INTRODUCTION

In the ongoing COVID-19 pandemic in Thailand, analysis shows that the types of virus spread can be divided into four waves based on the Health Footprint of COVID-19 (Upwell Health Collective, 2020). Firstly, 1st Wave (Immediate Mortality and Morbidity of COVID-19) is the virus spread wave that causes people to be infected rapidly and causes several deaths. Secondly, 2nd Wave (Impact of Resources Restriction on Urgent non-COVID-19 Conditions) is the wave that spreads more widely and causes problems for those who are not infected. This also results in issues of urgent resource management to be ready for virus protection and curing patients. Thirdly, 3rd Wave (Impact of Interrupted Care of Chronic Conditions) is a massive spread, leading to increased chronic patients. These patients cannot meet doctors as scheduled or have to take care of themselves at home for a long time until they have recovered to a nearly normal health condition. Lastly, 4th Wave (Psychic Trauma, Mental Illness, Economic Injury, Burnout) is the last wave that triggers a longer virus spread time impacting the economy, followed by stress, anxiety, and mental health problems of those who are not infected. The number of patients who encounter mental health illness from psychiatric disorders rises, compared to the normal situation, impacting various staff categories, such as public health care staff, medical staff, nurses, and other related staff. It can be stated that mental health problems can also occur to those who take care of the patients. Furthermore, other people suffer emotional exhaustion from the COVID-19 situation, resulting in mental health problems and illness from psychiatric disorders (Burroughs, 2020; Gunawan, Juthamanee, et al., 2020).

Currently, the COVID-19 situation in Thailand is under control thanks to various lockdown measures in the society, the unity of the people, public health staff, and other related team monitoring the situation and curing the patients effectively. However, there are effects from the pandemic and the COVID-19 control measures, which cause pressure, stress, and anxiety among many of those who fight this long-lasting pandemic. It can be seen that mental health problems and illnesses from psychiatric disorders tend to increase, according to the "Stress" research from the Department of Mental Health (2020b). It is found that 8 out of 10 public health employees and 4 out of 10 Thai people suffer stress and pressure from their work. As a result, the public health staff tends to become emotionally exhausted, lose motivation and mental spirit, and suffer from burnout. The public sector encounters increasing stress causing illness from psychiatric disorders such as depression. Furthermore, there is a significant increase in the suicide rate since the start of the COVID-19 pandemic from January to March 2020. Comparing data between 2020 and 2019 reveals a rise in the number of suicides by more than 20% (Department of Mental Health, 2020b).

This situation calls for countermeasures distinctly and urgently from all healthcare system sectors to be ready for the 4th wave under "Combat 4th Wave of COVID-19: C4". The objective of these countermeasures should be to protect people, their families, and their mental health.
The authors perceive that the mental health problems of the Thai people must be recognized and solved urgently in terms of the mental health care model, to support the fight against the COVID-19 pandemic and its long-term impact. Therefore, strict and secured countermeasures are required, including encouraging the public sector's mental support and prevention participation. This is the key to creating happiness among Thai people during the New Normal situation that will follow. The authors are interested in studying "a mental health care model for the people in the current COVID-19 situation in Thailand" to create guidelines for implementing a mental health care model for the people under the framework of adequately recovering and maintaining mental health in the current COVID-19 situation.

MENTAL HEALTH PROBLEMS OF THE PEOPLE DURING THE COVID-19 CRISIS

The Department of Mental Health needs to closely follow the people's mental condition in the ongoing COVID-19 crisis. People suffer from anxiety, stress, fear, and depression due to the COVID-19 situation, especially older adults with higher anxiety levels. People show various symptoms such as bad feelings, frustration, anger, losing concentration, not being able to eat and sleep, and becoming sick, leading to depression. Therefore, close mental support is required to successfully recover people's physical and psychological health and decrease long-term effects (Department of Mental Health, 2020b).

However, the level of people's stress currently tends to decrease, and the pressure on people's mental condition gets some relief from the effects of the COVID-19 situation, compared to the start of the epidemic in the 1st wave. This is probably the result of lifting some lockdown measures and increased offensive countermeasures of the Department of Mental Health in different areas. Those who suffer the effects of mental illness can be divided into four categories, according to the Mental Health Department of Thailand: the infected and the quarantined; those who are at risk of having a mental illness; healthcare staff; and the people. The most urgent category in need of mental health countermeasures is the healthcare staff working closely with COVID-19 patients, chronic NCD patients, alcoholics, and drug users.

The countermeasures to help them recover require three different levels of "Mental Vaccine": individual, family, and community levels. More precisely, the Mental Vaccine on the individual level needs to focus on three powers; 1) Positivity, to look through this challenging situation positively to cope with any possible problems; 2) Flexibility, to create adaptation and replacement to cope with changes; and, most importantly, 3) Unity, to form reconciliation for going through this crisis together. Moreover, the Mental Vaccine on the community level is needed for people to feel safe, hope, peace, understand and see opportunities in the community, and develop support, communication, care, and information sharing in the society (Department of Mental Health, 2020a).

EFFECTS ON THE MENTAL HEALTH OF THE PEOPLE DURING THE COVID-19 CRISIS

In the current COVID-19 situation, the effects impact people's mental health under the four categories specified by the Mental Health Department of Thailand: the infected and the quarantined; those who are at risk of having a mental illness; healthcare staff; and the people. Most effects relate to the economy and society (Department of Mental Health, 2020b). Similar effects on mental health such as anxiety, stress, depression, insomnia, anger, and fear, which eventually created waves of anxiety, are experienced by different countries worldwide. Finally, this, too, triggers a substantial impact on the economy and society (Toraes et al., 2020).

These mental health effects are not only experienced in Thailand. This, rather, is a global phenomenon. Because of the COVID-19 situation, people search for information related to this situation. Communication channels from the government do inform about the COVID-19 situation. However, these channels are not enough and are lacking continuity. As a result, people select to consume information from unofficial sources, leading to misunderstandings and an unexpected increase in stress because different sources give conflicting information about the situation. This increases the fear of becoming infected by the coronavirus and causes a higher level of anxiety in the population, even among people with good health (Purgato et al., 2018).

Furthermore, it has been found that the mental health problems of the people are triggered by the unpredictability of COVID-19 infection and improper and ineffective countermeasures. Most people fear that they may bring the virus to their family members, especially to the elderly and kids, to infected people, to their colleagues, to those involved with their community, and healthcare staff. Since the virus can easily be spread in the air from coughing and sneezing, those who are not infected can be infected without noticing it through breathing contaminated air. Hence, anyone may be at risk of becoming infected by those who do not show any symptoms or who typically cough because they may not know they are infected (Huang et al., 2020).

A MENTAL HEALTH CARE MODEL FOR THE PEOPLE IN THE CURRENT COVID-19 SITUATION

The authors suggest an integration based on current strategies for a mental health care model for the people in the current COVID-19 situation, as further outlined below (Department of Mental Health, 2020b).

1. Integrate extensive support and protection of mental health, and control the factors causing mental health problems during the COVID-19 pandemic. It can be stated that the Thai people tend to have rising mental health problems. This requires integrated support of mental health care needs, improvement of the communication system, mental health knowledge, and cooperation from all sectors, including the government and the public sector. This should directly focus on integrating support and protection of mental health problems such as stress, depression, game addiction, and suicide. The integration of extensive protection of mental health should support and focus on preventing mental health problems, covering all four dimensions: support dimension, protection dimension, treating dimension, and
curing dimension to properly control factors causing mental health problems during the COVID-19 pandemic. The people should receive correct and easy-to-understand information from the Department of Mental Health, through public and reliable media. Furthermore, it is necessary to control both official and unofficial press in releasing COVID-19 news to ensure quality and standard at the same time (Department of Mental Health, 2020b).

2. Improve the quality of mental health services and psychiatry during the COVID-19 pandemic. This improvement must be implemented to serve psychiatric patients in different locations continuously, and it must be relevant to the local context of the COVID-19 situation. Improving the quality of mental health services and psychiatry during the COVID-19 pandemic requires the following: 1) Personnel plan; 2) Location plan; 3) Medical instrument/supplies plan; 4) Limitation of service system plan; and 5) Academic plan in all fields correctly, and adequately adapted to the context and the situation, aiming at a higher level of improvement in the overall quality of mental health services and psychiatry. Furthermore, the service needs to be improved in terms of connecting, communicating, and cooperating between mental health services and psychiatry, in response to the demand of all healthcare areas for the people to have a service with such quality and standard (Pfefferbaum & North, 2020).

3. Improve the communication system regarding the risks for mental disorders and educate people about mental health. The educator must be an expert or is someone coming directly from responsible departments or institutions, such as the director of a community hospital, the director of the public health district, the director of the sub-district health promotion hospital, sub-district headman, village headman, and village health volunteer. It is necessary to improve and update the quality of communication in the mental health service system as follows: 1) Diagnosis and treatment system needs to be improved for users to be able to access services conveniently and cover all issues of psychiatric diagnosis for all kinds of diseases, including frequently found psychiatric disorders. The educators must be able to provide advice and promote mental health with quality; 2) The social and mental treatment system needs to educate the people to understand social factors affecting illness and should be able to provide advice for people to solve their problems on their own; 3) The medical system needs to support the patients in terms of providing psychiatric treatment with effective, safe, affordable and reasonable medicines. This includes follow-up and evaluation of medicine usage and guidelines to monitor usage systematically; 4) The follow-up system needs to cooperate with the department of health and public health services to create a continuous follow-up, including recovering social and mental conditions the community (Druss, 2020). The information for educating the people should have a sharing and networking system without disturbance through current technology.

4. Develop staff to increase work efficiency during the COVID-19 pandemic. Staff includes medical and psychiatric staff and requires integrating operation networks for each category of community representatives such as sub-district head, the village head, and village health volunteer. This staff must be trained together with internal medicine staff to increase work operation efficiency in terms of knowledge in mental health, psychology, nursing science, and social necessity of psychiatric operation. This means that staff must have skills to handle psychiatric interviews, physical examinations, mental examinations, and information collecting to logically analyze and decide to provide mental services to the people during the COVID-19 crisis, based on holistic care (Druss, 2020). The internal medicine training course is a course to train and increase staff's work operation efficiency in the COVID-19 pandemic. It needs to be planned and managed based on the training standards of The Royal College of Psychiatrists of Thailand. The training needs to be in cooperation with the executive committees of internal medicine training courses such as lecturers of the Psychiatry Department and representatives of internal medicine who are involved with the internal medicine training, to share opinions and improve the training course to serve the demand of mental health of the people, society and the health care service system during the COVID-19 pandemic. Furthermore, the course should be updated yearly, and the training institution should be evaluated every five years to meet the standards of The Royal College of Psychiatrists of Thailand (2020).

5. Develop a synthesis of information systems to propose a policy recommendation for mental health during the COVID-19 pandemic. Information is the key to COVID-19 crisis management since rumors and fake news can create fear and misunderstandings among the people and accusations among at-risk groups. This can cause negative results for problem management. Thus, developing a synthesis of information systems for the virus situation to have correct and appropriate information is required. The message recipients must be able to understand the message quickly. The message senders should be experts or are directly from responsible departments or staff stated in the Communicable Diseases Act, such as the director of community hospital, director of public health district, director of sub-district health promotion hospital, sub-district head, village head, and village health volunteer. This is to create a trust for the received information among the people, educate them, and decrease fear of receiving fake news in their community. Also, it helps to relieve the virus crisis in society and the stress of receiving rumors and fake news from unreliable and unidentified sources. It also helps support awareness of the community's people to communicate any information by carefully checking the information before spreading it, termed as "Sure before Share" (National Health Commission Office of Thailand, 2020).

6. Develop and provide the "Mental Vaccine" to individuals, their families, and their communities in preparation for the "New Normal" life, in which the Department of Mental Health will focus on developing it in different aspects. First, Mental vaccines to individuals will focus on supporting, protecting, curing, and recovering. Second, Mental Vaccine to their families will focus on the three powers as follows; 1) Positivity, to look through this challenging situation positively to cope with any possible problems, 2) Flexibility, to create adaptation and cooperation to cope with changes, and 3) Unity, to form reconciliation of family members together and go through this crisis together. Last, Mental vaccines to the communities will create safe, hopeful, peaceful, and understanding communities using the communities' ability to develop help and communication networks and use the communities' care to solve problems based on their relations. This is to create trust and connect shared information in society (Department of Mental Health, 2020a).

Thus, a mental health care model for the people in the current COVID-19 situation in Thailand can be concluded into a diagram, as shown in Figure 1 below.
BENEFITS OF PROVIDING THE MENTAL HEALTH CARE MODEL FOR THE PEOPLE IN THE COVID-19 SITUATION

In the current COVID-19 situation, people are quite frightened and stressed (Juthamanee, 2020). Some lose their mental health because of incorrect information from unreliable and unidentified sources such as rumors and fake news. All these have a severe impact on people's mental health. Thus, providing mental health care for the people in the current COVID-19 situation should be urgently prioritized to create benefits as follows:

1. People can train and improve themselves better when facing problems. Those who have good mental health tend to look for solutions wisely and perceive problems as challenges, considering the root causes of the issues and finding solutions to solve the root causes on their own.

2. The people can accept and understand this unstable situation compared to a normal condition. Moreover, they can cope with changes more confidently by beginning from their upbeat attitude, critical and logical thinking, encouraging themselves to think positively and differently, having a sense of humor, preventing negative thoughts, and having better problem-solving skills.

3. People can develop self-emotion management skills to reduce stress and depression on their own. They can also encourage themselves to create self-motivation, create a good feeling, forgive themselves, do festive activities, and feel mentally peaceful.

4. People can develop self-understanding, acknowledge good and bad points in themselves, including self-pride, self-acceptance, and self-motivation. Additionally, they can have good feelings towards success and enjoy their tasks also under unstable changes, without becoming dispirited due to failure or obstacles from inconsistent changes. Also,
they can take failures as lessons to improve themselves and find better and new solutions.

CONCLUSION

In the current COVID-19 pandemic, many people suffer from stress and anxiety. They are afraid of becoming infected from the coronavirus and are open to rumors and fake news from unreliable sources. Consequently, they are more likely to get mental illness and encounter other psychiatric disorders. This does not only happen to the public but also to medical and public health care staff who continuously work under the pressure of fighting the COVID-19 pandemic, some of them until they get emotionally exhausted. This also leads to tension, stress, and anxiety. All in all, this situation significantly impacts the Thai people's mental health conditions, as seen in many increasing cases of mental health problems and psychiatric disorders, according to the "Stress" survey of the Department of Mental Health. Therefore, excellent mental health service needs to help the people's mental health conditions, especially in this COVID-19 situation, to be a guideline to create a mental health care model for the people under the framework guideline of mental recovery during the COVID-19 situation. This is to help the people adapt and accept changes, develop self-emotion control skills, and reduce stress and depression independently.

Declaration of Conflicting Interest

There is no conflict of interest to declare.

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