Occupational Therapy and University Relationships

Occupational Therapy in Thailand

Occupational therapists interests are in the commonplace occupations that are often taken for granted until participation in life is or threatens to be disrupted. A quick bond is formed when occupational therapists from different parts of the world or a country come together. It is in this context, and the welcoming nature of Thai culture that I had the opportunity to learn about the practice of OT in Thailand.

Occupational Therapy is a relatively new profession in Thailand, with two schools now offering BS degrees. (OT began in the US in the early 1900’s) Suchada was a key person in establishing occupational therapy in the country. Having a masters degree in OT at Boston University, she was instrumental in starting the first occupational therapy education program in Thailand 30 years ago. That program at Chiang Mai University is where all OT’s educated in Thailand have been trained, and is a highly thought of program internationally. It is the only WFOT Accredited program in Thailand. As a result there is a blurring of the distinction of discussion of Thai OT practice and the university collaborations, reflected in this report.

Mahidol University (outside Bangkok) began their OT program two years ago. It has no graduates yet, and is pending WFOT accreditation. Like Chiang Mai, Mahidol offers a four year BS degree program. Chiang Mai also offers a post-professional Masters degree. The Thai occupational therapists I met expressed a sense of community and allegiance to the Thai and Asia-Pacific OT Associations, as well as the World Federation of OT. Yet owing to their short history, their numbers are small. While there is much need for occupational therapists there, the OT positions, are in medicalized settings--hospitals and outpatient clinic-- with the exception of Suchada’s role in the Ministry of Mental Health. The one practice I observed that was not connected to a university was medically focused, at Bangkok Hospital in Phuket where Ann, Aui, and Aom provide in and outpatient services.

The OT faculty at Mahidol and Chiang Mai expressed interest in developing OT services for children in Thai schools. Thailand has an early identification programs for infants and children. While I had limited observations of OT practice with children, those practices appeared to be focused on sensory and movement based issues. Because services are mostly located in medical settings they do not have the benefit of intervention that is grounded in the natural environment of the child and family, in the context of occupational patterns in day to day life at home and school. US OT’s could contribute to the thoughtful development of OT services for children in Thai schools. The US OT’s could learn from cross-cultural perspectives on schools, childhood and families, as well as the innovations of Thai OTs.

According to faculty, at present there is little OT community practice with Thai adults. What I observed was done by faculty as part of their role in training students. The faculties are ideologically committed to community based rehabilitation (CBR) --a trend of the profession world wide. Yet, owing to the newness of the profession, few or no paid jobs exist in the community for the OT graduates. As an example, the Redemptorist Center in Pattaya which provides services, work and training for people with disabilities does not have OT, nor do the people I asked there know what OTs do. When I shared the Accessible Tourism project with the faculties, they were enthusiastic about this creative and community
based role for OT. It is an opportunity for Thai OT to contribute to society and the economy, beyond medicalized and institutional practices.

I had the opportunity to join OT faculty in community based services for older adults. We visited homes and senior centers in Chiang Mai. The interactions I observed between therapist and older adults reflected a deep-seated relational context for services. It seemed that by being part of a shared culture, the connection between the therapist and client offers increased potential for meaningful interventions. The 90% prevalence of one religion in Thailand, Buddhism, is one of many unifying factors. Therapists could grasp that an older woman believed she fell in her garden because she forgot to ask Buddha for permission before picking a flower. Her belief that Buddha pushed her down guides the approach to assessment and intervention for prevention of future falls.

In the US, best practice in OT is client-centered and occupation centered. Yet I suspect that in the relational aspects are not as explicit as in Thailand, and our services are delivered in a different context, with greater regional and cultural differences than Thailand. International and cross-cultural dialogue and experiences bring into relief the centrality of culture in occupations and OT services everywhere. It informs us about the importance of cultural competence when, for example, companies bring in travelling therapists from all parts of the country and world to deliver services in rural North Carolina.

Despite these differences, OT practices in Thailand and the US seem to share a common core. When observing the occupational therapists on three home visits to older adults, I observed a very familiar clinical reasoning process as my home visits in North Carolina. Thai OTs focused on optimizing the environment for function and safety, time use, and collaborating with clients and families in decisions. They analyzed and honored meaningful occupations for social connections and survival. The processes seemed similar between US and Thai OTs, but there were also significant differences in occupations, environments and meanings associated with culture.

Bangkok Phuket Hospital Occupational Therapy Visit (7/29/09)

OT staff (Ann, Aum, Aui)
Mahidol University Visit (7/22/09)

Mahidol University faculty offered a presentation, meeting and tour or the new BS in OT program. I had the opportunity to meet with Dean Dr. Roongtiwa Vachalathiti, PhD, of the Faculty of Physical Therapy (PT) and Applied Movement Science in which the new Occupational Therapy program is located. She expressed interest in collaborations and a MOU as our dialogue continues. The PT Program in Mahidol University recently became a school, having previously been a department in the School of Medicine. Dr Roongtiwa also stated her goal for occupational therapy to eventually become a school at Mahidol.

The chair of OT, Dr. Supalak Khemthong, PhD (“Dr. Pop”) was out of town, and sent his greetings for my visit and follow up emails. Three faculty lecturers offered meetings and a tour: Natsuda Chueanmanochan, MS, OT; Maliwan Rueankam, MS, OT; Nichaphat Srinaruewan, MA, OT. I especially appreciated their time and interest, considering the energy that goes into starting up a new curriculum. They inquired about our PhD program, for their own education. In our tour of the teaching space, we discussed the amount of space designated for Snozelen and sensory integration equipment, relative to the use of that equipment in general OT practice. This is a matter of debate in the US with regard to evidence for these practices. Our dialogue about potential collaborations included: developing school based practice in Thailand; developing a tool to assess independence and safety in occupations of older adults in Thailand (possibly similar to the Kohlman Evaluation of Living Skills(KELS)); and developing practice in the community.

Mahidol University visit (7/22/09)

Maliwan Rueankam, MS, OT; Natsuda Chueanmanochan, MS, OT; Dean Roongtiwa Vachalathiti, PhD; Sue Coppola, MS, OTR/L, BCG; Ailse O’Neil, OTS; Nichaphat Srinaruewan, MA, OT
Chiang Mai University Visit

Jeeranan Griffiths, MS (Jum), Nok, Pediatric OT Faculty Member, Supawadee Putthinoi, MS (Jane), Susan Coppola, MS (UNC), Hatachanok Apikomonkon, PhD (Nok), Maethisa Pongsaksri, Ph.D. (Arisa), Piya Trivittaya, PhD

CMU- UNC-Chapel Hill-Areas discussed
1) student experiences
2) inclusive tourism in chiang mai
3) school based practice & pediatrics
4) preventive home visits to older adults
5) meaning of occupation for older adult
6) dementia & cross-cultural perspectives
Home Visits to Older Adults in Thailand

Adapted Bathing area
Falls Prevention

Home visit at McKean Center
Chiang Mai University faculty meetings and touring

Hataichanok Apikomonkon, PhD (Nok); Sue Coppola, MS; Wannipa Bunrayong, PhD; Supawadee Putthinoi, MS [Jane], Sarinya Sripetchcharawut, PhD

Wat Prathat Doi Suithep-Jane, Wannipa, Nok