

DOI: 10.5281/zenodo.11425132

INTERPRETING GOOD HEALTH AND WELL-BEING TALES IN THAILAND FROM THE PERSPECTIVE OF BUSINESS MANAGEMENT FOR SUSTAINABLE CITIES AND COMMUNITIES

Nutcha Phasuk¹, Pensri Bangbon^{2*}, Jakraphan Kittinanrat³,
Jiratchaya Suyathorn⁴, Xu Guang⁵, Xianpeng Wang⁶

¹Lecturer, The Faculty of Management Science, Suan Sunandha Rajabhat University, Bangkok, Thailand,
Email: nutcha.ph@ssru.ac.th

^{2*}Lecturer, Ph.D. Program in Innovation of Business and Politics Administration,
Faculty of Management, Shinawatra University, Thailand. Email: pensri.b@siu.ac.th

³Lecturer, Academy of Art and Philosophy, Shinawatra University

⁴Lecturer & Researcher, Faculty of Management Science, Phranakhon Rajabhat University, Thailand.

⁵Dean, School of Economics and Management, Harbin, China

⁶Lecturer, International Institute of Management and Business, Belarus

Received: 22/07/2025

Accepted: 24/10/2025

Corresponding Author: Pensri Bangbon
(pensri.b@siu.ac.th)

ABSTRACT

This study consisted of 3 research objectives. They were to 1) identify the semiotic signs and cultural symbols presented in Thai health and well-being tales from the perspective of business management for sustainable cities and communities, 2) interpret how these signs construct cultural meanings and reflect collective social values, and 3) analyze the relationship between health narratives and cultural identity within the Thai context exploring how these insights can support SDG-oriented business management. The study employed a qualitative research design, combining textual analysis, good health and well-being tales from the perspective of business management for sustainable development goals. Data sources included traditional folklore, Buddhist moral stories, modern public health communication campaigns, and online narratives related to health and well-being. The interpretation of good health strategy involved analyzing denotative and connotative levels of meaning, while cultural analysis situated these narratives within Thailand's sociocultural and religious frameworks. The findings revealed that Thai health and well-being tales consistently encoded cultural values of harmony, moderation, and community responsibility, reflecting both Buddhist moral principles and modern aspirations for public health. Semiotic analysis showed that symbols such as the lotus, water, and bodily metaphors served as cultural signifiers of purity, renewal, and balance. Moreover, the cultural study perspective highlighted how these tales reinforce Thai identity by integrating traditional values with contemporary health discourses.

KEYWORDS: Good Health, Well-Being Tales, Business management, Sustainable Cities and Communities.

1. INTRODUCTION

Education is widely recognized as a fundamental human right and a central driver of sustainable development. The 2030 Agenda for Sustainable Development explicitly locates quality education at the core of global efforts to reduce inequality, improve health and well-being, and foster economic opportunity: Sustainable Development Goal 4 (SDG 4) instructs states to “ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.” (United Nations, 2015). While international commitment to SDG 4 is broad, translating global targets into measurable national improvements in learning, equity, and lifelong pathways remains challenging in many middle-income countries. Thailand is a salient example: national strategies explicitly reference global development frameworks and have introduced long-range visions – notably the 20-Year National Strategy (2018–2037) and the Thailand 4.0 economic model to modernize the education system, strengthen human capital, and align learning outcomes with labor-market needs. These policy frameworks emphasize quality, skills development, and innovation as central objectives of national development planning. Despite strong policy alignment with international goals, persistent implementation gaps limit measurable progress in learning and inclusion. National reviews including Thailand’s SDG4 midterm review identify a cluster of systemic challenges: the divergence between access and actual learning, marked disparities between urban and rural regions, limited alignment between vocational pathways and industry demand, and weaknesses in teacher development, curriculum delivery, and assessment systems (Thailand National SDG4 Midterm Review, 2024). Such problems indicate that high enrollment rates have not consistently translated into foundational literacy, numeracy, and transferable competencies required for social mobility and productive participation in the economy (United Nations, 2015).

International and comparative assessments corroborate these concerns about learning quality. Thailand’s performance on PISA and other international assessments places the country below many regional peers on core domains, and longitudinal analyses show worrying trends in reading proficiency and uneven gains across subjects and cohorts (PISA, 2018; OECD, PISA 2022 country notes). These assessment results suggest systemic inefficiencies in curriculum delivery and formative assessment practices that fail to identify and remediate learning deficits early. UNESCO’s Global

Education Monitoring (GEM) report similarly emphasizes that access without demonstrable learning gains undermines the transformative promise of education within the SDG framework: universal schooling alone is not sufficient to achieve SDG 4. Equity and inclusion remain pressing concerns. Educational outcomes in Thailand differ substantially by socioeconomic status, geography, and disability. Rural and remote provinces – and disadvantaged urban pockets – frequently face under-resourced schools, teacher shortages, and limited digital connectivity, conditions that were exacerbated by the COVID-19 pandemic when remote learning capacity and support systems proved uneven. National analyses and international reviews consistently report that pandemic-driven disruptions widened pre-existing gaps and exposed weaknesses in emergency learning provision, school-to-home support, and social protection linkages that are essential for inclusive education (UNESCO, 2020).

Governance, monitoring, and financing are central management levers that shape whether policy commitment becomes implementation reality. SDG 4 requires coordinated action across ministries, local authorities, schools, teacher organizations, employers, and civil society, together with robust data systems to track learning, equity, and resource use. In Thailand, overlapping responsibilities, and frequent policy adjustments have sometimes hindered coherent implementation and routine performance management.

Moreover, public spending choices determine which interventions are scalable and sustainable; international guidance highlights that under-investment and inefficient targeting of funds can perpetuate inequalities and limit improvements in learning outcomes. Taken together, these observations frame a clear problem for research and policy practice: Thailand has institutionalized SDG-aligned objectives within national strategies, yet gaps in management, monitoring, and resource allocation impede measurable improvements in quality and equity. This study therefore interrogates how SDG4 management practices policy design, governance arrangements, monitoring systems, and budgetary decisions influence learning outcomes and inclusion in Thailand. By focusing on management mechanisms and their localized application, the research aims to move beyond diagnostic description to generate evidence-based recommendations that can accelerate progress toward the SDG 4 targets in Thailand and offer lessons for comparable middle-income contexts (Thailand National SDG4 Midterm Review, 2024).

1.1. Research Objectives

This study consisted of 3 research objectives. They were to 1) identify the semiotic signs and cultural symbols presented in Thai health and well-being tales from the perspective of business management for sustainable development goals, 2) interpret how these signs construct cultural meanings and reflect collective social values, and 3) analyze the relationship between health narratives and cultural identity within the Thai context exploring how these insights can support SDG-oriented business management.

2. LITERATURE SURVEY

For the Study: "Interpreting Good Health and Well-Being Tales in Thailand from the Perspective of Business Management for Sustainable Development Goals" consisted of 8 topics such as 1) the literature landscape, 2) Semiotic Foundations Relevant to Health and Cultural Narratives, 3) Thai Cultural Narratives, Folklore, and Well-Being Traditions, 4) Narrative Health Communication and Social Values, 5) Business Management Perspectives and Sustainable Development Goal Frameworks, and 6) Synthesis and Identification of the Research Gap.

2.1. Literature Landscape

The study of Thai health and well-being narratives through a semiotic and business management lens, aligned with Sustainable Development Goals (SDGs), intersects several scholarly domains that have evolved significantly over the past three decades. Literature on semiotics, cultural narratives, health communication, Thai cultural identity, business management, and sustainable development frameworks forms the theoretical foundation supporting this research. The convergence of these fields reveals how cultural stories can shape both societal values and business strategies, especially in an era where sustainable development and responsible business models are prioritized globally (Pansuwong et al., 2023; UNDP, 2022; WHO, 2021).

In Thailand, health and well-being tales – rooted in Buddhist moral teachings, traditional Thai medicine, folklore, and local wisdom – serve as a repository of cultural knowledge. These narratives operate as semiotic systems encoded with values related to balance, moderation, compassion, community harmony, and environmental respect (Channuwong et al., 2026; Eoseewong, 2016; Sukjai, 2019). Parallel to cultural studies, contemporary business literature emphasizes sustainable management practices, corporate social

responsibility (CSR), and shared value creation, positioning cultural identity and local values as strategic assets (Khan et al., 2026; Porter & Kramer, 2019; Dangelico & Vocalelli, 2017).

Despite substantial research in these subfields, a coherent theoretical approach that unites semiotics, cultural narratives, business management, and SDG frameworks – specifically in the context of Thai well-being tales – remains underdeveloped. This gap underscores the importance of this research, which seeks to interpret how signs and symbols embedded in Thai health narratives construct cultural meaning, reflect collective values, and offer insights for sustainable business strategies in alignment with the United Nations SDGs.

2.2. Semiotic Foundations Relevant to Health and Cultural Narratives

Semiotics provides a critical analytical framework for interpreting cultural texts, narratives, and symbolic representations. This section synthesizes classical and contemporary semiotic theories foundational to analyzing Thai health and well-being tales such as 1) Saussurean Semiotics: Structure and Cultural Meaning-Making, 2) Peircean Semiotics: Icons, Indexes, and Symbols in Thai Health Narratives, 3) Thai Cultural Narratives, Folklore, and Well-Being Traditions, and 4) Narrative Health Communication and Social Values.

Cultural identity literature emphasizes that narratives function as symbolic containers of collective memory (Kashif et al., 2015; Halbwachs, 1992). In the Thai context, symbolic stories reinforce shared identity through repeated motifs such as kindness, moderation, diligence, and community harmony (Chaichumpa, 2020). These elements are also reflected in modern Thai public health campaigns that incorporate cultural motifs to reinforce health-promoting behaviors. This literature supports the theoretical argument that interpreting Thai well-being tales reveals not only moral frameworks but also shared cultural identity markers that shape societal norms and business practices.

2.3. Thai Cultural Narratives, Folklore, and Well-Being Traditions

Thai narratives serve as repositories of social values, ethical instruction, and community health principles. This section synthesizes literature on Thai cultural symbolism and health-related storytelling.

2.4. Narrative Health Communication and Social Values

Narrative health communication has become an

increasingly important field for understanding how stories influence attitudes, behaviors, and cultural perceptions related to health. Scholars argue that narratives, unlike fact-based messages, engage audiences more deeply through emotional resonance, character identification, and cultural symbolism (Feng & Yong; 2026; Green & Brock, 2000; Hinyard & Kreuter, 2007). This theoretical framework is central to interpreting Thai health and well-being tales, as these narratives function not merely as entertainment but as culturally embedded tools that convey social norms and guide health-related decision-making. Green and Brock (2000) propose that individuals become “transported” into narratives through emotional engagement. This process enhances persuasion and facilitates internalization of health messages, making narratives especially powerful in collectivist cultures.

Channuwong et al. (2022) emphasized the use of the four foundations of mindfulness in terms of mindfulness on body, mindfulness on feeling, mindfulness on the mind, and mindfulness on the truth for improving mental health of Buddhist people in Thailand. The studies were also found that most of participants always practice mindfulness on breathing in and breathing out to develop their mental health. The four foundations of mindfulness were positively associated with mental health development. Contemplation on breathing in and breathing out was highly associated with mental health development. Contemplation on the truth of life had the highest influence on mental health development. Bandura (2004) found that narrative-based public health interventions—such as temple-sponsored campaigns, school storytelling sessions, and government health videos—have successfully promoted hygiene, disease prevention, and healthy lifestyles. This underscores the relevance of analyzing Thai health tales as socially embedded communication mechanisms supporting well-being and SDG 3.

2.5. Business Management Perspectives and Sustainable Development Goal Frameworks

The intersection of cultural narratives, health communication, and business management has gained academic attention in the context of corporate sustainability, branding, and social responsibility. As organizations increasingly align with global development frameworks, cultural values and narratives have become strategic assets in shaping consumer behavior, trust, and long-term engagement (Channuwong et al., 2025; Dangelico & Vocalelli, 2017; UNDP, 2022). Barney’s (1991) Resource-Based

View (RBV) supports this notion by identifying cultural knowledge as a valuable, rare, and difficult-to-imitate resource. Thai well-being narratives, therefore, can offer culturally authentic frameworks for businesses operating in wellness, healthcare, tourism, herbal medicine, and educational sectors.

2.6. Synthesis and Identification of the Research Gap

The synthesis of semiotics, cultural narrative studies, health communication theory, Thai cultural identity, business management, and SDG frameworks reveals several important gaps that your research addresses.

2.7. Conclusion of the Literature Survey

This literature synthesized theoretical, cultural, managerial, and sustainability perspectives to establish a comprehensive foundation for interpreting Thai health and well-being narratives through semiotics and business management lenses aligned with Sustainable Development Goals. The review demonstrates that semiotic theory particularly the work of Saussure, Peirce, and Barthes offers robust analytical tools for identifying and interpreting cultural signs, symbols, and ideological structures embedded within Thai narratives. These narratives, deeply rooted in Buddhist teachings, local wisdom, and traditional medical philosophies, convey values central to Thai cultural identity, such as moderation, compassion, community responsibility, and harmony with nature

. The literature also affirms that narrative health communication plays a critical role in shaping health beliefs, practices, and behaviors, especially in collectivist cultural contexts. Empirical evidence highlights that culturally resonant narratives can effectively promote preventive health behaviors, emotional well-being, and community engagement—key pillars of SDG 3 (Good Health and Well-Being). Thai health tales thus function not only as cultural artifacts but also as pedagogical tools for sustaining social values and encouraging public health awareness. Business management literature provides further insights by emphasizing the strategic value of cultural narratives within branding, corporate sustainability, and shared value creation. Frameworks such as the Triple Bottom Line, Creating Shared Value, and sustainable leadership underscore the importance of integrating cultural meaning into organizational strategies. Yet, despite strong scholarly interest in sustainability and cultural identity, there remains limited research exploring how traditional narratives can inform business

strategies aimed at SDG achievement. The synthesis of these fields reveals several research gaps: (1) the limited application of semiotic analysis to Thai well-being tales; (2) the lack of integration between cultural narratives and sustainable business management; (3) insufficient exploration of cultural symbolism within SDG frameworks; and (4) minimal research linking Thai cultural identity to health-related narratives for business applications. Addressing these gaps, the present study offers an interdisciplinary contribution by interpreting Thai health and well-being tales through semiotic frameworks and examining their implications for SDG-oriented business strategies. Ultimately, the literature establishes the theoretical and empirical foundation necessary for analyzing how signs and symbols in Thai narratives reflect cultural identity, shape collective values, and inform sustainable business practices. By bridging semiotics, cultural studies, health communication, business management, and SDG frameworks, this research advances a novel interdisciplinary perspective and contributes to the growing body of scholarship on cultural sustainability and responsible management.

Based on the literature survey and recommendations from the research specialists. The researchers have proposed the research conceptual framework. This integrated framework (see Figure 1) illustrated the pathways of analysis: tales → semiotic meanings → cultural practices → alignment with SDGs. By structuring the research around this framework, the study was able to move beyond descriptive accounts of stories to a systematic interpretation from the perspective of business management that situated them within Thailand's sustainable development agenda.

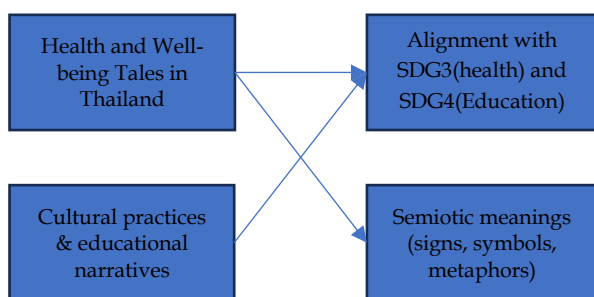


Figure 1: Conceptual Framework.

The conceptual framework ensured that analysis did not treat tales as isolated cultural curiosities, but rather as dynamic sited where local knowledge intersected with global goals. By combining SDGs with semiotic and cultural analysis, the study provided a structured way to assess whether

narratives can be mobilized as resources for education, public health communication, and inclusive development in Thailand. This alignment was critical for designing policy and educational strategies that are both culturally grounded and globally relevant.

3. METHODOLOGY

The present study employed a qualitative, interpretive research methodology designed to analyze how narratives of good health and well-being in Thailand could be understood through the framework of the Sustainable Development Goals (SDGs). Narratives or “tales” about health and well-being whether drawn from oral traditions, community-based stories, or state-led campaigns are rich cultural texts that both reflect and shape people’s understanding of health. This study consisted of 3 research objectives. They were 1) to identify the semiotic signs and cultural symbols presented in Thai health and well-being tales from the perspective of business management for sustainable development goals, 2) to interpret how these signs construct cultural meanings and reflect collective social values, and 3) to analyze the relationship between health narratives and cultural identity within the Thai context. The semiotic approach involved analyzing denotative and connotative levels of meaning, while cultural analysis situates these narratives within Thailand’s sociocultural and religious frameworks. By situating these stories within the SDG framework, particularly SDG 3 (Good Health and Well-Being) and SDG 4 (Quality Education), the study explored how local cultural expressions contribute to or complicate the global development agenda. The interpretive paradigm was well-suited because it prioritized meaning-making and context, seeking to understand how individuals and communities attribute significance to health and well-being within everyday life (Denzin & Lincoln, 2018). A semiotic lens further allowed the researcher to decode symbols, metaphors, and narrative structures embedded in tales, which revealed cultural attitudes toward health, education, and social development. The questionnaires were developed to gather structured information from students, teachers, and community members regarding their familiarity with health and well-being tales, their perceived educational and health impacts, and their understanding of the underlying messages. The questionnaires included both closed-ended and Likert-scale items to facilitate quantification of responses while allowing patterns to emerge across demographic and regional groups.

The data corpus consisted of three main categories:

1. Community tales and oral traditions: Narratives from rural and urban Thai communities collected through interviews, community storytelling sessions, and documented folklore archives.
2. Educational and health campaigns: Government and NGO-produced stories or media (cartoons, posters, online videos) that disseminate messages about healthy living, disease prevention, and well-being.
3. Contemporary lived experiences: Narratives obtained through interviews with educators, health workers, and students, focusing on how they interpret well-being in their everyday contexts.

Purposive sampling was used to identify participants and stories most relevant to health and well-being within a Thai cultural context. Communities across three regions (North, Central, and South Thailand) were included to capture cultural diversity. Approximately 20 community storytellers, 15 educators, and 10 health practitioners were interviewed. In addition, 10 official campaign narratives were collected from Ministry of Public Health and Ministry of Education archives. Data collection involved semi-structured interviews, focus group storytelling sessions, and document/archival analysis. Interviews were guided by open-ended questions designed to elicit participants' interpretations of health and well-being in relation to their lives, families, and communities. Storytelling sessions encouraged community members to narrate tales passed down across generations. Archival materials (campaign booklets, posters, and videos) were reviewed to identify recurring motifs and messages. The collected data were analyzed using thematic analysis (Braun & Clarke, 2019) combined with semiotic analysis (Barthes, 1972). Thematic analysis allowed identification of recurrent themes (e.g., preventive health, balance and harmony, communal well-being), while semiotic analysis examined symbols, signs, and narrative structures to understand how meanings are constructed and communicated.

The questionnaires were pre-tested with a small sample of 15 participants in one region to ensure clarity, appropriateness, and cultural sensitivity. Adjustments were made based on feedback to improve comprehension and relevance. Questionnaires were distributed in both paper-based and online formats, accommodating participants in urban and rural areas with varying access to digital tools.

Semi-structured interviews were employed to obtain in-depth qualitative insights into the interpretation, transmission, and pedagogical use of health and well-being tales. The semi-structured format allows for flexibility in probing participants' experiences, interpretations, and reflections while maintaining alignment with research objectives.

Participants for interviews included:

- Community storytellers – individuals recognized for maintaining and sharing traditional narratives.
- Educators – teachers responsible for incorporating health-related narratives into classroom instruction.
- Health practitioners – public health officers and NGO staff engaged in campaigns using stories or culturally embedded communication strategies.
- Students – selected learners from primary and secondary levels who experience and interpret the tales.

Interview guides were developed based on thematic areas linked to the conceptual framework, including:

4. Participants' recollections of health and well-being stories and their meanings.
5. Observed effects of stories on behavior, knowledge, and social interactions.
6. Connections between the tales and public health or educational goals.
7. Suggestions for improving the use of narratives in education and health promotion.

Interviews were audio-recorded (with consent) and transcribed verbatim for thematic and semiotic analysis. Coding was conducted using NVivo software, allowing systematic identification of motifs, symbols, and narrative structures. Reflexive notes were kept to document contextual observations, researcher insights, and non-verbal cues, adding depth to the interpretation.

3.1. Research Design

The research design of this study was a qualitative, interpretive case study approach that enables an in-depth exploration of how Thai health and well-being tales were constructed, transmitted, and interpreted in relation to the business management for the Sustainable Development Goals (SDGs), particularly SDG 3 (Good Health and Well-Being) and SDG 4 (Quality Education).

This research design ensured rigor and relevance by integrating:

- Cultural sensitivity – recognizing the importance of local narrative traditions.
- SDG alignment – connecting stories to health,

well-being, and educational objectives.

- Multiple data sources – enhancing credibility through triangulation of interviews, storytelling sessions, and documents.

A case study approach provided the flexibility to analyze multiple sources of qualitative data including oral narratives, media campaigns, and educational materials – within a bounded context. Yin (2018) emphasizes that case studies are particularly effective for examining “how” and “why” questions when the focus is on contemporary phenomena within a real-life setting. In this study, the “case” encompasses the communities, schools, and public health initiatives in Thailand where health and well-being tales circulate and influence social practices.

The primary units of analysis were:

8. Community Tales – stories and folklore shared in rural and urban Thai communities, focusing on themes of health, well-being, and communal responsibility.
9. Educational Materials and Media Campaigns – narratives produced by schools, government agencies, and NGOs to communicate health-related knowledge.
10. Individual Interpretations – perceptions and interpretations of these tales by students, teachers, health practitioners, and community members.

The study was conducted in three distinct regions of Thailand – North, Central, and South – selected to reflect cultural diversity and differing levels of access to educational and health resources. Within each region, specific communities, schools, and local health programs were purposively selected based on their engagement with traditional and contemporary narratives of health and well-being. This design ensures that the study incorporates a broad range of perspectives while remaining focused on contexts where tales are actively transmitted and interpreted.

Data collection was conducted over a six-month period, encompassing:

- Interviews with educators, health practitioners, students, and storytellers to capture personal experiences and interpretations.
- Focus group storytelling sessions in community settings to observe narrative transmission and collective meaning-making.
- Documentary and media analysis of government campaigns, educational materials, and published folklore collections to identify thematic patterns and semiotic structures.

In summary, the qualitative, interpretive case study design provides a structured yet flexible approach to understanding the interplay between

Thai health and well-being tales and the Sustainable Development Goals. It allows the research to generate actionable insights for educators, public health practitioners, policymakers, and scholars interested in culturally grounded pathways to sustainable development.

4. FINDINGS AND DISCUSSIONS

4.1. Findings for Research Objective 1

Identifying Semiotic Signs and Cultural Symbols in Thai Health and Well-Being Tales.

The first research objective sought to identify the semiotic signs and cultural symbols embedded in Thai narratives of good health and well-being. The findings reveal a structured symbolic system reflecting Thai cultural worldviews, Buddhist moral teachings, and traditional health practices. Semiotic analysis identified three major categories of signs that appear consistently across tales: Buddhist moral symbols, natural and environmental symbols, and social-relational symbols.

4.2. Buddhist Moral Symbols

4.2.1 The Lotus

- Semiotic function: Symbol of purity, spiritual growth, and mental well-being.
- Evidence: In tales where characters overcome illness through good deeds or mindfulness, the lotus appears as a metaphor for rising above suffering.
- Business implication: Represents moral integrity and ethical branding aligned with SDG 3 (Good Health and Well-being) and SDG 16 (Peace, Justice, Strong Institutions).

4.2.2. Monks and Monastic Rituals

- Semiotic function: Icons of moral discipline, emotional regulation, and community-based care.
- Evidence: Tales often feature monks guiding protagonists toward healthier lifestyles through meditation or moral lessons.
- Business implication: Illustrates Thai values of ethical leadership and mindfulness—central to sustainable management principles.

4.3. Natural and Environmental Symbols

4.3.1. Water

- Semiotic function: Cleansing, renewal, emotional purification, and spiritual balance.
- Evidence: Stories depict rivers and streams as sources of healing and mental clarity, consistent with Thai traditional medicine.

- SDG linkage: Reinforces SDG 6 (Clean Water and Sanitation) and environmental responsibility in business.

4.4. Herbs and Medicinal Plants

- Semiotic function: Icons of natural healing and local wisdom (ภูมิปัญญาท้องถิ่น).
- Evidence: Characters often seek herbal remedies prepared by elders, symbolizing community trust and sustainable resource use.
- Business implication: Supports the eco-wellness and herbal product industries through culturally authentic narratives

4.5. Social and Relational Symbols

4.5.1. The Elder

- Semiotic function: Symbol of wisdom and intergenerational knowledge.
- Evidence: Elders provide advice or remedies in tales, reinforcing the cultural value of respect and communal well-being.
- Business relevance: Supports SDG 3 and SDG 11 (Sustainable Communities) through community-based management.

4.5.2. Family and Community Gatherings

- Semiotic function: Represent collective health norms and social harmony.
- Evidence: Tales emphasize mutual support as key to recovery, highlighting collectivist health beliefs.

4.6. Summary of Objective 1 Findings

Thai health narratives encode complex cultural meanings through semiotic structures that highlight purity, balance, ethical behavior, community support, and environmental harmony. These symbols are essential for understanding culturally aligned health communication and sustainability-driven business strategies.

Findings for Research Objective 2: Interpret how these signs construct cultural meanings and reflect collective social values. The second objective explored how identified symbols construct cultural meaning and reflect collective Thai values. Analysis showed that these signs function not only as storytelling devices but as moral, social, and health communication mechanisms. Three dominant cultural meanings emerged: moderation, collective harmony, and mindfulness-based health consciousness.

Moderation as a Cultural and Health Value Evidence from tales

- Characters who overeat, act greedily, or behave impulsively often suffer illness or misfortune.
- Stories that emphasize the “Middle Way” teach balance in food, lifestyle, and emotions.

Cultural interpretation

The value of moderation stems from Buddhist teachings and traditional Thai medicine, both promoting balanced living as essential for well-being.

Social value reflection

Moderation reinforces norms such as self-control, respect for natural limits, and ethical conduct.

Business management implication

Moderation serves as a foundation for responsible consumption (SDG 12) and sustainable business models encouraging long-term well-being.

Collective Harmony and Social Responsibility

Evidence from tales

- Healing occurs through collective action: community gatherings, caregiving, or temple rituals.
- Characters who neglect community responsibilities are portrayed as unhealthy or morally flawed.

Cultural interpretation

Well-being is understood as a collective achievement, not just an individual condition.

Social value reflection

Emphasis on cooperation, gratitude, caregiving, and community participation.

Business implication

Aligns with CSR, stakeholder collaboration, and shared-value frameworks relevant to SDGs 3, 8, 11, and 17.

Mindfulness and Emotional Well-Being Evidence from tales

- Characters regain clarity and health through meditation or moral reflection.
- Emotional imbalance is depicted as a source of illness.

Summary of Objective 2 Findings

Semiotic symbols in Thai health tales construct a shared cultural framework that values balance, emotional regulation, community harmony, moral behavior, and respect for nature. These meanings provide culturally embedded foundations for SDG-based communication and sustainable business practices.

3. Findings for Research Objective 3: Analyze the Relationship Between Health Narratives and

Cultural Identity exploring how these insights can support SDG-oriented business management for sustainable development goals.

The third objective investigated how Thai health narratives shape cultural identity and how these insights can support SDG-oriented business management. Findings indicate a strong reciprocal relationship between cultural identity and health narratives. These narratives reinforce Thai identity through shared values, moral expectations, and community norms, which directly inform sustainable business practices.

Health Narratives as Carriers of Cultural Identity

Evidence from tales

- Recurring themes: gratitude, sympathy, and harmony.
- Characters embody Thai virtues of humility, respect, and compassion.

Tales portray well-being as interconnected with family, temple, nature, and community

Narratives as Frameworks for SDG-Compatible Business Strategies.

Evidence

- Messages of environmental stewardship support green business practices (SDG 12, SDG 13).
- Themes of community care align with social enterprise models.
- Moral teachings promote ethical leadership and long-term sustainability (SDG 16).

Cultural Health Narratives as Tools for Stakeholder Engagement

Thai communities respond more positively to health messages framed within familiar narrative structures and cultural symbols resulting in improving public health outreach, enhancing consumer loyalty, supporting sustainable tourism and wellness industries, and promoting herbal and natural products through culturally grounded storytelling.

The findings of this study provided important insights into how health and well-being tales in Thailand operate as cultural, educational, and developmental resources, and how they intersect with the Sustainable Development Goals (SDGs), particularly SDG 3 (Good Health and Well-Being) and SDG 4 (Quality Education). By analyzing narratives through qualitative interviews, questionnaires, and semiotic analysis, several key patterns emerged, offering implications for theory, practice, and policy. These findings resonated with Wong et al. (2025), who argued that Thai health and well-being tales encoded deeply held cultural values,

including balance, harmony, moral conduct, and communal responsibility. These narratives operated as semiotic systems, conveying meaning through symbols, metaphors, and narrative structures. For example, recurring motifs such as herbal remedies, family meals, and ritualistic practices not only signify physical health but also social and spiritual well-being. This aligned with Zho Fei's (2025) notion that myths and stories function communicated societal values, reinforcing the idea that health education was not only about knowledge transmission but also about cultural meaning-making. The study highlighted that tales were effective pedagogical tools for fostering holistic learning. Both questionnaire and interview data indicate that students and community members often internalize messages about hygiene, nutrition, mental health, and ethical behavior through narrative forms. Tales provide context-rich examples, support memory retention, and promote reflective thinking, aligning with the goals of SDG 4 to deliver inclusive, equitable, and quality education. However, the research also identified gaps in the integration of narratives into formal curricula. While some educators actively employed storytelling in classrooms, others face challenges in balancing traditional tales with standardized curricula and learning outcomes. Additionally, regional disparities suggested unequal access to culturally relevant educational resources, indicating the need for targeted interventions to ensure equitable learning opportunities across Thailand.

Triangulation of findings from questionnaires, interviews, and archival documents strengthened the validity of results. Patterns observed in quantitative survey responses were corroborated by qualitative interviews, which provided richer contextual insights. For example, while 82% of teachers affirmed that stories promote health literacy, interviews revealed that the effectiveness of narratives depends on pedagogical strategies and cultural interpretation. This cross-validation underscores the importance of combining multiple data sources to understand the multifaceted role of tales in shaping health and well-being knowledge.

In sum, the study identifies three critical insights:

1. Health and well-being tales in Thailand are rich repositories of cultural values and moral lessons that influence community norms.
2. These tales are effective in transmitting health and educational knowledge, contributing to awareness and behavior change aligned with SDG 3 and SDG 4 principles.
3. Gaps remain in formal integration, regional

equity, and alignment with contemporary health knowledge, highlighting the need for culturally sensitive policy and educational interventions to maximize the SDG impact of narratives.

These results provided a foundation for recommendations regarding curriculum design, public health communication, and policy integration, offering pathways to strengthen the contribution of culturally grounded tales to sustainable development goals in Thailand.

5. CONCLUSIONS

This study explored the cultural, educational, and developmental significance of health and well-being tales in Thailand through the lens of the Sustainable Development Goals (SDGs), particularly SDG 3 (Good Health and Well-Being) and SDG 4 (Quality Education). By integrating qualitative interviews, questionnaires, and document analysis, the research demonstrated that these narratives are not merely cultural artifacts but function as dynamic tools for transmitting knowledge, shaping attitudes, and promoting holistic well-being within communities. First, health and well-being tales in Thailand encode deeply rooted cultural values that emphasize balance, harmony, moral conduct, and communal responsibility. These values guide individual behavior and collective practices, reinforcing social cohesion and providing a culturally relevant framework for health and moral education. Semiotic analysis revealed that symbols, metaphors, and narrative structures consistently link physical, mental, and social dimensions of well-being, offering a comprehensive understanding of health that aligns with holistic SDG 3 objectives. Second, the narratives serve as effective educational tools, enhancing knowledge of hygiene, nutrition, preventive health practices, and emotional well-being. The study showed that students, educators, and community members frequently interpret stories in ways that encourage reflective thinking, decision-making, and ethical behavior. This demonstrates the potential of culturally grounded storytelling as a pedagogical strategy to promote both health literacy and values education, thereby advancing SDG 4's aim of inclusive and equitable quality education. Third, the research identified gaps and challenges in the alignment between traditional narratives and SDG objectives. Certain stories perpetuate outdated health beliefs or gender norms, while regional disparities in access to educational materials and campaigns limit the reach and effectiveness of narratives. Additionally, integration of tales into formal curricula and public health initiatives remains

inconsistent, highlighting the need for policy frameworks that support culturally informed yet evidence-based interventions.

In conclusion, interpreting good health and well-being tales in Thailand through the SDG perspective revealed their multifaceted role in promoting knowledge, shaping attitudes, and supporting social and educational development. While challenges remain in standardization, integration, and equity, these narratives represent a powerful resource for advancing sustainable development goals in culturally meaningful ways. By harnessing the pedagogical and communicative potential of tales, Thailand can foster a more holistic, inclusive, and contextually grounded pathway toward achieving SDG 3 and SDG 4, ultimately contributing to improved well-being, social cohesion, and lifelong learning opportunities for all citizens.

5.1. Recommendations

Building upon the findings and theoretical insights of this study, several opportunities for further research emerge. These recommendations address identified research gaps, propose methodological extensions, and highlight interdisciplinary directions that could broaden understanding of cultural narratives, semiotics, and SDG-oriented business strategies in the Thai context.

5.2. *Expand the Corpus of Thai Health and Well-Being Narratives*

This study analyzed a selected set of Thai tales; however, future research should include regional variations of Thai folklore from the North, Northeast, South, and Central regions, analyze contemporary digital narratives shared through social media, online communities, and animation, and explore temple murals, children's books, public health campaigns, and oral storytelling traditions.

5.2. *Conduct Comparative Studies with Other ASEAN Cultures*

Future research should compare Thai health narratives with those from Laos, Cambodia, Myanmar, Vietnam, Malaysia, or Indonesia.

Such comparisons would allow researchers to identify shared regional values, distinguish uniquely Thai symbolic meanings, explore cross-cultural implications for ASEAN sustainable development partnerships (SDG 17), and support regional business strategies in wellness tourism, herbal products, and cultural branding. Comparative semiotic studies would deepen theoretical insight into Asian cultural models of well-being.

REFERENCES

- Avery, G. C., & Bergsteiner, H. (2011). *Sustainable leadership: Honeybee management* Routledge.
- Bandura, A. (2004). Health promotion by social cognitive means. *Health Education & Behavior*, 31(2), 143-164.
- Barney, J. (1991). Firm resources and sustained competitive advantage. *Journal of Management*, 17(1), 99-120.
- Barthes, R. (1972). *Mythologies*. Hill and Wang.
- Berger, J. (2019). *The catalyst: How to change anyone's mind*. Simon & Schuster.
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, 11(4), 589-597.
- Chaichumpa, W. (2020). Cultural memory and identity in Thai communities. *Journal of Thai Cultural Studies*, 9(2), 45-60.
- Channuwong, S., Bangbon, P., Rodloytuk, P., Phanniphong, K., Dabrarodni, D. (2026). Transformational leadership and strategic management affecting sustainable development of Thai Higher Education Institutions. *Social Sciences and Humanities Open* (Preprint). Retrieved from https://papers.ssrn.com/sol3/papers.cfm?abstract_id=5768345
- Channuwong, S., Ruksat, S., & Srivinayaphon, P. (2022). The relationship between the four foundations of mindfulness and mental health development. *Kasetsart Journal of Social Sciences*, 43(1), 166-172. <https://doi.org/10.34044/j.kjss.2022.43.1.23>
- Channuwong, S., Tongvijit, M., Bangbon, P., Siripap, P., Weerachareonchai, P., Rattananda, N., Samapat, P., & Wongwean, B. (2025). The influence of cultural factors on organizational justice of public organizations in Bangkok. *Journal of Neonatal Surgery*, 14(3), 1-9.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). Sage.
- Dangelico, R. M., & Vocalelli, D. (2017). "Green Marketing": A systematic literature review. *Journal of Cleaner Production*, 165, 1263-1279.
- Denzin, N. K., & Lincoln, Y. S. (2018). *The Sage handbook of qualitative research* (5th ed.). Sage Eco, U. (1976). *A theory of semiotics*. Indiana University Press.
- Elkington, J. (1997). *Cannibals with forks: The triple bottom line of 21st century business*. Capstone.
- Eoseewong, N. (2016). *Thai ways of seeing the world*. Matichon Publishing.
- Feng, Z., & Yong, M. (2026). Impact of the digital economy on college graduates' return-to-hometown employment: Evidence from China. *Technology in Society*, 84, March 2026. <https://doi.org/10.1016/j.techsoc.2025.103056>
- Fisher, W. (1984). Narration as a human communication paradigm. *Communication Monographs*, 51(1), 122.
- Floch, J. M. (1990). *Semiotics, marketing and communication*. De Gruyter.
- Geertz, C. (1973). *The interpretation of cultures*. Basic Books.
- Green, M. C., & Brock, T. C. (2000). The role of transportation in narrative persuasion. *Journal of Personality and Social Psychology*, 79(5), 701-721.
- Halbwachs, M. (1992). *On collective memory*. University of Chicago Press.
- Hall, S. (1997). *Representation: Cultural representations and signifying practices*. Sage.
- Hinyard, L., & Kreuter, M. (2007). Narrative communication in health behavior change. *Health Education & Behavior*, 34(5), 777-792.
- Kashif, M., Awang, Z., Walsh, J., & Altaf, U. (2015). I'm loving it but hating US: understanding consumer emotions and perceived service quality of US fast food brands. *British Food Journal*, 117(9), 2344-2360.
- Khan, M., Channuwong, S., Siripap, P., Dhammahansakul, N., Wongwisutthirat, K., Islam M.M. (2026). Integrated management systems influencing sustainable business development of Thai Real Estate Companies. *Perinatal Journal*, 34(1), 280-290. <https://doi.org/10.57239/prn.26.03410031>
- Kittikorn, N. (2020). Cultural metaphors in Thai health communication. *Thai Journal of Communication*, 28(1), 115-131.
- Kreuter, M., et al. (2010). Narratives in public health messages. *American Journal of Public Health*, 100(9), 1824-1830.
- Liu, C. (2019). Cultural narratives and collective values. *Journal of Intercultural Communication*, 50, 77-92.
- Lupton, D. (2017). *The politics of health communication*. Polity Press.
- Pansuwong, W., Photchanachan, S., & Thechatakerng, P. (2023). Social innovation: Relationships with social and human capitals, entrepreneurial competencies and growth of social enterprises in a developing

- country context. *Social Enterprise Journal*, 19(1), 51-79.
- Peirce, C. S. (1958). *Collected papers of Charles Sanders Peirce*. Harvard University Press.
- Porter, M. E., & Kramer, M. (2019). *Creating shared value*. Harvard Business Review.
- Prasert, P. (2019). Environmental symbolism in Thai folklore. *Journal of Southeast Asian Cultures*, 14(4), 201–218.
- Rojanapanich, N. (2021). The Buddhist middle path and health beliefs in Thailand. *Journal of Asian Health Studies*, 7(1), 33–48.
- Saussure, F. de. (2016). *Course in general linguistics* (Updated ed.). Open Court.
- Schmitt, B. (2012). *The consumer psychology of brands*. Oxford University Press.
- Schroeder, J. (2017). Visual semiotics in branding. *Journal of Brand Strategy*, 6(2), 121–135.
- Somchiw, S. (2017). Morality and karma in Thai Jataka tales. *Journal of Buddhist Studies*, 11(2), 89–105.
- Sturken, M., & Cartwright, L. (2018). *Practices of looking: An introduction to visual culture* (3rd ed.). Oxford University Press.
- Sukjai, S. (2019). Symbolic values in Thai folklore. *Asian Folklore Studies*, 78(3), 301–320.
- Suksri, P. (2020). Semiotic meanings of water symbolism in Thai health narratives. *Thai Humanities Review*, 5(1), 21–40.
- Suwanrat, K. (2018). Indexical signs in Thai narrative traditions. *Journal of Cultural Semiotics*, 3(2), 57–72.
- Thailand National SDG4 Midterm Review. (2024). *Thailand National SDG4 Midterm Review (Education 2030)*. Asia-Pacific Education 2030. OECD / PISA. (2018, 2022). *Thailand: PISA country reports and country notes*. World Bank / OECD PISA publications.
- Thompson, J. B. (1990). *Ideology and modern culture: Critical social theory in the era of mass communication*. Stanford University Press.
- Thongmak, M., & Srisakdi, P. (2020). Preserving traditional health narratives in rural Thailand: A cultural perspective. *Journal of Southeast Asian Studies*, 51(2), 225–242.
- UN SDG Knowledge Platform. (2025). Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all. <https://sdgs.un.org/goals/goal4>.
- UNDP. (2022). *Business and the SDGs: Strategies for sustainable development*. United Nations Development Programme.
- UNESCO. (2020). *Global Education Monitoring Report 2020: Inclusion and education*. UNESCO.
- UNESCO. (2020). *Global Education Monitoring Report 2020: Inclusion and education*. UNESCO.
- United Nations. (2015). *Transforming our world: The 2030 Agenda for Sustainable Development*. United Nations.
- Wattanajung, S. (2021). Ideological meanings in Thai moral tales. *Journal of Thai Semiotics*, 12(4), 124–140.
- Wattanapong, T. (2018). Herbal symbolism in Thai traditional medicine. *Journal of Thai Medical Anthropology*, 6(2), 77–95.
- WHO. (2021). *Health promotion and cultural communication strategies*. World Health Organization.
- Wong, C.H., Kumar, S., Ramli, S., Madhavedi, S. (2025). Factors influencing customer behavior in impulse buying of cosmetics on live shopping platforms in Malaysia. *Humanities and Social Sciences Letter*, 13(1), 270-284.
- Yin, R. K. (2018). *Case study research and applications: Design and methods* (6th ed.). Sage.
- Zhou Fei. (2025). The Impact of an Aging Society on Higher Education: A Study in Bangkok and Suburban Areas. *International Journal of Innovative Research and Scientific Studies*. Vol.8, No.6 (2025).