

Report of “Education of Global Medical and Health Science Leaders in the Coming Generation in Cooperation and Collaboration with ASEAN Countries”

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1. Introduction

I've been dispatched to the Department of Physical Therapy, Mahidol University in Thailand for 1.5 months. The purpose of my exchange program was to learn health promotion and physical therapy in community. This report summarizes experiences that I got from this program.

2. Program Overview

Term: 4 Feb 2017 ~ 20 Mar 2017 (45 Days)

Country: Thailand

University: Department of Physical Therapy, Mahidol University (Salaya campus)

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3. Program & What I Learned

■ Overview

For the first 4 weeks, I've participated in the postgraduate course of physical therapy in community. In this course, I've mainly studied health promotion and physical therapy in community with 3 teachers and 3 postgraduate students. The items below are programs what I've experienced in this course.

- Home visit physical therapy
- Health education
- Lectures on health promotion

For the last 2 weeks, I've visited the Siriraj hospital (the oldest and biggest hospital in Thailand) and the Physical Therapy Center for clinical practice.

■ Physical Therapy in Community

Home visit physical therapy

Thailand is a developing country, but is getting an aging society rapidly before social welfare service has fully developed. Unlike Japan, Thailand doesn't have the long-term care insurance system, which means service for the elderly isn't enough available.

As case study, I've visited 4 cases with teachers and postgraduate students. We've visited several times for each case for diagnosis, evaluation, program development, and treatment.

In discussion of case study, the ICF (International Classification of Functioning, Disability and Health) model was applied. Although the ICF is familiar to physical therapists, many physical therapists don't seem to clinically make the best use of the ICF. In case study, however, they could make the best use of it. It was impressive that they really put special emphasis on the differences between patient's perspective and physical therapist's perspective. We, healthcare professionals, tend to be biased for patient's perspective due to medical knowledge, skills, and experiences. Hence, we need to be aware of that fact at first, and need to seek patient's real perspective (needs that they want). After getting needs, all we have to do is to go toward them with evaluation and treatment. It's fundamental, but difficult to be aware. This re-cognition can be so helpful for my career as one of the physical therapist.

Among physical therapy in community, it's also important to grasp the characteristics of communities and patients' homes. In case study, I've visited 3 communities whose characteristics are different. In terms of promotion of patients' social participation, understanding of industries and surroundings is informative. Because disparity of wealth is widened in Thailand, physical therapists have to adjust it, and do their best in the limited situation. For grasping communities, physical therapists may need to regularly get along with them.

Words of Dr. Pakaratee on physical therapy in community left an impression. She said, "if you work in clinics, you can treat just patients who

can come to clinics. If you work in community, you can approach various kinds of patients. That is attraction and strength of physical therapy in community.” That reminded me of the significance of health promotion in community.



Health education

I've had the opportunity to plan and organize health education for community-dwelling elderly people, caregiver, and patients after amputation. We held the seminar, “The health of elderly “How to bring away / prevent from the joint pain”, for approximately 100 community-dwelling elderly people. In planning stage, we fixed the flow of whole program and each session, setting, preparation of fixtures. On the seminar day, several things such as layout of setting and timetable were different from what we expected. Because, in addition, it was held at outdoor restaurant, several things that we couldn't predict were happened. Teachers and students, however, dealt with them flexibly, and the seminar succeeded safely. From them, I learned some lessons. Firstly, they remind me of the importance of preparation. In this kind of seminars, we often have the opportunity to work together with some stakeholders. We need to communicate well with them for sharing information and avoiding misleading. The second thing is to be flexible. We need to be prepared for happening what we couldn't expect, and settle down to deal with them. Finally, we need to do our best. In this kind of event, it's seldom that we can host events without any limitations of time, person,

space, environment, and recourses. We, however, fall easily focusing on aspects that is impossible to be changed. We should focus on modifiable aspects that can help to break through challenges.



Lectures on health promotion

As lectures, I attended classes of motivation and coaching, which are important factors among health promotion. In the class of motivation, I learned how to motivate patients to change themselves. For improving motivation, we need to grasp real needs of patients. To do that, developing good relationship is the first step. In the class of coaching, I learned the concept of coaching and how to coach. Healthcare professionals including physical therapists tend to like teaching, which is just telling information unidirectionally. Coaching is the most significant and effective way. Coaching is defined as letting coachees how to find solutions. I shouldn't forget that physical therapists help patients to find solutions, and those who should find solutions are patients themselves.

■ Hospital & Clinic

Thai physical therapists have the right to start a business as physical therapists unlike Japanese. Many Thai physical therapists open their own clinic. In clinics, physical therapists have to diagnose patients' illness at first. Physical therapists also have to screen whether patients have red flag signs or not. When patients show red flag signs, physical therapists refer them to doctors. When patients don't show any red flag signs, physical therapists move onto the process of evaluation and treatment. Physical therapists with

direct access are responsible, and risk management is quite important to protect physical therapists as well as patients. Diagnoses by physical therapists are different from those by doctors. Those by physical therapists should guide orientation of treatment.

4. Cultures

Foods & Drinks

Thai foods are quite cheap, that cost about 30 or 40 baht per meal. Many Thai people often eat out. Many Thai foods are spicy and sometimes salty. For drinks, even green tea contains sugar. In shopping centers, there are many Japanese and South Korean restaurants.

Transportation & Environment

Bangkok, the urban city of Thailand, is one of the most famous countries for traffic jam in the world. However, Thailand has developed the BTS sky train and the MRT (Subway), which improved traffic jam. For Japanese, it's still heavy traffic jam. It'll be gradually improved by extending railways of the BTS sky train.

In Thailand, there are many obstacles for elderly people and people with disability. Many facilities such as shopping centers and stations cleared obstacles, but there are many obstacles like steps outside.

Religion

Most Thai people believe in Theravada Buddhism. They often visit temples. Actually, to what extent they believe is dependent on people. Some donate a lot, some just pray to Buddha for luck. In weekend, temples often hold temple festivals.

Finally, I really appreciate everyone's best support.

