

The Experiences of  
The Department of Mental Health, Thailand  
In helping the survivors from  
The Tsunami Disaster

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Slide 1

Mr.Chairman, Ladies and Gentlemen:

Today I would like to present all of you the experiences of our Department of Mental Health, Thailand in helping the survivors from the Tsunami Disaster.

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In the late morning of December 26<sup>th</sup>, 2004 there was a Tsunami attacked at the 6 provinces in the southern part of Thailand along the Andaman coast, that were: Phuket, Krabi, Trang, Ranong, Phang-nga and Satun.

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Five thousand, three hundred and nine people (5,309) were death,  
Eight thousand, four hundred and fifty seven people (8,457) were injured,  
Three thousand, eight hundred and ten people (3,810) were reported unidentified/missing.

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Three thousand six hundred and eighty nine houses (3,689) were totally and partially damaged.  
27 resorts and hotels were completely destroyed.

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More than hundred thousands (100,000+) people lost their houses, their property and their family members. Some lost their spouse, some lost their parents and many children became the orphans. They were shock, panic, grief, lost of hope and need immediate mental health care.

**How did we help them?**

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Before I tell you about what we did during the Disaster period, I would like to inform you about the Health Care System in Thailand first. So you will understand more clearly.

In Thailand, we have ninety-three (93) Provincial Hospitals (around two hundred to a thousand beds), seven hundred and sixteen (716) Community Hospitals (around ten to one hundred and twenty beds) at district level and more than four thousands (4,000+) Health Centers at sub district level.

We have more than seven hundred thousand Village Health Volunteers at Village level (around 10 households per 1 VHV)

These hospitals, health centers and VHV are under the supervision of the Office of the Permanent Secretariat of the Ministry of Public Health.

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The Department of Mental Health is responsible for seventeen (17) psychiatric hospitals and institutes that provide tertiary care for the psychiatric patients and fifteen (15) mental health centers that provide technical support and mental health promotion and prevention to the general and community hospitals and the health centers all over Thailand.

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This slide shows the percentage of the psychiatric patients in each setting. Seventy-eight (78%) percent are at the primary and secondary care setting, thirteen (13%) percent are at the psychiatric hospitals and nine (9%) percent are in both.

#### Slide 9

Now I think you can understand the overview of the normal health care system and mental health care system in Thailand.

Next, I would like to inform you about what the Department of Mental Health did during the Emergency Phase or at the first and second weeks after the Tsunami Disaster.

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Because of the great disaster Thailand never met before, so it was above the ability of the normal health system to handle. Also many of the health personnel in the 6 provinces were the survivors of the disaster. They couldn't even help themselves.

So the Department had to provide an extra help for them. First, we immediately established The Mental Health Center for Thai Tsunami Disaster (MHCT) at the Department of Mental Health, Ministry of Public Health, Nonthaburi province.

This Center was lead by the Director General of the Department of Mental Health.

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The Responsibilities of the MHCT is to support the front line center in the south.

The responsibilities of the front line center in the south at the Suan Saranrom Psychiatric Hospital in Surat Thani, the nearest province to the affected area, are to survey, assess, screen and providing mental health intervention to the survivors.

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The MHCT team met daily.

#### Slide 13

And did a teleconference between Nonthaburi and Surat Thani everyday in order to exchange the information, to discuss about the problem, the needs, and how to respond to the need of the survivors.

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The MHCT also formulated all the data received from the mobile teams and the front line center for reported to the Ministry of Public Health and for planing and making decision.

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The MHCT was the center to cooperate with other organizations both public and private sectors such as the psychiatrists from the University Hospitals and volunteers from NGOs, and the experts from abroad who were willing to help the Tsunami survivors.

#### Slide 16

The Director General of the Department of Mental Health and the administrators went down south once a week to supervise, follow up and encourage the mental health teams at the disaster area.

#### Slide 17

After the establishment of the MHCT, the Mental Health Mobile Teams were set up. Each team was consisted of 10 professionals from various Psychiatric Hospitals in every part of Thailand. Each team worked for one week long then another team will took turn with 1-2 days overlaps for the old team to have a chance to transfer the information to the new team.

#### Slide 18

This is a van and a driver of a mobile team.

#### Slide 19

This is a various setting of the mobile team.

#### Slide 20

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#### Slide 21

Each mobile team provided physical treatment and mental health services to the survivors.

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We provided medicine to the patients.

#### Slide 23

Our Director General formed a group discussion with the survivors.

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One of our psychiatrist, Dr.Abhisamai, who was Miss Thailand helped promoted the mental health of the children affected by the disaster.

#### Slide 25

Dr. Abhisamai provided necessary mental health information to other helpers such as soldiers and private volunteers.

#### Slide 26

The mental health team members also did a mental health assessment with the survivors. And also collected all the data and sent to the MHCT.

#### Slide 27

After the second week of the Disaster, during the Post Impact Phase, the Department of Mental Health went on its responsibility by doing many activities.

#### Slide 28

With 4 new concepts:

From mental health mobile teams as the providers to being the facilitators

From the attitude towards the people from victims to survivors or companies

From working along the Department functions to work as the people in the affected area needed

From looking at individual level to seeing the family and the whole community.

#### Slide 29

The Department of Mental Health provided psychoeducation to the people by using various media such as the Department web-site.

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TV programs, radio programs and newspaper column both in the affected area and national level.

#### Slide 31

The Department of Mental Health developed a main curriculum and various training courses on mental health disaster due to the experiences learned from the affected area, the need of the survivors and the community involvement.

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Within one month after the Disaster, we had already trained nearly 150 mental health professionals and public health personnel to be the trainers for the local health personnel and the village health volunteers in the 6 affected provinces.

#### Slide 33

Within three months, all the local health personnel and the village health volunteers in the 6 provinces were trained on case finding, surveillance, screening, early intervention and referring.

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The main contents of the training course are:

- ◆ Disaster and normal stress responses
- ◆ The roles and responsibilities of the mental health professional, the public health personnel, the volunteers and others in helping the survivors.
- ◆ Secondary trauma and self care for the helpers
- ◆ Early intervention for the survivors such as psychological first aid, brief assessment, group activities, etc.
- ◆ How to develop the mental health content and to distribute psychoeducation to the public.
- ◆ How to work with the families and communities.
- ◆ Referring System

#### Slide 35

These are materials provided to each trainer. They are a manual on Disaster mental health, a guideline booklet for public health personnel, a pamphlet for the teacher, a pamphlet for the village health volunteer, a pamphlet on psychological first aid, a handy card on self care for the helper, a mental health checklist for the helpers and a mental health checklist for the survivors.

#### Slide 36

The Department itself and also cooperated with other organizations organized a workshop and conference on mental health disaster.

#### Slide 37

In January 7<sup>th</sup>, 2005 the Department held a workshop on Mental Health Disaster at the Department, Nonthaburi with more than 200 participants from public and private organizations.

#### Slide 38

In February 2<sup>nd</sup> - 3<sup>rd</sup>, 2005 The Department cooperated with the Pfizer (Thailand) Limited held the First World Conference on After the Tsunami: Mental Health Challenge to the Community for Today and Tomorrow at the Hyatt Erawan Hotel, Bangkok, with more than 100 participants from the countries affected by the Tsunami and many experts from abroad.

In February 28<sup>th</sup> to March 1<sup>st</sup> The Department cooperated with the UNICEF, Khon Kaen University and the Case Western Reserve University held The Conference on Psychosocial Care and Support for Children in Emergency Situations at the Chaopraya Park Hotel, Bangkok, with more than 200 participants from Thailand and abroad.

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These are the report on the severe and moderate PTSD of adult and children in the displaced area and in the community.

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After 3 months of the Tsunami Disaster, it was the Recovery Phase.

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The Department tried to strengthen the network in the community for continuous and permanent recovery.

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We cooperate with other Departments of the Ministry of Public Health and other concerned Ministry.

We integrated our mental health services to the normal health system.

We support activities initiated by the community.

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The Plan from now to the year 2006 can be separated in to various levels

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From Health Center and Community level, the health personnel and the VHV will try to promote community actions, doing home visit and mental health assessment, providing basic counseling, referring the severe cases to the hospitals and follow up. In the severe cases, they will be sent to the psychiatric hospital.

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At the Community and General Hospitals level, the nurses will do the screening test and provide basic counseling. The Doctor will diagnose the patients. The Doctor together with the nurse will provide treatment, counseling and follow up. In case of severe cases, they will be referred to the psychiatric hospital.

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Moreover, we still provide knowledge and information for public.

We continue to train various groups of people such as teacher, religious leaders and community leaders.

We will follow up the risk group and the psychiatric patients.

We will do a surveillance on PTSD, Depression, Suicide and Drug Abuse.

We will continue our research study.

We will develop the database and report system for evaluation and planing

And we will cooperate with other concerned organization both local and abroad

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We will establish a New Mental Health Recovery Center at the disaster area.

The New Mental Health Center is at Takua Pa District, Phang nga Province.

It is renovated for the operation of the mental health team.

The first floor is an office and a meeting room for staff working and for providing counseling for the clients both face to face counseling and 24 hours telephone counseling.

The second floor will be the accommodation rooms for 20 staff to stay overnight during their visit.

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Thank you for your attention.

And always welcome all of you to our beautiful Andaman Sea.

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