand's experiments with local participation have informed conversations on the role of community engagement in social governance. Studying these two states therefore provides insights that extend beyond their national contexts, contributing to regional policy learning within ASEAN (Jones, 2012). Third, the diversity of marginalized communities in both countries makes them particularly instructive cases for examining inclusivity. In Malaysia, the indigenous Orang Asli and rural minorities in Sabah and Sarawak often face systemic barriers to accessing centralized schemes, including geographical isolation and lack of culturally tailored services (Mahmud et al., 2022). In Thailand, hill-tribe populations in the northern highlands and the urban poor in Bangkok and other metropolitan areas highlight the challenges of addressing both ethnic-cultural exclusion and socio-economic inequality. By analyzing how each country's policies respond or fail to respond to these diverse realities, this study contributes to a richer understanding of how social protection frameworks can address cultural and socio-economic diversity in Southeast Asia (Li, 2024).

Data sources

To ensure both depth and reliability, this research draws on multiple types of sources. First, policy documents such as ASEAN declarations, national legislation and strategic development plans provide insight into the formal commitments and legal frameworks shaping social protection in the region. For example, the ASEAN Declaration on Strengthening Social Protection (ASEAN Secretariat, 2013) and subsequent ASEAN studies outline policy architecture and cooperative mechanisms. Second, program evaluations, conducted by both governments and independent actors, offer empirical evidence on the performance of social protection initiatives in terms of coverage, adequacy and access. For instance, the Thailand Social Protection Diagnostic Review (Merttens, 2022) provides detailed comparative assessments of program coverage and equity. Third, qualitative interviews with policymakers, civil society actors and community representatives allow for capturing lived experiences and implementation challenges. A Malaysian case study on social protection programs, for example, highlights overlapping benefits, administrative inefficiencies and persistent gaps in reaching vulnerable groups (Abd Samad and Shahid, 2018). Finally, secondary literature, including comparative policy studies, regional reviews and scholarly articles, situates primary findings within broader debates. Reports such as the OECD's A Decade of Social Protection Development in Selected Asian Countries (Sarfati, 2018) provide useful benchmarks for Malaysia and Thailand relative to regional best practices,

while ILO and ASEAN collaborative reports strengthen the regional comparative perspective (ASEAN Secretariat, 2021; Pasadilla, 2011).

Analytical framework

The analysis in this study is guided by an inclusivity framework that evaluates social protection policies across four interrelated dimensions. The first is coverage, which assesses the extent to which marginalized populations are included within the reach of social protection programs. Coverage remains a central benchmark in international and regional assessments of social policy, as gaps often persist for groups engaged in informal labor markets, rural populations and minority communities (ASEAN Secretariat, 2013; Moroz, 2008). The second dimension is accessibility, focusing on the practical ease with which eligible populations can benefit from programs. Accessibility is shaped by geographical distance, bureaucratic hurdles, financial costs and lack of awareness, all of which are critical barriers that disproportionately affect disadvantaged groups. The third dimension, cultural responsiveness, emphasizes the importance of tailoring policy design and implementation to reflect linguistic, cultural and socio-political realities. Scholars of inclusive governance argue that programs which fail to recognize cultural diversity risk alienating the very communities they are meant to serve (Li, 2024). Within Southeast Asia, indigenous populations, ethnic minorities and migrant groups often require services that go beyond standardized models, highlighting the value of policies that respect cultural difference while maintaining national standards. Finally, sustainability and coherence assess whether social protection frameworks are fiscally viable, politically stable and institutionally integrated. This involves not only long-term funding strategies but also policy coherence across government ministries and levels of administration to avoid fragmentation (Sarfati, 2018).

By applying this multidimensional framework to Malaysia and Thailand, the study identifies both strengths and weaknesses in their respective systems. Malaysia demonstrates broad coverage through centralized schemes but struggles with accessibility and cultural tailoring, while Thailand's community-based model strengthens local participation but faces sustainability and coherence challenges. Taken together, these dimensions allow for a systematic evaluation of inclusivity and they highlight opportunities for developing a hybrid ASEAN model of social protection that combines universal guarantees with context-sensitive, participatory delivery mechanisms. Such an approach reflects ASEAN's own stated vision of building a people-centered and socially responsive community (ASEAN Secretariat, 2013).

Results and Discussion

Malaysia: Universalism with limited tailoring

Malaysia has traditionally pursued a centralized, universalist model of social protection, with federal schemes such as the Employees Provident Fund (EPF), the Social Security Organization (SOCSO) and national healthcare aimed at covering majority of the population. This model has succeeded in extending benefits to urban residents and formal sector workers. However, significant limitations remain in addressing marginalized populations. One challenge is the persistence of informal employment. As of 2022, approximately 26.8% of Malaysian workers (about 4.1

million individuals) were employed informally, which restricts their access to contributory schemes such as EPF and SOCSO that are tied to formal employment status (Ghorpade et al., 2024). This leaves a large share of the workforce particularly urban poor and migrant laborers without adequate social protection. Indigenous groups, particularly the Orang Asli in Peninsular Malaysia and rural communities in Sabah and Sarawak, also face disproportionate exclusion. Geographic remoteness, weak infrastructure and administrative barriers often prevent access to healthcare and welfare services. A recent study found that nearly 39% of Orang Asli adults in remote hilly areas did not seek healthcare during acute illness episodes, citing transportation challenges as a key barrier (Ganesan et al., 2024).

Furthermore, health disparities remain stark: Orang Asli children experience stunting rates up to 45%, far higher than the national average (Sim and Hamid, 2010). Disease burden, including soil-transmitted helminths and malnutrition, is also significantly higher in these communities (Sim and Hamid, 2010). In addition to geographic and health disparities, administrative exclusion is a recurring issue. Many Orang Asli households face delays or difficulties in obtaining identity documentation, which is required for accessing welfare entitlements, while legal uncertainty over customary land rights under the Aboriginal Peoples Act 1954 further undermines inclusion (Gilbert, 2017). These barriers illustrate how Malaysia's universalist model, while efficient and administratively uniform, lacks the flexibility to adapt to diverse socio-cultural and geographic contexts. Overall, Malaysia's centralized system provides broad coverage, but its rigidity often results in the systematic exclusion of marginalized groups. This highlights the need for more context-sensitive and participatory approaches that can bridge the gap between national universality and local realities.

Thailand: Community-based engagement with structural challenges

Thailand's social protection system exhibits a relatively strong emphasis on community participation and localized delivery mechanisms, which enhances its responsiveness to marginalized populations. The Universal Coverage Scheme (UCS) for healthcare, for example, provides almost all citizens with access to essential health services, including the poor and informal sector workers, while civil society organizations and grassroots networks are often active in bridging implementation gaps such as through community health volunteers and local welfare committees that tailor services to local needs (Paek and Zhang, 2024; Merttens, 2022). These participatory channels have been especially important for hill-tribe communities, migrants and other vulnerable groups who otherwise might be excluded from standardized state schemes due to language or cultural differences (Severoni et al., 2025; Merttens, 2022).

Despite these strengths, the Thai model faces serious structural challenges. Funding constraints significantly hinder the sustainability of programs, particularly in rural and less-developed provinces. The SPDR notes that budget allocations are uneven: more developed regions have better health infrastructure, human resources and administrative capacity, while remote areas lag in all these respects (Merttens, 2022). Regional disparities are also visible in the quality of service, availability of specialists and in waiting times. Additionally, policy inconsistency driven by frequent political changes, decentralization reforms and fragmented institutional oversight weakens long-term stability. The review finds that although many contributory and non-contributory programs exist, coordination across these schemes is weak; different ministries manage different programs with little integration, leading to overlaps or gaps in coverage

(Merttens, 2022). For example, migrant workers, especially undocumented ones, frequently face exclusion from formal health insurance or social welfare due to legal or administrative barriers, even as Thailand has made formal commitments to extend coverage (Severoni et al., 2025; Merttens, 2022). Overall, Thailand's community-based and participatory model demonstrates notable strengths in addressing cultural and socio-economic diversity. However, without improvements in fiscal resource distribution, institutional coherence and policy isomorphism (i.e. ensuring that design and implementation align coherently across regions and administrative levels), many of its inclusive aspirations risk remaining unevenly realized.

Comparative insights

The comparative analysis underscores a persistent tension between universal coverage and meaningful inclusion in ASEAN social protection. Malaysia's centralized, universalist model delivers broad coverage with strong administrative coordination and fiscal predictability, particularly for formal-sector populations, yet it struggles to accommodate groups whose needs deviate from standardized program designs most notably indigenous communities and workers in the informal economy (Ghorpade et al., 2024). Evidence of differential access and outcomes among the Orang Asli illustrates how a uniform architecture can overlook cultural and geographic barriers to uptake and service delivery (Ganesan et al., 2024; Sim and Hamid, 2010). In short, Malaysia's strengths in efficiency and financial stability are offset by weaker cultural responsiveness and uneven reach at the margins. By contrast, Thailand's community-oriented approach anchored by the Universal Coverage Scheme (UCS) and various localized mechanisms enhances local engagement and program responsiveness to diverse needs, including those of hill-tribe communities and other vulnerable groups (Merttens, 2022; Tangcharoensathien et al., 2013). However, this model is constrained by sustainability and coherence challenges: inter-regional disparities in resources and administrative capacity, fragmented governance across multiple schemes and periodic policy volatility that complicates long-term planning (Merttens, 2022; Sarfati, 2018). Thus, while Thailand performs well on participation and adaptation to local contexts, its inclusivity gains are tempered by uneven implementation and vulnerability to political and fiscal fluctuations.

Taken together, the cases suggest that neither model alone fully achieves inclusive social protection. Malaysia's systemic strengths leave culturally distinct and geographically remote groups underserved, whereas Thailand's participatory gains are limited by variability and coordination gaps. The findings therefore point toward a hybrid approach that combines Malaysia's centralized efficiencies (for minimum guarantees, portability and stable financing) with Thailand's localized, participatory mechanisms (for cultural tailoring and last-mile access). Such a framework is consistent with ASEAN's normative commitments to a people-centred community and to strengthening social protection, while pragmatically addressing the governance realities within member states (ASEAN Secretariat, 2013).

Policy challenges at the regional level

The findings reveal a significant gap between ASEAN's regional commitments to social protection and the actual implementation of inclusive national policies. While ASEAN's declarations are normatively important, they remain non-binding, making

their realization dependent on the political will, fiscal capacity and administrative structures of each member state. This leads to unequal levels of inclusivity across the region. In the cases of Malaysia and Thailand, Malaysia's centralized system emphasizes efficiency, while Thailand's decentralized approach focuses on community engagement. However, both systems face challenges in balancing inclusivity with sustainability, highlighting the difficulty of fostering effective social protection at the regional level. A broader regional issue is ASEAN's cooperation model, which encourages shared goals but lacks strong monitoring and enforcement mechanisms. Without formal accountability, marginalized groups remain vulnerable to national policies that prioritize certain populations over others.

Theoretical implications: Rethinking inclusivity

Malaysia and Thailand's experiences highlight that inclusivity is not solely about broad coverage. While Malaysia's extensive social protection systems sometimes overlook the unique needs of minority groups, Thailand's participatory model faces challenges related to limited resources. This underscores the importance of considering inclusivity from a multidimensional perspective, as framed by Sen's Capability Approach (CA), which emphasizes people's freedoms and opportunities rather than only resources or economic growth (Wasito, 2023; Sarkodie et al., 2014). Education plays a pivotal role in expanding life choices and reducing inequalities (Mosiara, 2023; Walker, 2019). Incorporating culturally responsive curricula can enhance participation and relevance (Walker, 2010). Inclusive policies must also empower individuals, ensuring they not only access resources but also have the agency to shape their own futures (Frediani, 2010). Local empowerment initiatives promote civic involvement and social justice, with governance being essential in dismantling systemic barriers and ensuring inclusivity in policy priorities (Viswanath, 2020). Access to healthcare and technology further supports education and well-being (Arambala, 2022; Zhang et al., 2021; Cameron, 2012). Inclusivity is thus more than participation it requires policies that enhance dignity, agency and well-being. By applying Sen's CA, policymakers can empower marginalized communities, as seen in Malaysia and Thailand, which are progressing yet still face significant challenges.

Toward a hybrid ASEAN model

The pursuit of an inclusive social protection model within ASEAN reflects diverse national contexts. A comparison of Malaysia and Thailand suggests that a single approach, whether centralized or community-based, is inadequate. A hybrid model that integrates elements from both systems and tailors them to specific needs is essential to improve access for marginalized groups. Malaysia has invested heavily in health, education and welfare since the 1990s, balancing economic growth with social equity (Rannan-Eliya et al., 2016). Thailand's Universal Healthcare Scheme (UHS) seeks universal coverage, including migrants, but struggles to ensure equal access for marginalized communities (Tejativaddhana et al., 2018). These differences emphasize the need for a hybrid model that integrates the strengths of both systems while addressing local needs. Social determinants of health, such as education and nutrition, can reduce malnutrition and child mortality, thereby improving well-being (Saidu and Danielson, 2024). Expanding social protection to include these areas enhances resilience against future challenges (Guinto et al., 2015). Furthermore, ASEAN's goal of universal

health coverage (UHC) should encompass all citizens, aligning with inclusivity objectives across the region. Labor migration also requires policy attention. Thailand, a host country for many migrants, needs to extend adequate social protection to this vulnerable group (Guinto et al., 2015). Quantitative analysis of social protection gaps can help ASEAN establish frameworks that ensure inclusivity and foster social cohesion (Samad et al., 2024). Inclusive policies must address financial inequities, particularly for women, children and minorities. Financial literacy and access to opportunities can empower marginalized groups to access social protection services (Kyeyune and Ntayi, 2025). Moreover, technology and innovation are increasingly important in advancing social protection. Digital platforms provide opportunities but also challenges for equitable access. Regulations are necessary to protect vulnerable populations while fostering inclusive growth (Abd Rashid et al., 2025; Sefrina, 2024).

Policy recommendations: Toward an inclusive ASEAN social protection model

To create a more inclusive model, ASEAN must prioritize regional standards that reflect local contexts and internationally recognized norms. Malaysia and Thailand face similar challenges, such as aging populations and rising healthcare costs, with evidence showing that hypertension prevalence in Southeast Asia is expected to rise significantly (Irwan et al., 2022). Comprehensive health policies are therefore critical. Top-down policy alignment is essential for the success of regional frameworks. Governments must demonstrate political will to align with the ASEAN Socio-Cultural Community Blueprint 2025. Variations in urbanization and economic conditions among member states make effective governance more necessary. Regional standards should evolve into binding commitments, as shown by proactive housing policies that generated significant social benefits (Mahazril et al., 2022). Knowledge sharing and resource pooling across ASEAN will further strengthen social welfare systems. Harmonizing social policies can also improve financing mechanisms. Evidence suggests that environmental strategies, including green economics, can finance social welfare programs (Saydaliev and Chin, 2022). Additionally, technology can enhance social protection delivery. The governance of AI offers opportunities to improve service accessibility while minimizing disparities (Marwala and Mpedi, 2024).

Enhancing bottom-up participation

Bottom-up participation through community consultations, civil society partnerships and local innovations is crucial for both Malaysia and Thailand. Participatory governance, such as Malaysia's Local Agenda 21 (LA21), has proven valuable for sustainable development (Kaur and Hitam, 2012). Technology can facilitate civic participation, but e-participation platforms require further innovation to effectively capture citizen feedback (Lim and Yigitcanlar, 2022). Gender inclusivity in development planning is vital, as women's participation improves development outcomes (Alami, 2018). Civic trust built through transparency and inclusivity ensures equitable representation in policymaking.

Building inclusive monitoring and evaluation mechanisms

Inclusive monitoring and evaluation mechanisms are essential for assessing policy effectiveness. Gender-disaggregated and demographic-disaggregated data are vital for identifying inclusivity barriers (Archer et al., 2023). Regional peer reviews can support

inclusivity by sharing best practices and standardizing metrics (Moh'd Khamis et al., 2021). Technology enhances data disaggregation, enabling policymakers to design better responses (AlKhamis and Dweiri, 2022).

Summary of the proposed model

The proposed framework highlights a multidimensional strategy that combines universal coverage, participatory governance, cultural sensitivity, sustainability and policy coherence. By integrating the strengths of Malaysia’s centralized model and Thailand’s community-based system, it promotes inclusivity, financial sustainability and broad protection. Through regional collaboration, ASEAN can strengthen social cohesion, enhance population well-being and advance equity. This conceptual diagram illustrates the structural challenges within ASEAN’s social protection systems and introduces a hybrid approach that emphasizes policy harmonization, citizen participation, technological integration and inclusive monitoring as solutions to address persistent gaps in fairness and long-term resilience (*Figure 1*).

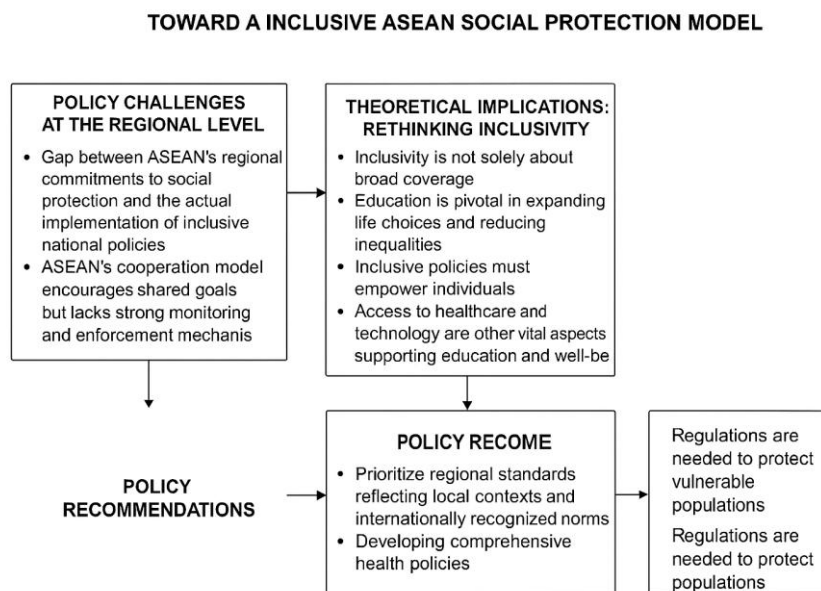


Figure 1. Toward an ASEAN hybrid social protection model.

Conclusion

This study has demonstrated that inclusive social protection in ASEAN cannot be achieved through a single policy orientation. Malaysia’s centralized and universalist model has the advantage of fiscal stability and broad administrative coverage, yet it often fails to reach those who are most vulnerable, including indigenous peoples, informal workers and communities in remote areas. Thailand’s community-based and participatory approach, on the other hand, has proven more responsive to cultural diversity and local needs, but it faces persistent challenges of fragmented governance, uneven resource allocation and limited long-term sustainability. The comparison between these two cases highlights the structural trade-offs between universality and contextual sensitivity that are central to the design of social protection systems in Southeast Asia. The findings suggest that a hybrid model which combines the strengths

of both approaches offers the most promising pathway forward. National-level guarantees can provide a stable foundation of rights and minimum standards, while community-level participation can ensure that delivery mechanisms are culturally appropriate, accessible and responsive to local realities. Such a model would not only align with ASEAN's stated vision of building a people-centred and socially responsive community but also provide a practical framework for addressing the complex needs of marginalized groups across diverse national contexts.

Acknowledgement

I sincerely appreciate the anonymous reviewers for their valuable suggestions, which greatly contributed to improving the quality of this research paper.

Conflict of interest

The authors confirm that there is no conflict of interest involve with any parties in this research study.

REFERENCES

- [1] Abd Rashid, A., Hanif, A., Mohamad Shukri, N.H., Žugić, D. (2025): Bridging the Digital Divide in ASEAN: Insights from Vietnam, Philippines, Laos, Cambodia, and Indonesia. – *Open Research Europe* 5: 18p.
- [2] Abd Samad, S., Shahid, K.M. (2018): Social Protection Programme in Malaysia. Do We Need Integration? – *International Journal for Studies on Children, Women, Elderly and Disabled* 5: 71-79.
- [3] Alami, A.N. (2018): The implementation of Gender Mainstreaming in ASEAN. – *IKAT: The Indonesian Journal of Southeast Asian Studies* 1(2): 185-207.
- [4] AlKhamis, A., Dweiri, F. (2022): Development of governance indicators for accessible and inclusive urban developments (AIUDS). – *University of Sharjah Journal of Humanities and Social Sciences* 19(1): 1-24.
- [5] Arambala, G.F. (2022): Genetic engineering and social justice: A reflection on Amartya Sen's capability approach. – *Asian Journal of Comparative Politics* 7(4): 1232-1246.
- [6] Archer, D., Sinswat, W., Slater, J., Bannister, T. (2023): Applying a data-driven gender lens to air pollution policies in the ASEAN region. *SEI Report*. – Stockholm Environment Institute 16p.
- [7] ASEAN Secretariat (2021): Study Report on the Portability of Social Security Rights between ASEAN Member States. – Jakarta: ASEAN Secretariat 204p.
- [8] ASEAN Secretariat (2013): ASEAN Socio-Cultural Community Blueprint. – Jakarta: ASEAN Secretariat 4p.
- [9] Cameron, K. (2012): The capability approach: Enabling musical learning. – *British Journal of Music Education* 29(3): 281-292.
- [10] Frediani, A.A. (2010): Sen's Capability Approach as a framework to the practice of development. – *Development in Practice* 20(2): 173-187.
- [11] Ganesan, D., Hussain, S., Sreeramareddy, C.T. (2024): Healthcare seeking behavior for acute illnesses among adult Aborigine communities (Orang Asli) in Cameron Highlands, Malaysia: a house-to-house survey. – *Healthcare in Low-Resource Settings* 12(2): 4p.
- [12] Ghorpade, Y., Abdur Rahman, A.B., Binti Jasmin, A.F., Cheng, N.F.L., Yi, S. (2024); Informal employment in Malaysia: Trends, challenges and opportunities for reform. – World Bank 12p.

- [13] Gilbert, J. (2017): Strategic litigation impacts: Indigenous peoples' land rights. *Strategic Litigation Impacts: Indigenous Peoples' Land Rights*. – Open Society Justice Initiative 104p.
- [14] Guinto, R.L.L.R., Curran, U.Z., Suphanchaimat, R., Pocock, N.S. (2015): Universal health coverage in 'One ASEAN': are migrants included? – *Global Health Action* 8(1): 16p.
- [15] Irwan, A.M., Potempa, K., Abikusno, N., Syahrul, S. (2022): Self-Care Management for Hypertension in Southeast Asia: A Scoping Review. – *Journal of Multidisciplinary Healthcare* 15: 2015-2032.
- [16] Jones, L. (2012): *ASEAN, sovereignty and intervention in Southeast Asia*. – Basingstoke: Palgrave Macmillan 262p.
- [17] Kaur, H., Hitam, M. (2012): Participation in Local Agenda 21-The Malaysian Experience. – *International Conference on Public Policy and Social Science* 19p.
- [18] Moh'd Khamis, F., Isa, M.Y.B., Yusuff, N. (2021): Constructing Indicators For Islamic Financial Inclusion. – *International Journal of Islamic Economics* 3(02): 101-124.
- [19] Kyeyune, G.N., Ntayi, J.M. (2025): Empowering rural communities: the role of financial literacy and management in sustainable development. – *Frontiers in Human Dynamics* 6: 15p.
- [20] Li, K. (2024): Urban Shift: The Impact of Urbanization on Poverty in Thailand and Vietnam. – *Global Majority E-Journal* 15(1): 30-41.
- [21] Lim, S.B., Yigitcanlar, T. (2022): Participatory governance of smart cities: Insights from e-participation of Putrajaya and Petaling Jaya, Malaysia. – *Smart Cities* 5(1): 71-89.
- [22] Mahazril, A., Noor, N.H.M., Chowdhury, S.R. (2022): A review on housing policy and practices in Malaysia in providing access to housing: are they adequate? – *Environment-Behaviour Proceedings Journal* 7(19): 257-262.
- [23] Mahmud, M.H., Baharudin, U.M., Md Isa, Z. (2022): Diseases among Orang Asli community in Malaysia: a systematic review. – *BMC Public Health* 22(1): 8p.
- [24] Marwala, T., Mpedi, L.G. (2024): *Social protection*. – In *Artificial Intelligence and the Law*, Singapore: Springer Nature Singapore 22p.
- [25] Merttens, F. (2022): Thailand: Social protection diagnostic review (SPDR). – *United Nations Joint Programme: Thailand* 224p.
- [26] Moroz, H.E. (2008): *The Role of Social Protection in Building, Protecting, and Deploying Human Capital in the East Asia and Pacific Region*. – World Bank 59p.
- [27] Mosiara, S. (2023): Exploring the Role of Education in Promoting Social Equity in Sub Saharan Countries. – *International Journal of Humanity and Social Sciences* 1(1): 1-15.
- [28] Paek, S.C., Zhang, N.J. (2024): Determinants of the low use of Thailand's Universal Coverage Scheme: a national cross-sectional study. – *Frontiers in Public Health* 12: 11p.
- [29] Pasadilla, G.O. (2011): *Social security and labor migration in ASEAN*. – Asian Development Bank Institute 24p.
- [30] Ramesh, M. (2012): *Social Policy in East Asia*. – In *Routledge Handbook of Asian Regionalism*, Routledge 15p.
- [31] Rannan-Eliya, R.P., Anuranga, C., Manual, A., Sararaks, S., Jailani, A.S., Hamid, A.J., Razif, I.M., Tan, E.H., Darzi, A. (2016): Improving health care coverage, equity, and financial protection through a hybrid system: Malaysia's experience. – *Health Affairs* 35(5): 838-846.
- [32] Saidu, S.F., Danielson, R.A. (2024): Social determinants of health associated with increased prevalence of childhood malnutrition in Africa. – *Frontiers in Nutrition* 11: 8p.
- [33] Samad, S.A., Padil, H.M., Ibrahim, S.S., Zainal, N., Idris, S.H., Mohamad, T. (2024): Cultivating Cohesion: Analyzing the Path to an Integrated Social Protection System. A Content Analysis. – *International Journal of Research and Innovation in Social Science* 8: 703-717.
- [34] Sarfati, H. (2018): *A decade of social protection development in selected Asian countries*. – OECD 82p.

- [35] Sarkodie, A.O., Agyei-Mensah, S., Anarfi, J.K., Bosiakoh, T.A. (2014): Education and employment outcomes in Ghana through the lens of the capability approach. – *African Population Studies* 28(2): 797-815.
- [36] Saydaliev, H.B., Chin, L. (2022): Role of green financing and financial inclusion to develop the cleaner environment for macroeconomic stability: Inter-temporal analysis of ASEAN economies. – *Economic Change and Restructuring* 21p.
- [37] Sefrina, M. (2024): An Inclusive Digital Economy in the ASEAN Region. – *Economic Research Institute for ASEAN and East Asia* 60p.
- [38] Severoni, S., Marotta, C., Borghi, J. (2025): Universal health coverage in the context of migration and displacement: a cosmopolitan perspective. – *The Lancet Public Health* 10(8): e712-e715.
- [39] Sim, O.F., Hamid, T.A. (2010): Social protection in Malaysia-current state and challenges towards practical and sustainable social protection in East Asia: A compassionate community. – *MG Asher, Social Protection in East Asia-Current State and Challenges* 27p.
- [40] Tangcharoensathien, V., Pitayangsarit, S., Patcharanarumol, W., Prakongsai, P., Sumalee, H., Tosanguan, J., Mills, A. (2013): Promoting universal financial protection: how the Thai universal coverage scheme was designed to ensure equity. – *Health Research Policy and Systems* 11(1): 9p.
- [41] Tejavivaddhana, P., Briggs, D., Singhadej, O., Hinoguin, R. (2018): Developing primary health care in Thailand: Innovation in the use of socio-economic determinants, sustainable development goals and the district health strategy. – *Public Administration and Policy* 21(1): 36-49.
- [42] Viswanath, M. (2020): Policymaking with Sen and Ambedkar: The case of the right to education in India. – *Asian Journal of Education and Social Studies* 6(2): 16-27.
- [43] Walker, M. (2019): The achievement of university access: Conversion factors, capabilities and choices. – *Social Inclusion* 7(1): 52-60.
- [44] Walker, M. (2010): Critical capability pedagogies and university education. – *Educational Philosophy and Theory* 42(8): 898-917.
- [45] Wasito, A. (2023): Exploring Amartya Sen's Capability Approach: Insights from Climate Change Adaptation in Indonesia. – *Peradaban Journal of Economic and Business* 2(2): 115-136.
- [46] Zhang, D., Xiao, L., Duan, J., Chang, X., Walsh, K., Sandars, J., Brown, J., Dang, X., Shen, W., Du, J., Cao, Y. (2021): Understanding transfer of learning from an online self-directed learning and clinical decision support resource (BMJ Best Practice) for health professions education: a capability approach perspective. – *MedRxiv* 44(12): 1413-1419.