

# CBR. PROJECT EXPANSION: INTEGRATED PARTICIPATION IN COMMUNITY MENTAL HEALTH PROBLEM SOLVING WITH CBR MODEL IN THE UPPER SOUTH OF THAILAND

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Department of Mental health

Suansaranrom Psychiatric Hospital is Located  
in Suratthani province, Southern, Thailand.

**We provide mental health service covering 7 provinces upper  
southern of Thailand.**



1.Chumporn

2.Ranong

3.Suratthani

4.Phang Nga

5.Nakhon Si Thammarat

6.Krabi

7.Phuket



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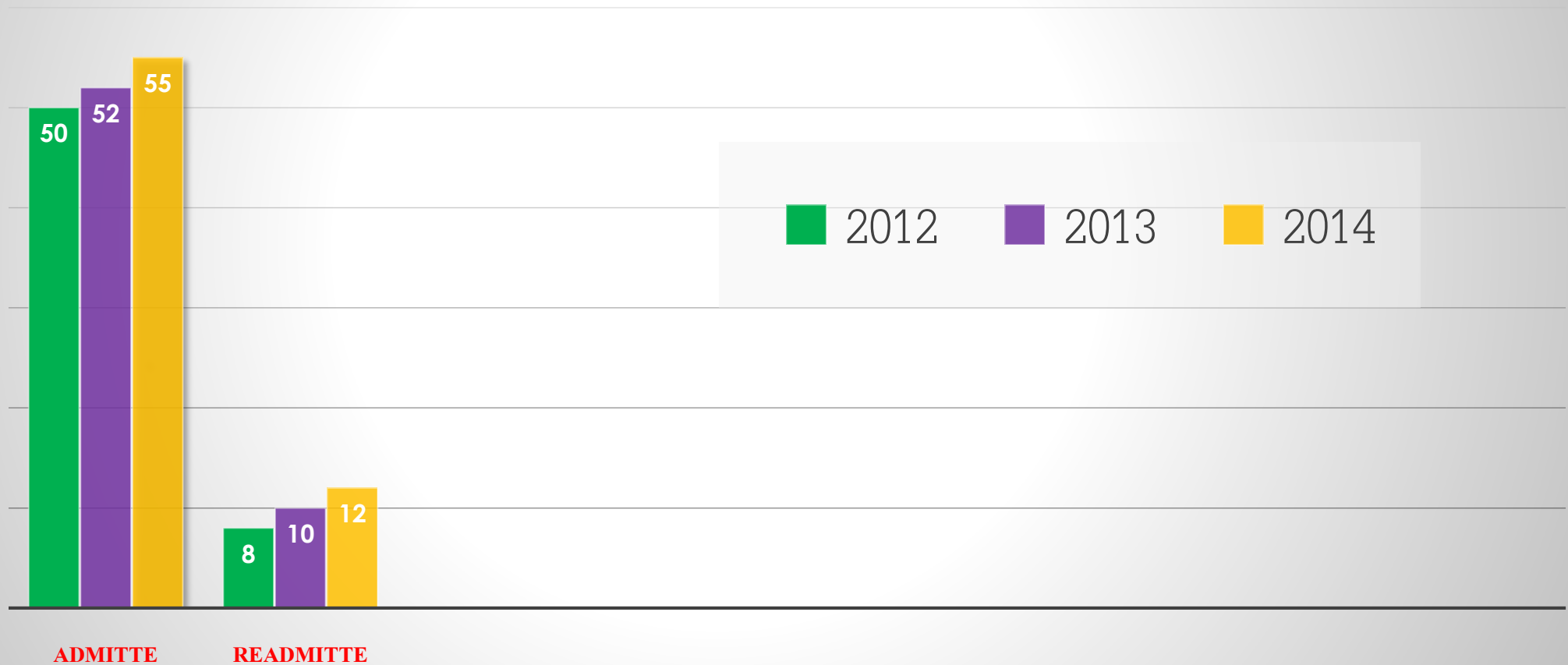




- ▶ many psychiatric patients who lived far from Psychiatric Hospital.
- ▶ Only Hospitalization is not effective to achieve independence, a better quality of life and self actualization.
- ▶ rehabilitation by community and hospital cooperation is importance.
- ▶ Reduced cost.
- ▶ Suansaranrom Psychiatric Hospital focuses on proactive providing community development for rehabilitation.
- ▶ To establish community model for rehabilitation in community.
- ▶ Using Community based Rehabilitation concept (CBR).



Number of psychiatric patients in Klong-Hin community,  
Ao-Luk distric, Krabi province who admitted in Suansaranrom  
Psychiatric Hospital







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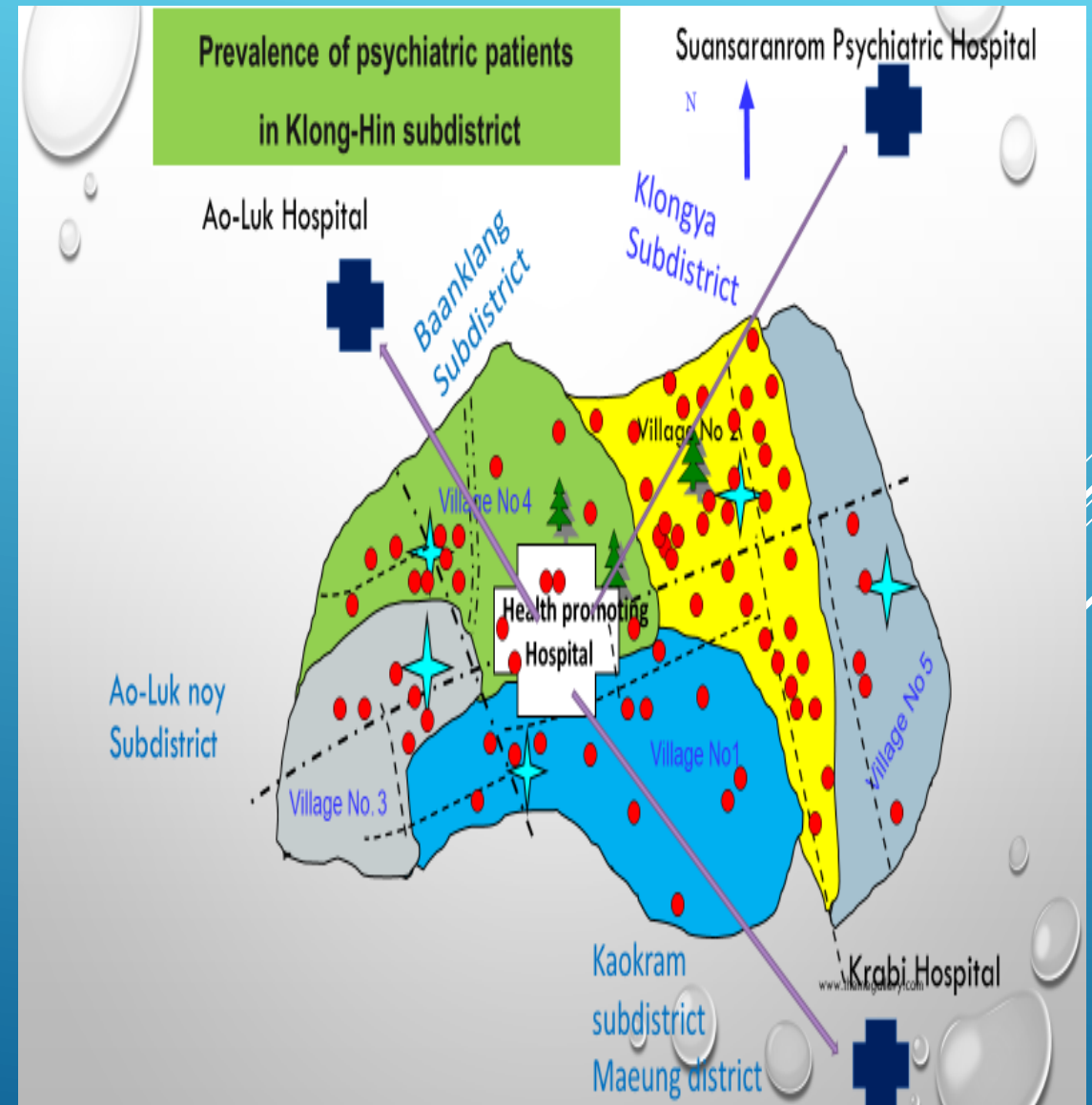
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# Klong-Hin Community trace





- KLONG-HIN SUBDISTRICT OF KRABI PROVINCE, SOUTH OF THAILAND WHERE 76 PSYCHIATRIC PATIENTS WERE FOUND LIVE THERE.
- IT IS HIGHEST IN KRABI PROVINCE





Health Promoting Hospital	Population	Psychiatric patients	Percent
Ao-Luk Noy	6,715	29	0.43
Namjan	7,175	40	0.56
Baanklang	5,833	33	0.57
Nonglumpor Klong-Hin community	7,069	76	1.1
Kaokaw	2,538	9	0.35
Lamsak	5,000	37	0.74
Bang Charoen	2450	12	0.49
Nanhu	3,861	10	0.26
Kao Lom	2,606	15	0.58
Klong Ya	2,512	21	0.84
PCU of Ao-Luk Hospital	11,891	49	0.41

1

2

3



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Suansaranrom Psychiatric Hospital

Ao-Luk Hospital

Baanklang  
Subdistrict

Klongya  
Subdistrict

Village No 2

Village No 4

Health promoting  
Hospital

Ao-Luk noy  
Subdistrict

Village No. 3

Village No1

Village No5

Prevalence of psychiatric patients  
in Klong-Hin subdistrict

Kaokram  
subdistrict  
Maeung district

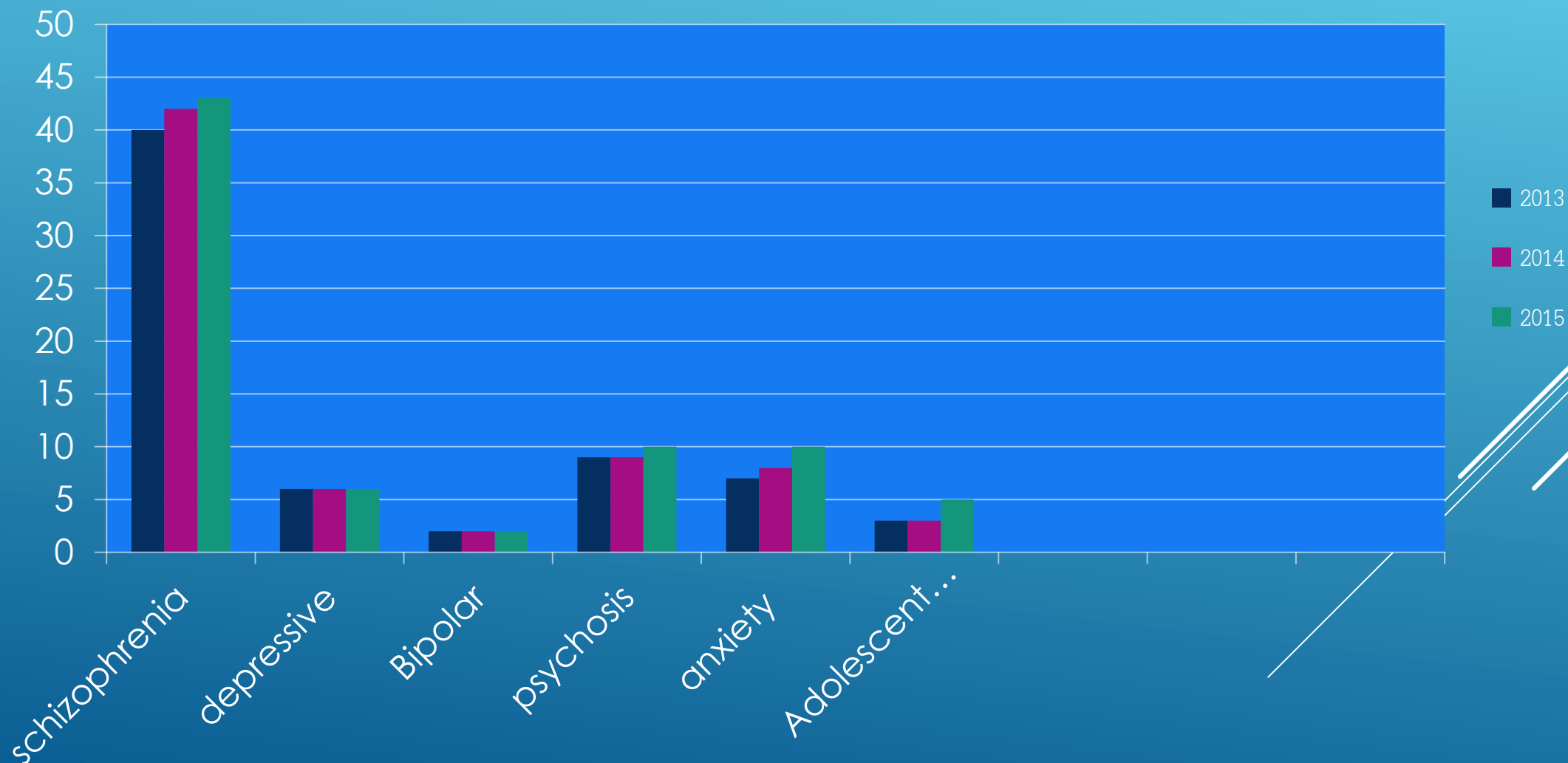
Krabi Hospital





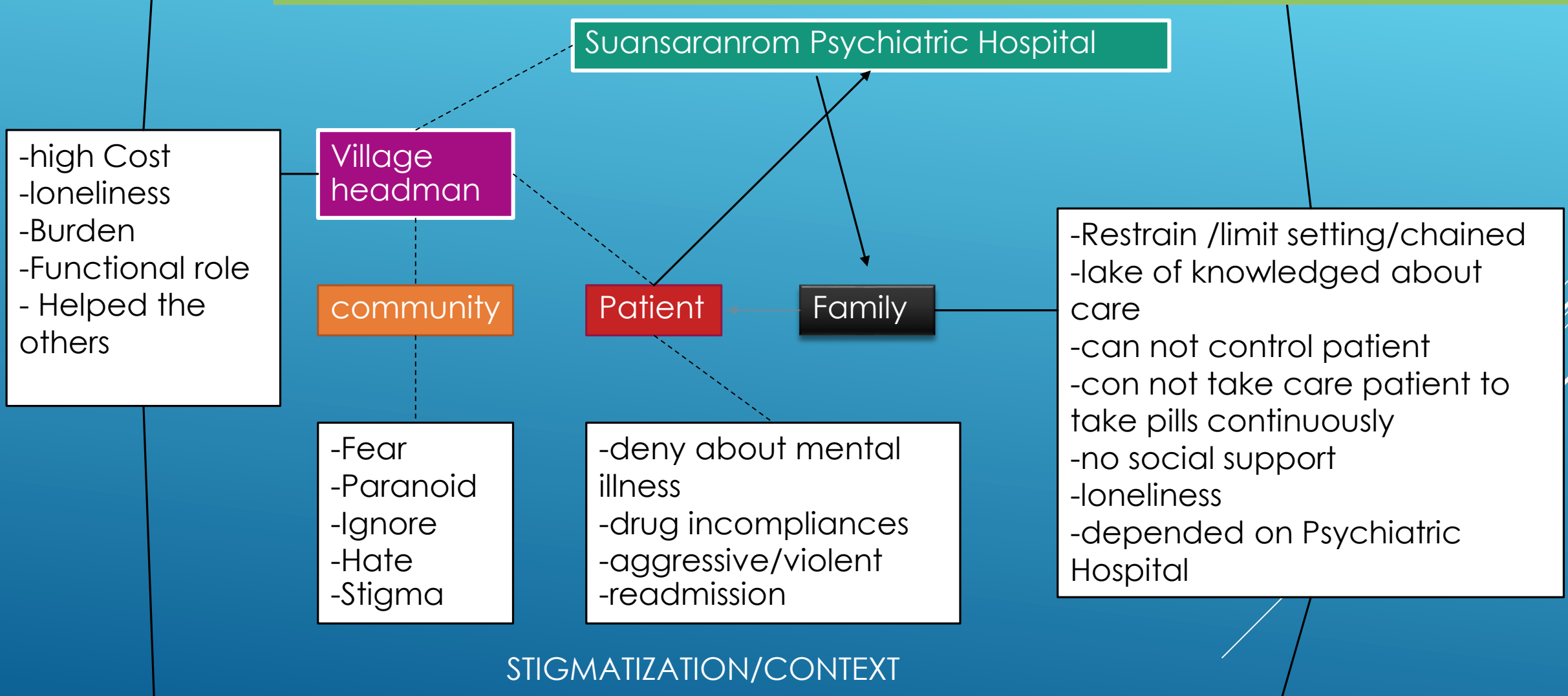


## DIAGNOSES CLASSIFICATION





## Context Klong-Hin analyzed before starting the project



# COMMUNITY BASED REHABILITATION: CBR Klong-Hin

## Problems

After discharge  
-only family care pt.  
-can not manage patient's behavior problem  
- restraint, setting limit  
-non participation  
-not take medicine  
-violent/aggressive  
-community ignore  
-readmission  
-burden for headman

## Strategies

Participation of network

Preparation of recovery system

Establish acute referral system

Empowerment & continuous care

## Process

Root cause /participation

Training occupational

Develop potential of team & refer system

Provision of education

## Output

Planning/Project/ Group

Day care rehabilitation center

Agreement about refer system

Consistency/ continuous

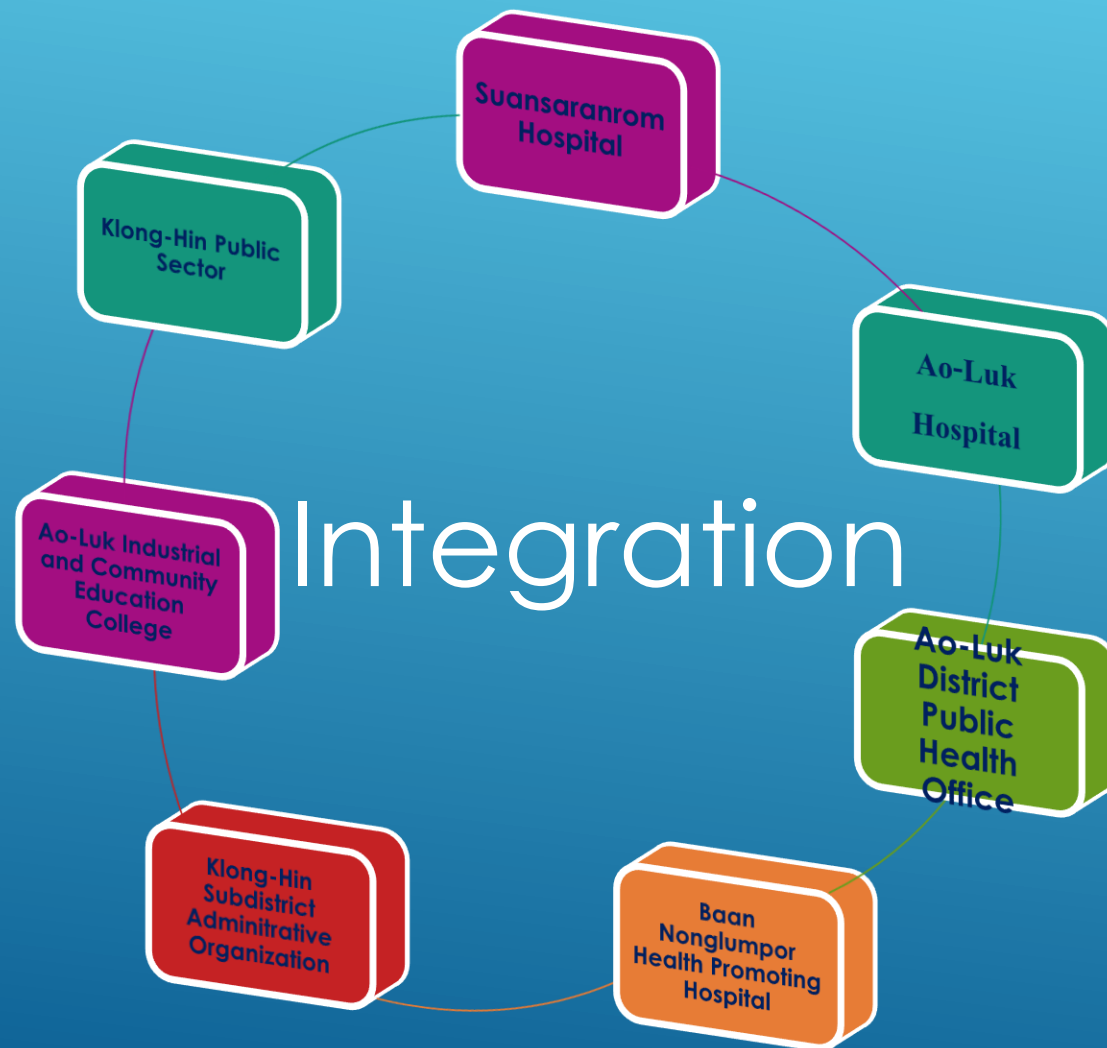
DESTIGMATIZATION/CONTEXT



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# 7 NETWORKS PARTICIPATION



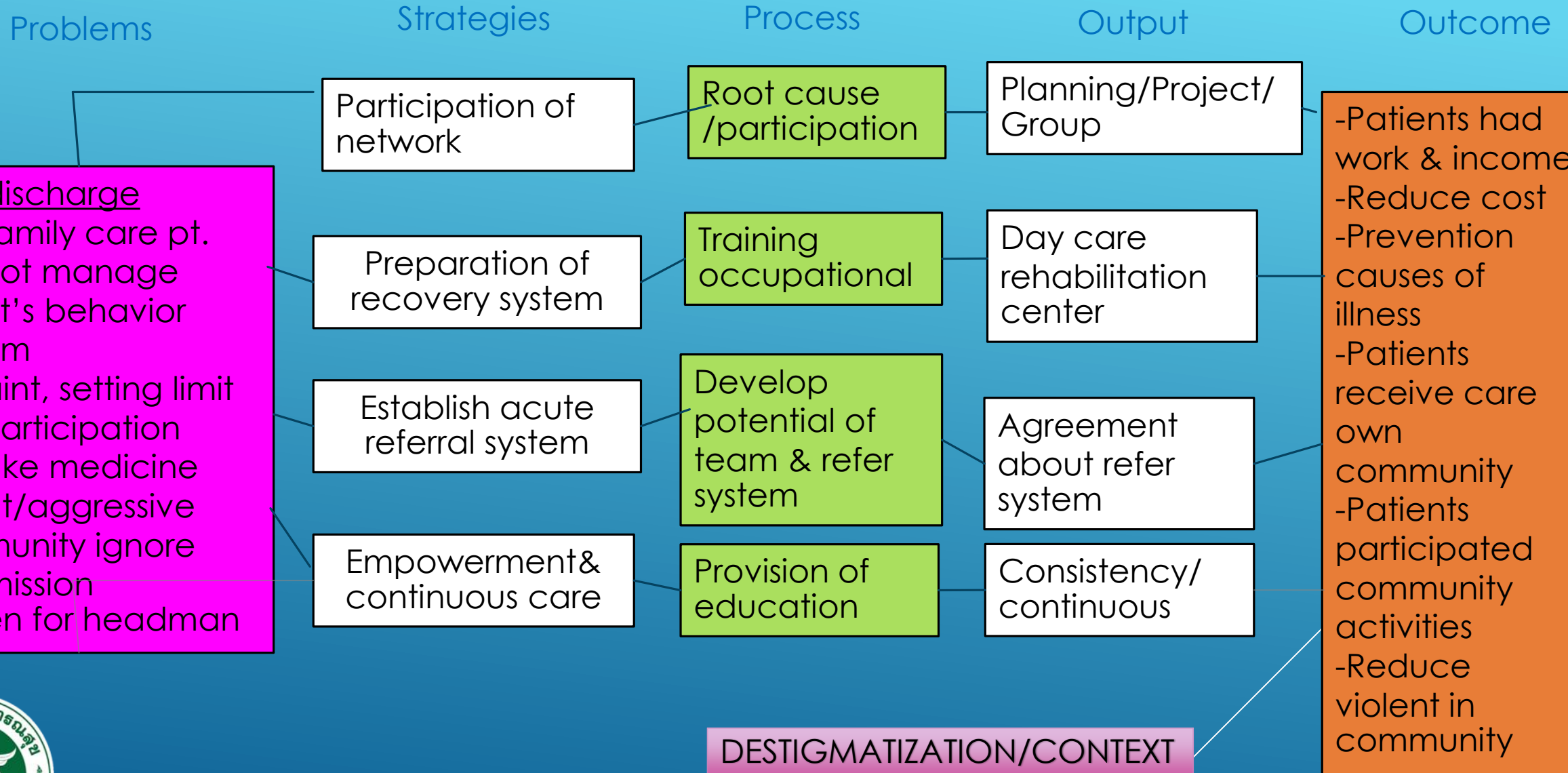




## **4 STRATEGIES THROUGHOUT 1 YEAR**

- 1. Participation of network**
- 2. Preparation of Recovery system**
- 3. Establish acute referral system**
- 4. Empowerment and continuous of care**

# COMMUNITY BASED REHABILITATION: CBR

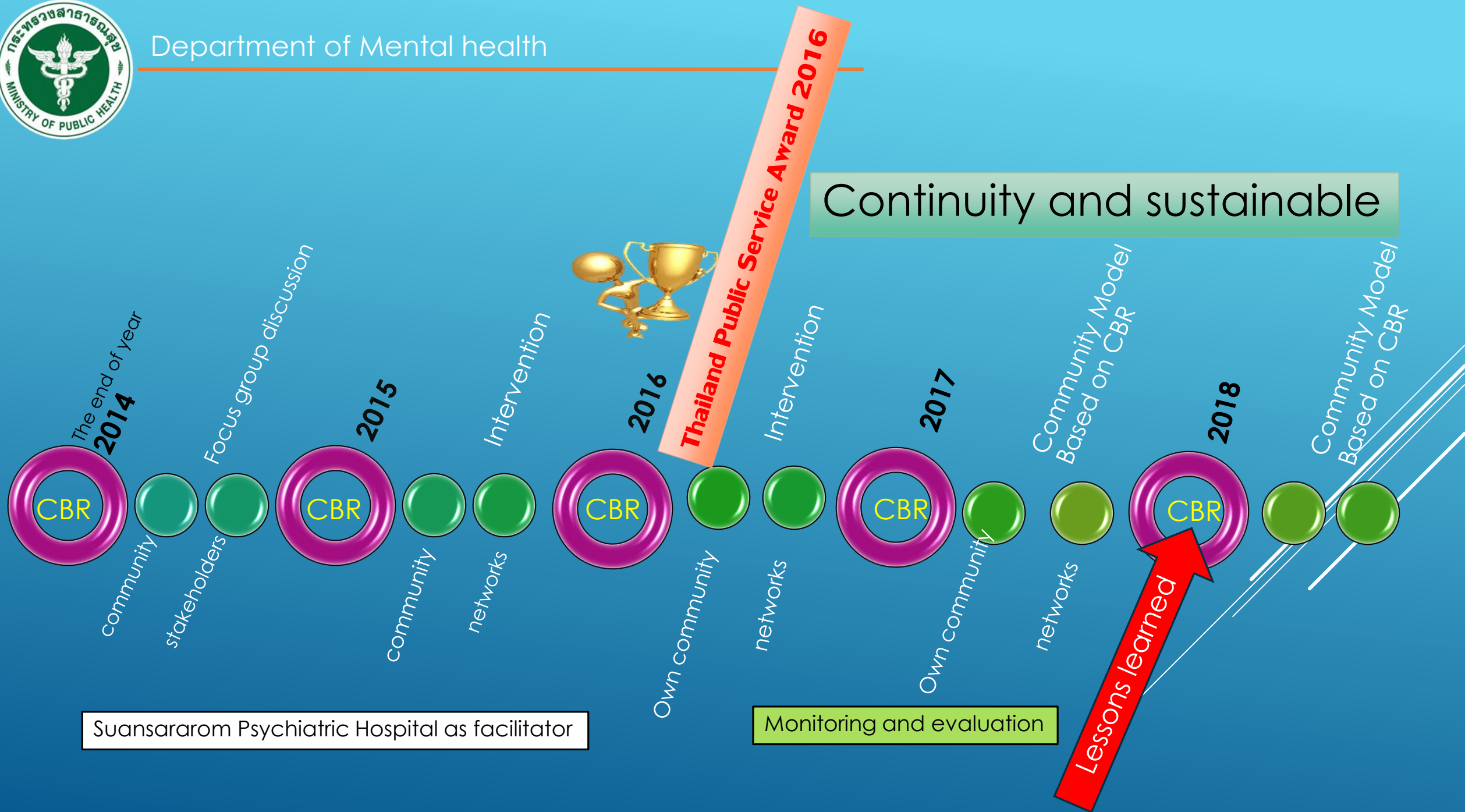


## CBR Klong-Hin Model

Lessons learn	Sustainability	Key factors
1.Building teamwork.	CBR program must be contained in planning of health promoting of Klong-Hin Sub-district Administration Organization.	Community leaders.
2. Community awareness raising should be problem based as much as possible..	Klong-Hin people have volunteer mind.	Awareness of psychiatric patient.
3.Planning consistent with community need.	Families have caring.	Focus on working not money.
4.Rehabilitation activities can be carried out in the person's own community in every steps.	Health care cost management by service network model.	Positive communication and positive attitude towards people with mental illness.
5. Monitoring & Evaluation continuously.	Every community networks are owner.	Rehabilitation activity within the context of local condition continuously.



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- ▶ In 2015, Community-Based Rehabilitation; CBR was started to solve mental health problems in Khlong-Hin community.
- ▶ **Khlong-Hin Model** is success. It can guarantee with Thailand public service award 2016.



# Thailand public service Awards 2016











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# CBR Klong-Hin Model



## Expansion to other communities

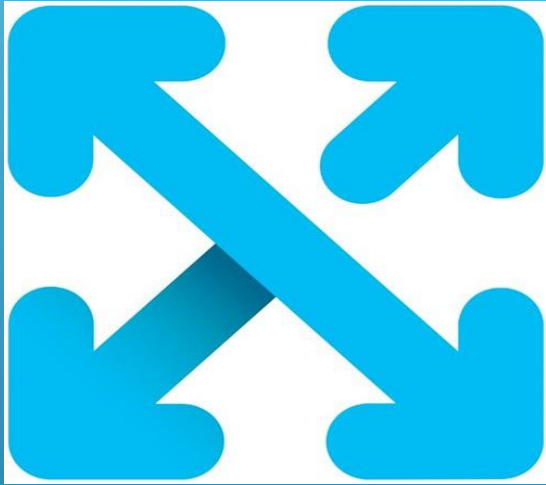
Suratthani

Krabi

NakhonSri  
Thammaraj



# OBJECTIVES



- ▶ To expanded the CBR project and to created participation in mental health problem solving at community level.



## MATERIALS AND METHODS

► 3 communities from 3 provinces where have a large number of psychiatric patients were purposively selected which included:

- 1) Ban Lan Wua, Nakhon Si Thammarat province,
- 2) Ban Thamniap community, Surat Thani province,
- 3) Pakasai, community, Krabi province.



## MATERIALS AND METHODS (CONT.)

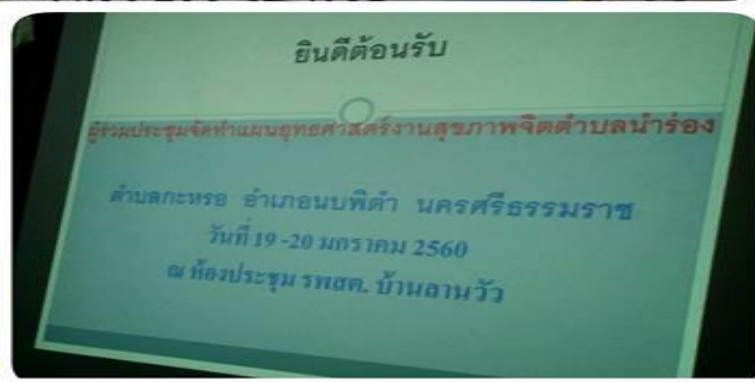
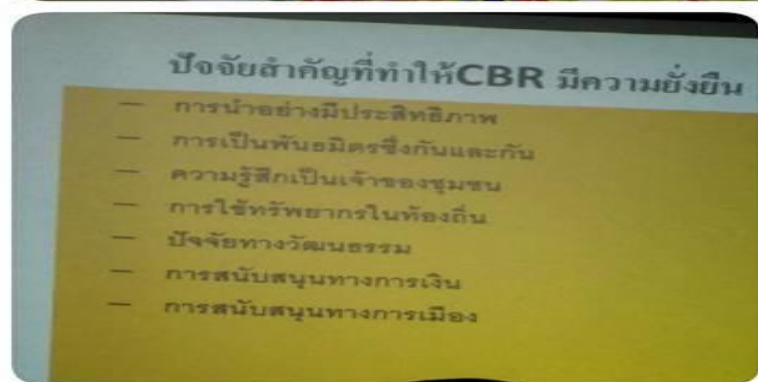
► Using 4 strategies as follows;

- 1) Creating participation,
- 2) producing referral system,
- 3) Preparing recovery system,
- 4) Developing the empowerment and continuous care

► 5-6 months/community/period follow these strategies during 2018-2019



# MODEL CBR Ban Lan Wua, Nakhon Si Thammarat province





# BAN LAN WUA, NAKHON SI THAMMARAT PROVINCE





# BAN LAN WUA, NAKHON SI THAMMARAT PROVINCE



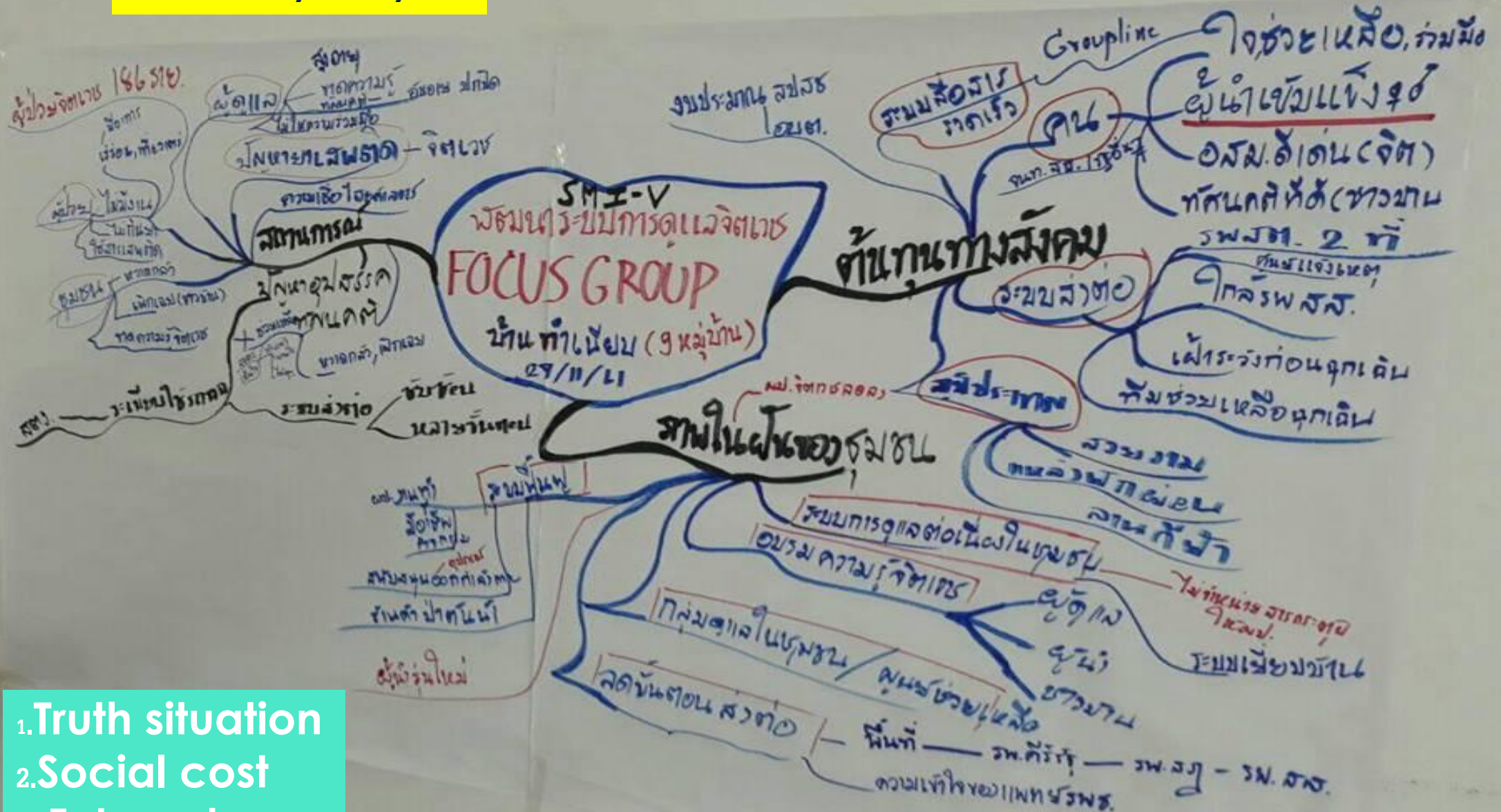


# BAN THAMNIAP COMMUNITY, SURAT THANI PROVINCE



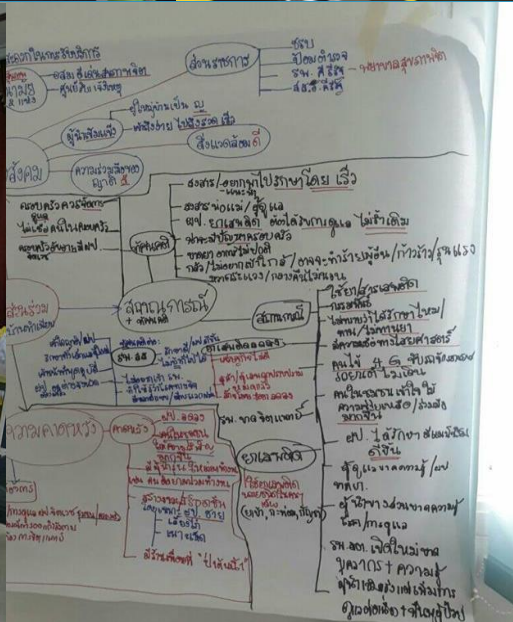


## Community analyzed



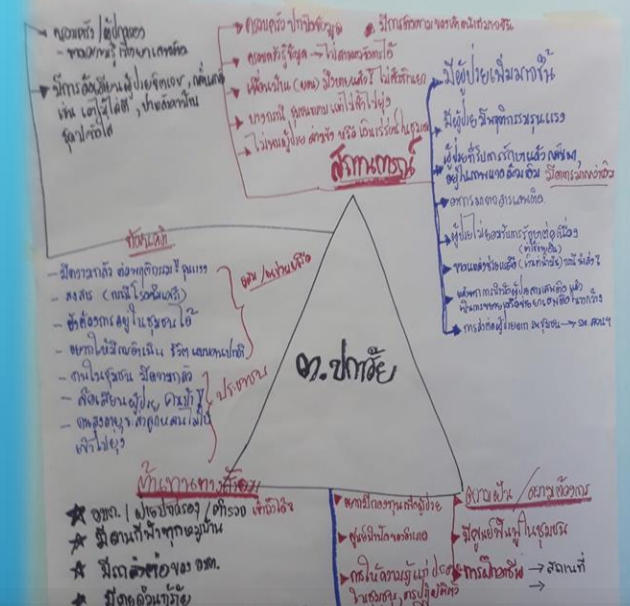
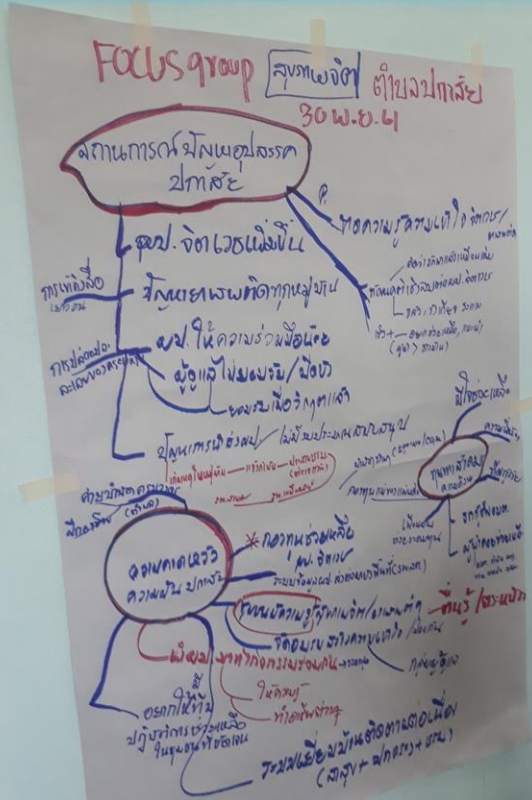
1. Truth situation
2. Social cost
3. Future dream







# Pakasai, community, Krabi province



# Community analyzed by leaderS



# Pakasai, community, Krabi province

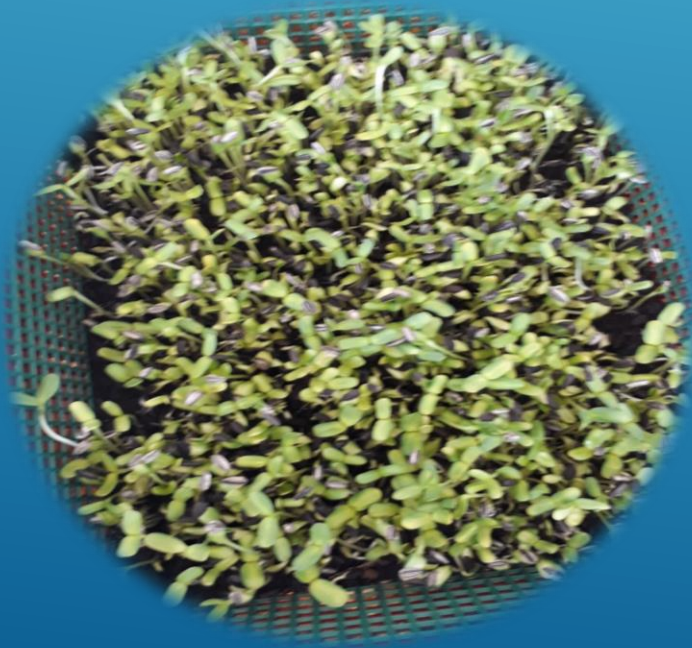




# RECOVERY









# HOME VISIT



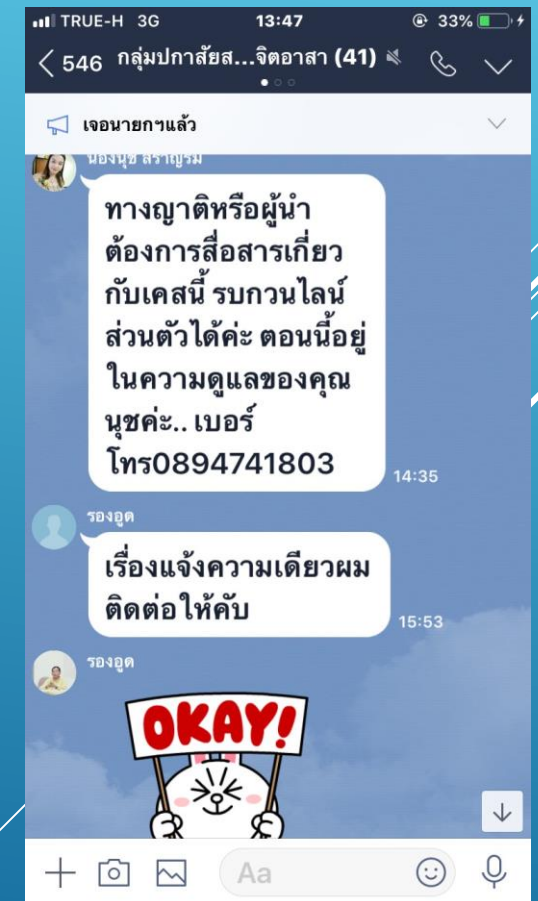
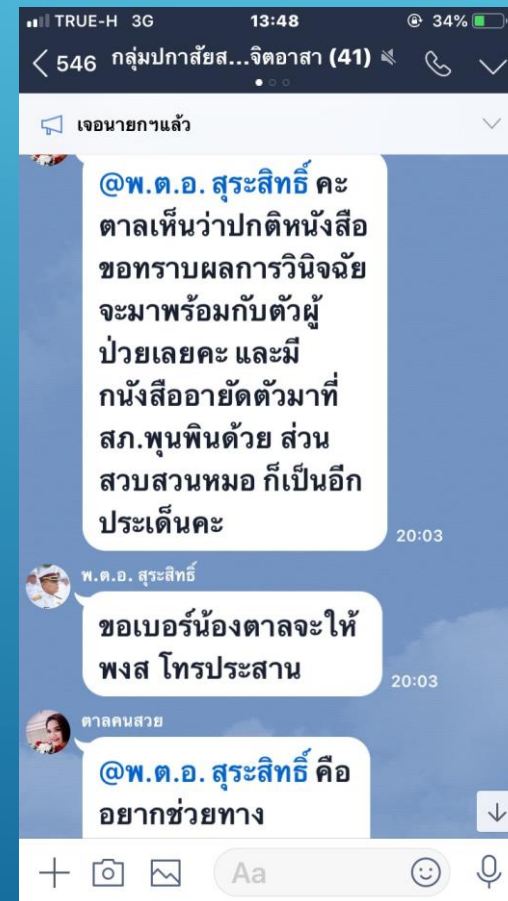
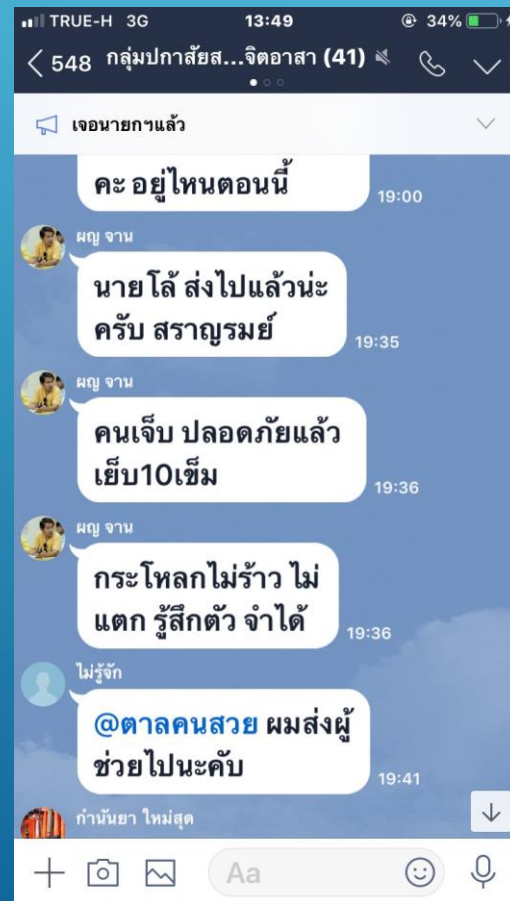


# Home visit





# GROUP LINE



# Integrated network collaboration





# The ladder to success





# Techniques for successful



## Awareness

- problem based



## Teamwork

- community relationship
- leaders
- knowledge



## Plan

- problem based
- flexible
- modern technology communication
- community agreement\*



## Community Intervention

- Community participation



## Evaluation



## RESULTS

► The outcomes of mental health problem solving which follow;

**1. integrated plan**

**2. rehabilitation to job**

**3. referral system**

**4. home visit team**

**5. self-help group**

**6. relapse protection**

**7. continuous care**

**8. reduce violence & stigma**

**9. increase network efficacy**



## RESULTS (CONT.)

- ▶ Community based for problem solving using participation can affect to **network collaboration**, strength of leaders and teams, **knowledge support & potential development**, social and cultural capital, and community trust.
- ▶ Conditions for success were included; **mind**, efficiency leader's lead, effective communication, **continuous activities**, **sense of belonging** and coaching & mentoring.





## CONCLUSION

- ▶ CBR Project for community mental health problem solving and also **monitoring continuously** that can lead to sustainable and self-reliance.





น้ำตก น้ำราด

จ. สุราษฎร์ธานี

**Ban Thamniap community**



**THANK YOU**

**Pakasai, community**