

The background image shows the entrance of a building, likely a hospital or clinic. There are signs in Thai script above the entrance. The main title is overlaid on the left side of the image.

International Panel Discussion A Ray of Resilience : Nongbualumphu's Journey toward Healing and Empowerment

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Nongbualumphu massacre at a childcare center

On 6 October 2022, A former police officer in the rural Northeast shot and stabbed more than two dozen children as they napped in their Nursery. After he fled the nursery, he randomly fired and killed another 9 people while passing through the Nong Kung Si district. A total of 36 people were killed, Including at least 24 children. A further 10 were injured.

It is the deadliest mass murder by a single perpetrator in the history of Thailand, surpassing the death toll of the Nakhon Ratchasima shootings in 2020 (Killed 29 people).

COMMON REACTIONS TO DISTRESS

CHILD AND ADOLESCENT MENTAL HEALTH
RAJANAGARINDRA INSTITUTE



Sweating



Insomnia



PHYSICAL



Shaking



Fatigue



Stomachache

BEHAVIORAL

Crying
Screaming

Aggressive

Isolation

Loss of appetite

Substance Use

Spiritual



Sadness



Anger



Mood Swings

EMOTION



Shock



Fear



Numbness

COGNITIVE

Nightmares

forgetfulness

Confusion

Poor concentration

Disorganized Thoughts

Intrusive Thought

SPIRITUAL

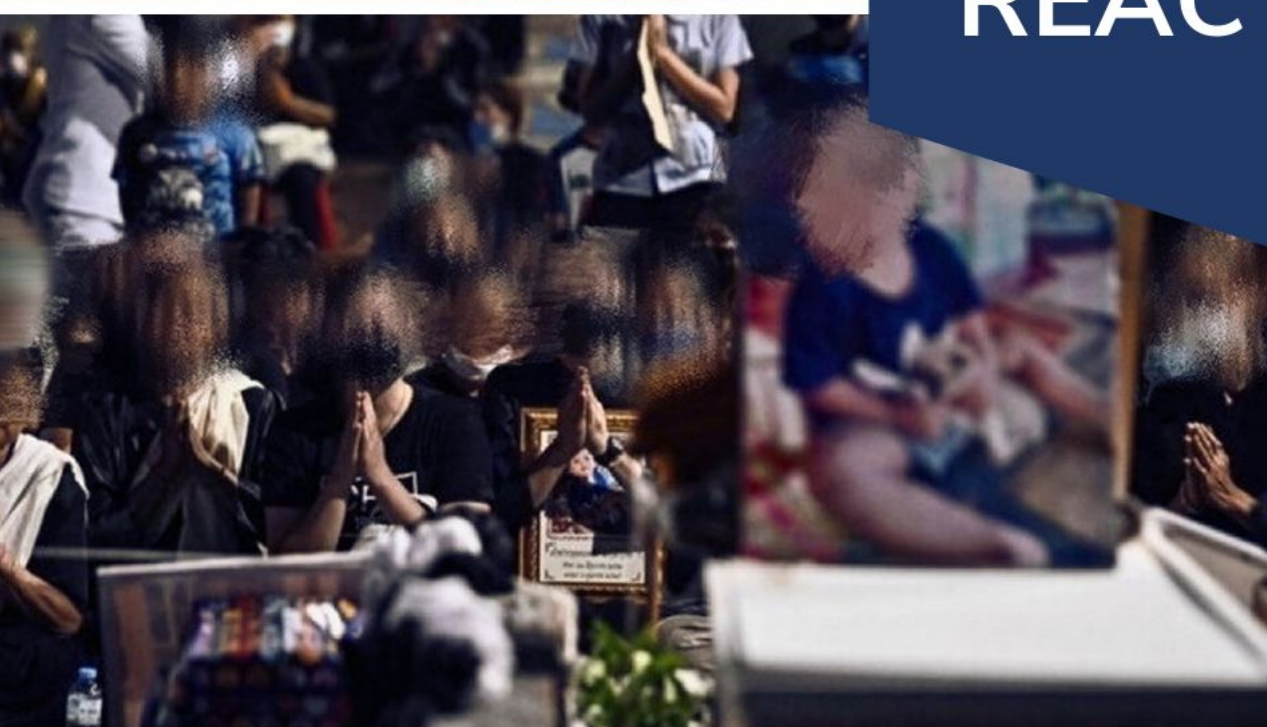
Emptyness

Discouraged

- Hopelessness
- Negative about life
- Anger towards God

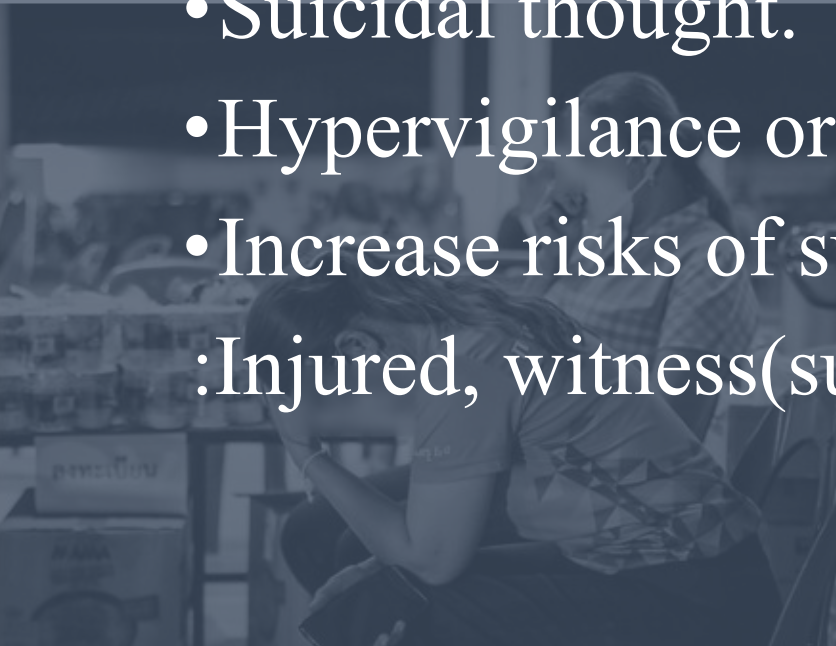
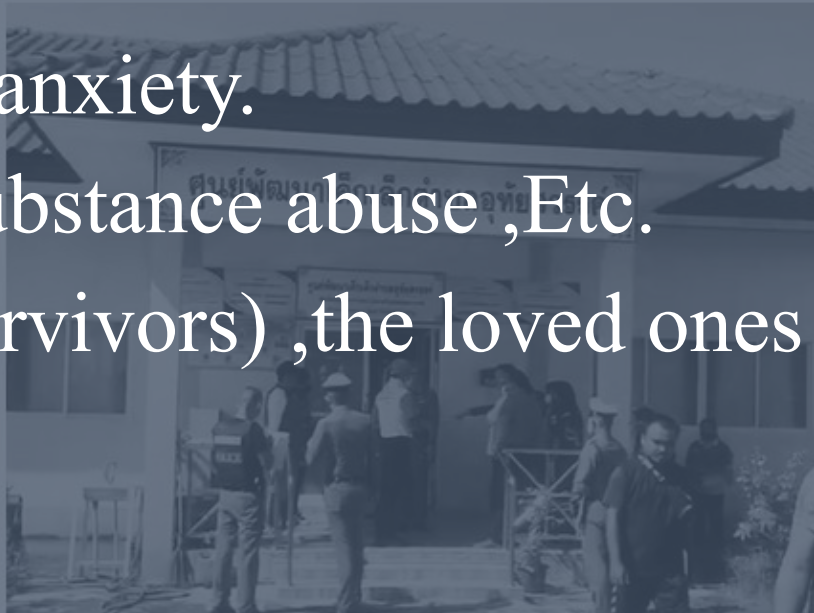


CRISIS REACTIONS



The Mental Health Impact of Mass Shooting

- Post Traumatic Stress Disorder (PTSD)
 - Panic attack or Panic disorder.
 - Depression or Major Depressive Disorder.
 - Suicidal thought.
 - Hypervigilance or anxiety.
 - Increase risks of substance abuse, Etc.
- :Injured, witness(survivors), the loved ones of victims





Does media have an impact on mental health problems.?

How may media imagery contribute to distress.?

Empirical Article

Media Exposure to Collective Trauma, Mental Health, and Functioning: Does It Matter What You See?

E. Alison Holman ¹, Dana Rose Garfin¹, Pauline Lubens², and Roxane Cohen Silver ^{3,4,5}

Abstract

Media exposure to collective trauma is associated with acute stress (AS) and posttraumatic stress symptoms (PTSS). Qualities of media exposure (e.g., amount, graphic features) contributing to this distress are poorly understood. A representative national sample (with New York and Boston oversamples; $N = 4,675$) completed anonymous, online surveys 2 to 4 weeks after the Boston Marathon bombings (BMB; Wave 1, or W1) and again 6 months later (Wave 2, or W2; $N = 3,598$). W1 assessed BMB-related AS and media exposure (i.e., hours of media consumption, graphic image content) 1 week post-BMB; W2 assessed PTSS, fear of future terrorism, and functional impairment. Greater exposure to graphic (bloody) images was associated with higher W1 AS and increased PTSS, fear of future terrorism, and functional impairment at W2. W1 AS, W2 PTSS, and fear of future terrorism mediated the association between media and functional impairment. Graphic image exposure is associated with mental-health symptoms linked to impaired functioning.

Roles of MCATT

(Mental Health Crisis Assessment and Treatment Team)

- Encouraged the affected person by visiting in hospital.
- Assessed PTSD symptoms and other mental health problems by psychiatrist. (prescribed medicine as needed)
- Active screening people at risk for mental health via the Mental Health Check In program. (Other screening tools: Symptoms check list, CRIES-8, PHQ-A)
- Concerned about the impact of mass shooting which affected their livings (Injured, witness(survivors), the loved ones of victims) and explored people who tended to be distressed



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Roles of MCATT

- Announced to people how to deal with mental health problems. (Both children and adults)
- Stopped sharing (bloody) images and VDO clips of violence via social media (Website, Facebook and Twitter).
- Hotlines for mental health help (Tel.1323) that provide support and psychoeducation for people with mental illness.

Roles of MCATT

- Provided child psychiatrist, psychologist, social worker, occupational therapist, and nurses for recreational activities. Called “Len Sarng Suk”.
- Discovered the strength in each family.(Spirituality)
- Empowered affected people to recover from the shock of the traumatic events.
- Followed the results of this program in 3 phases.(2 weeks, 3 months, 1 year)





Multidisciplinary teamwork

In early phases of mental health crisis assessment, There were a problematic system and miscommunication between government and non-government organization. Duplication of the processes were risky to re-traumatize victims and affected people.

Problems

Solutions:

- Improved communication between groups and organized the processes systematically.
- Prioritized the mental health problems over others.



Problems

The impact of Online Socialization

Misuses of Social media, such as sharing pictures related to traumatic events and telling story about victim's family, lead to mental health problems.

Solutions:

- Educated people who share an inappropriate content and emphasized the impact of socialization.

Results

3 Groups

- Group A : survivors, witness, the loved one of victims. 304 people
- Group B : People who located in neighborhood (Utaisawan subdistrict). 5636 people
- Group C : People who lived in Nhonbualimphu province. 509,001 people

3 Phases

- **Psychological first aid** (1 day - 2 week): High risk group (A) was 100% assessed. The process of healing was significantly improved.
- **Continuous phase** (2 week - 3 month): People in group A,B became mental illness (Clinical of depression and somatic complaint) totally 37 people. Prescription and treatment were needed.
- **Rehabilitation phase** (3 month – 1 year): MCATT established mental immune system (Called Vaccine Jai) in every group of





Take home message.

- There are several reactions after traumatic event. It is important to assess mental health problem early.
- Prolonged grief will turn to mental illness if no appropriate management. (Such as Emotional regulation, supporting system, mental health care assessment etc.)
- **Always** concern about the impacts of traumatic event to assist properly.
- Traumatic event do not affect only injured, witness, the loved one of victims, but also affect to others who overexposure to media.
- Education about misuses of social

The background image shows the entrance of a building. At the top, there are two signs in Thai. The left sign reads 'ศูนย์พัฒนาเด็กเล็ก' (Child Development Center) and the right sign reads 'อุทัยสวรรค์' (Uthaisakart). Below these signs is a set of double glass doors. To the right of the doors, there is a red fire alarm pull station. A metal railing is visible on the right side of the entrance. The overall scene is dimly lit, suggesting an evening or indoor setting with low light.

THANK YOU FOR YOUR ATTENTION

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