

Original articles

Capacity building of Thai fortunetellers to engage in mental health counseling

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Abstract

Objective: To develop the potential of fortunetellers in Thailand to engage in mental health counseling.

Methods: A quasi-experimental study was carried out from September to October 2019 among 40 fortunetellers randomly placed into an experimental group ($n = 20$) receiving mental health counseling training and a control group ($n = 20$) not receiving training. In-depth interviews were conducted with both groups and with a sample groups of 86 clients equally divided between the two groups of fortunetellers. Knowledge and problem scores before and after the services were assessed in both groups of fortunetellers and both groups of clients, respectively. The data were analyzed by using a content analysis, independent t-test, paired t-test, chi-square test, Wilcoxon signed-rank test, and Mann-Whitney U test.

Results: The qualitative analysis shows that fortunetellers in the experimental group reported improvement in the quality of their services after receiving training in mental health counseling. The clients's problem scores after receiving fortune-telling service in both groups were significantly lower than before the services, even though the changes in scores between the two groups were not significantly different.

Conclusion: Developing the potential of fortunetellers to engage in mental health counseling could alleviate the burden of mental health problems on health professionals. A collaborative relationship between health professionals and fortunetellers would benefit service recipients.

Keywords: fortune-telling, fortuneteller, mental health, mental health counseling

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นิพนธ์ต้นฉบับ

การพัฒนาศักยภาพหมอดูให้เป็นที่ปรึกษาด้านสุขภาพจิต

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ปิยะสุดา แฟ่งสก้า, ปร.ด.

วิทยาลัยโภคดีศึกษา มหาวิทยาลัยธรรมศาสตร์

บทคัดย่อ

วัตถุประสงค์ : เพื่อพัฒนาศักยภาพหมอดูในประเทศไทยในการให้คำปรึกษาด้านสุขภาพจิต

วิธีการ : ทำการศึกษาแบบกึ่งทดลองในเดือนกันยายนถึงเดือนตุลาคม พ.ศ. 2562 ในกลุ่มหมอดูจำนวน 40 คน สุ่มเข้า กลุ่มทดลองจำนวน 20 คนที่ได้รับการฝึกอบรมด้านการให้คำปรึกษาด้านสุขภาพจิตและกลุ่มควบคุมจำนวน 20 คนที่ไม่ได้ รับการฝึกอบรม สัมภาษณ์เชิงลึกกับหมอดูทั้งสองกลุ่มและในกลุ่มตัวอย่างที่เป็นผู้รับบริการจำนวน 86 คน โดยแบ่งจำนวน เท่า ๆ กันระหว่างกลุ่มหมอดูทั้งสองกลุ่มประเมินความรู้ของหมอดูและระดับปัญหาสุขภาพจิตของผู้รับบริการก่อนและหลัง การให้บริการ วิเคราะห์ข้อมูลโดยใช้การวิเคราะห์เนื้อหา สถิติ independent t-test, paired t-test, chi-square test, Wilcoxon signed-rank test และ Mann-Whitney U test

ผล : ผลการวิเคราะห์เชิงคุณภาพแสดงให้เห็นว่าคุณภาพการบริการของหมอดูในกลุ่มทดลองมีการพัฒนาขึ้นหลังจากได้รับ การฝึกอบรมด้านการให้คำปรึกษาด้านสุขภาพจิต คะแนนปัญหาของผู้รับบริการหลังรับบริการดูดิ่งจากหมอดูทั้งสองกลุ่ม ต่ำกว่าก่อนรับบริการอย่างมีนัยสำคัญทางสถิติ แม้การเปลี่ยนแปลงของคะแนนของทั้งสองกลุ่มไม่มีความแตกต่างกันอย่างมี นัยสำคัญทางสถิติ

สรุป : การฝึกอบรมทักษะการให้คำปรึกษาด้านสุขภาพจิตให้กับหมอดูอาจช่วยพัฒนาศักยภาพของหมอดู เพื่อช่วยแบ่งเบาภาระ หน้าที่ของเจ้าหน้าที่สาธารณสุขในการให้คำปรึกษาด้านสุขภาพจิต ควรมีการส่งเสริมการทำงานร่วมกันระหว่างเจ้าหน้าที่ สาธารณสุขและหมอดูเพื่อเป็นประโยชน์ต่อผู้รับบริการ

คำสำคัญ : การพยากรณ์, การให้คำปรึกษาด้านสุขภาพจิต, สุขภาพจิต, หมอดู

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Previous knowledge: Fortune-telling is a popular alternative to professional interventions for relieving stress, anxiety, and depression.

New knowledge: Mental health counseling training improves fortunetellers' skills to relieve and manage stress, anxiety, and depression of the clients.

Applications: Fortunetellers could potentially play a key role in community mental health care provision that could reduce the burden on the public health sector.

Introduction

Fortunetellers play a significant role in Thai society. They provide guidance and counsel to Thai people from all walks of life on family, career, money, health, and relationships, yet the therapeutic value of their work is not often acknowledged.^{1,2} Individuals suffering from mental health issues may prefer to seek help from fortunetellers rather than medical professionals due to societal stigmas attached to psychiatric care.³⁻⁵

According to the World Health Organization, depression is the most common mental disorder that affects at least 322 million people globally, with more women than men afflicted. It is one of leading causes of disability worldwide and also a probable factor for suicidality.⁶ In 2014, the Thai Department of Mental Health reported an average of 4,000 deaths by suicide per year or 300 per month, the highest rate in Southeast Asia, with the leading cause being alcoholism, followed by mental illnesses including depression.⁷ The 2013 Thai national mental health

survey reported that almost 1 million people, or 2 out of 100 people, suffered from depression during their lifetime.⁸

Most people experiencing severe depression and anxiety do not feel their problems are severe enough to warrant psychiatric evaluation or treatment. Fortune-telling may be seen as an alternative to professional psychology or psychiatric care because it is perceived to be convenient, affordable, and therapeutic.⁹ Since fortunetellers possess the abilities to give counsel and guidance, equipping them with more effective counseling skills might increase their capacities to assess and screen people suffering from severe mental health issues, and refer individuals who need medical assistance to appropriate channels.¹⁰

This study aimed to investigate the initial outcomes of a mental health counseling training program for potential fortunetellers in Thailand. We posit that the problem of mental health disorders in the country can be alleviated by developing the skills and knowledge of fortunetellers so they would have a more extensive role as mental health counselors by proxy for the general population.

Methods

A quasi-experimental study was carried out between September and October 2019 among 40 fortunetellers and 86 clients. This study was approved by the human research ethics committee of Thammasat University on May 17, 2019.

Samples

All 40 fortunetellers belonged to the Astrological Association of Thailand (AAT) under the Royal Patronage of Her Majesty the Queen.

Criteria for inclusion of fortunetellers were: 1) being certified by the AAT, 2) being 25 years and older, 3) having at least two years of experience in fortune-telling, 4) being fluent in Thai, and 5) agreeing to participate. The fortunetellers were randomly placed into an experimental group of 20 fortunetellers who received mental health counseling training and a control group of 20 fortunetellers who did not. Age, gender, and work experience were used to ensure equal distribution of fortunetellers.

The sample group of clients were volunteers, 18 years of age or older, who responded to a public announcement for a free fortune-telling and were willing to be part of this project. They were randomly selected and divided into the two groups of fortunetellers without knowing whether they were sent to fortunetellers in the experimental group or the control group.

The counseling training workshop

The counseling training workshop was 18 hours in duration over three days, consisting of lectures and activities led by two professional mental health counselors, a senior public health scholar and a clinical psychologist from the department of mental health. The training course was modified from the Department of Mental Health's "training course for expert village health volunteers (VHVs)", which was geared toward equipping VHVs with skills in screening patients or risk groups for further treatment and in providing initial consultation. The training course is as in the appendix.

Measurements

The short version of the Thai Mental Health Indicator-15 (TMHI-15),¹¹ a stress assessment form (ST-5),¹² and the 2Q and 9Q depression screening¹³ were used once at the initial screening to screen for the clients with high stress level or moderate symptoms of depression. The participants were advised to see psychotherapists for further counseling after their fortune-telling session if they had the ST-5 score of ≥ 8 points or the 9Q score of ≥ 19 points.

Knowledge of general psychology and counseling skills were assessed among both groups of the fortunetellers before the training, and only among the experimental group after the training. The tool for assessing the knowledge was adapted from the pre- and post-training assessment questions, set 3, specializing in community mental health of the specializing village health volunteer training curriculum of year 2012.¹⁴ There were a total of 30 questions, with the answer being right or wrong and a total score of 30 points. The tool was assessed for the content validity by a consultant from the Office of Academic Affairs, Department of Mental Health, Ministry of Public Health.

In-depth interviews were conducted with both groups of fortunetellers at the beginning of the project, and with the experimental group after their training and after they had seen two clients. The fortunetellers were asked about where they received astrology training, what type of forecasting expertise they had, what methods or approaches of fortune-telling do they usually deploy for the clients, why and how, to what extent and in what aspects they believed their service helped the clients, whether they had experienced a situation where

a client's problems could not be solved and how they dealt with it. The fortunetellers were also asked to provide reasons why they became a fortuneteller, how the clients come to know them, whether there were other special services they offered to the clients, and what kind of suggestions they gave to the clients.

In-depth interviews with 86 clients were conducted individually by 16 interviewers who received training in conducting in-depth interviews. Each interview lasted approximately 30 minutes. The interviewers were blinded and did not know whether the client they were interviewing received a fortune-telling session from the control group or the experimental group. Five rounds of interviews were conducted with the clients. The key questions for the clients included reasons for going to a fortuneteller, how often they found out about it, reasons for seeing a particular fortuneteller, how they felt before the session, what expectations they had for it, how they felt during the session, what they expected after the session, and whether they would use the service again. The clients were also asked about their attitudes and expectation of mental health services at hospitals, whether they knew that mental health services are available, whether they had ever used those services, and the results after the services.

Both groups of clients were also asked to evaluate the satisfaction level regarding the advice they received and the score of their problems before and after receiving fortune-telling. The assessment of client's satisfaction level was developed by the research team that consisted of 12 questions including the problem or issue the clients would like

to discuss at this time and whether it was resolved or not (and if so, how), the clients' feelings towards this fortuneteller's service compared to others they have seen before, whether they would come back to use the services of this fortuneteller again and why, would they recommend a friend who suffers from a mental issue to use the service of this fortuneteller or not and why, who else did they consult with when they had a problem, how did they feel after completing the session with the fortuneteller. There were two questions that required clients to provide a score from 1 to 10 (least to greatest) on: their overall experience with the fortuneteller and the degree to which their problems were reduced after seeing the fortuneteller.

Data Analysis

Data from the in-depth interviews were analyzed by using a content analysis and compared between the two groups of fortunetellers and between the clients who received service from the two groups of fortunetellers. The independent t-test and paired t-test were used for between-group comparison regarding the characteristics of the fortunetellers (experience and age) and within-group comparison regarding their knowledge of general psychology and counseling before and after training, respectively. For the clients, the chi-square test was used to compare the mental health assessment outcomes between those who received fortune-telling services from the experimental group and the control group. The Wilcoxon signed-rank test was used to compare the clients' problem scores before and after receiving service. Finally, the Mann-Whitney U test was used to compare the problem scores and changes in the problem scores between the two groups of clients.

Results

The fortunetellers comprised 10 men and 30 women aged between 35 and 64 years old. The majority (80%) had never received any mental health training. A little over half (52.5%) relied on fortune-telling as their primary profession. They had 8 years of experience on average, with a majority (82.5%) providing forecasting services daily.

Based on a comparative t-test comparing experience, age, and pre-test scores of general psychology and counseling skills between the experimental and control groups, there was no statistical difference between the two groups except age, as shown in table 1.

The analysis using the paired t-test to compare the scores of knowledge of general psychology and counseling skills of the experimental group before and after training showed that the mean score after training was higher than before

training, but there was no statistically significant difference, as shown in table 2.

The qualitative results showed that fortune-tellers in the experimental group reported improvement in the quality of their services after receiving training in mental health counseling. Feedback from the fortunetellers regarding the training sessions was overall positive. The following interview excerpts captured the collective sentiment:

“Very useful overall, I can adapt the knowledge and learn to use it in my daily life, and a clear result of the training is being able to communicate and understand myself and my clients better.”

“The training was excellent. It provided many valuable suggestions and tips I can use to help my clients.”

“The training is helpful for my career because it provides basic techniques that build on our skills for counseling.”

Table 1 Characteristics and knowledge of general psychology and counseling skills before training

	experimental group (n = 20)		control group (n = 20)		t-test	p value
	min-max	mean (SD)	min-max	mean (SD)		
experience (years)	2 - 25	7.80 (6.24)	2 - 31	8.38 (6.91)	0.276	.784
age (years)	35 - 59	46.20 (6.90)	38 - 64	52.40 (8.76)	2.487	.018
pretest score	18 - 27	22.80 (2.65)	15 - 28	23.60 (3.46)	0.822	.417

Table 2 Knowledge of general psychology and counseling skills before and after training of the experimental group

	mean scores	SD	t-test	p-value
before training	22.80	2.65		
after training	23.55	2.46	1.726	.101

"I have learned to be composed and control my emotions and thoughts. I can observe our clients better now with the training."

For both groups of the fortunetellers, making their clients feel at ease, being someone to rely on, and giving advice and guidance on life were the critical points of services they provided to clients aside from reading. The fortunetellers from the experimental group reported that they applied communication techniques from the training session into their services.

The analysis by using the chi-square test found that the mental health assessment results between two groups of clients were not significantly different. The scores of clients' problems after

receiving fortune-telling services in both groups were significantly lower than before the training, even though the changes in problem scores between the two groups were not significantly different, as shown in tables 3 and 4.

According to the in-depth interviews, over half of the clients reported that they received suggestions and guidelines from the fortunetellers, in which 26 clients in the control group mentioned general advice and practical tips, and 23 clients in the experimental group mentioned practical advice as well as career and life guidelines. Other clients said they felt better, hopeful, and more encouraged after their session. A majority (75%) of clients reported that the consultation felt different than other

Table 3 Within-group comparison of clients' problem scores before and after receiving fortune-telling services using the Wilcoxon signed-rank test

	before service		after service		Z	p-value
	mean (SD)	median (IQR)	mean (SD)	median (IQR)		
clients receiving services from the experimental group	5.70 (2.77)	6 (5)	2.86 (2.46)	2 (3)	-5.328	< .001
clients receiving services from the control group	4.98 (2.11)	5 (3)	2.16 (1.95)	2 (2)	-5.283	< .001

Table 4 Between-group comparison of client's problem score before and after receiving fortune-telling services and changes in problem scores using the Mann Whitney U test

	experiment group (n = 43)		control group (n = 43)		Z	p-value
	mean (SD)	median (IQR)	mean (SD)	median (IQR)		
score before service	5.70 (2.77)	6 (5)	4.98 (2.11)	5 (3)	-1.440	0.150
score after service	2.86 (2.46)	2 (3)	2.16 (1.95)	2 (2)	-1.253	0.210
change in score	2.84 (2.19)	3 (3)	2.81 (2.20)	3 (3)	-0.009	0.993

fortune-telling visits they had been to, explaining that the difference was in the way the fortunetellers were focused on giving practical advice to the clients and were more engaged in having a conversation with the clients than being only focused on predicting the future. They also noted that the fortunetellers were attentive and took their time.

Discussion

In summary, feedback from the 20 fortunetellers who receive counseling training was positive overall. The majority found the three-day workshop was useful and helpful in observing a client's mental state, knowing what to say, and what techniques to recommend. The fortunetellers recognized that communication skills are a critical aspect of their profession and took these skills seriously. They also recognized that helping clients maintain a healthy state of mind is essential to their well-being. Overall, the fortunetellers reported significant improvement in the quality of their services in terms of applying the methods learned constructively in the sessions. For clients, feeling relieved, more hopeful, and more confident helped them deal with the challenges and further pointed out the benefits of counseling and communication training for this profession.

This study highlights the importance of involved interaction between clients and fortunetellers and the attentive listening skills of the fortuneteller. In Korea, for instance, local shamans provide "psychological stimulation," and in Taiwan, folk healers provide "therapeutic relief" for those who are "struggling or just need someone to talk to."^{16,17} Therefore, a fortune-telling session is like a consultation since most clients are keen to talk

about the results of their readings linked to the problems they are experiencing in their lives. As such, practical guidance and advice from the fortuneteller are welcome, with many clients expressing appreciation for having someone there to listen to and understand them. Thara and Padmavati underlined the importance of equipping mental health professionals with valuable skills for their professional development.¹⁸ Likewise, fortunetellers who participated in the mental counseling training found the instructional and interactive sessions to benefit their profession in terms of psychological skills training and mindfulness-based interventions. They could provide counsel and guidance to their clients using the skills and knowledge gained from the training in their services. The workshop also built a foundation for developing good communication and listening skills. It equipped the fortunetellers with practical techniques they could apply in their personal and professional lives, especially stress management and emotional health.

This project also demonstrates that a cooperative working relationship can be fostered between public health officials and fortunetellers. According to a WHO study on improving the treatment of depression and suicide risk in Asia, educational and training programs for frontline health workers and other professionals are crucial.⁶ The strategies to prevent suicide (STOPs) project recommends a "more coordinated, systematic approach" to improve the treatment of depression and related disorders. That approach includes the training of primary care providers in areas where access to mental health services is limited (e.g., rural areas) and where people prefer to visit a primary care

provider rather than a mental health professional.¹⁹ Similarly, in Sri Lanka, lay community workers are trained in the absence of qualified mental health professionals.¹⁸ A more coordinated approach in the Thai context would involve professional counseling training for fortunetellers by experienced health officials from the Ministry of Public Health and issuing a certificate of training upon completion. This is not meant to infringe upon the purview and expertise of mental health care professionals or equate fortune-telling services with that of professional counseling, but only to equip fortunetellers with skills and knowledge that may be of benefit to their profession.

Aside from the stigma associated with the mental health professionals,²⁰ the stigma and discrimination against people suffering from a mental illness partially explain the popularity and ubiquity of fortune-telling.²¹ Equipping fortunetellers with the skills to detect signs of major mental health problems such as depression may therefore benefit a public health approach to suicide prevention. Training on mental health counseling should be made available to fortunetellers in Thailand. Overall, it raises the general knowledge base for fortunetellers and dovetails nicely with their services. Training also improves the fortunetellers' mental health, which is beneficial to both fortunetellers and clients. Training should continue incorporating meditation and mindfulness-based interventions because the fortunetellers can teach and introduce these techniques to their clients. Communication and counseling skills can be incorporated into the curriculum of the AAT, and a collaborative working relationship between the Ministry of Public Health

and all existing astrological associations in Thailand should be supported and fostered so that training in mental health counseling is available for all practicing fortunetellers.

Fortunetellers will continue playing a significant role in Thai society, even more so during the pandemic crisis where managing stress and anxiety has become especially critical. Moreover, while fortune-telling is a popular alternative to psychotherapy, it can also be seen as complementary and supplementary to professional interventions since "psychotherapy and folk therapies are not mutually exclusive."¹⁶ This project would greatly help improve the mental health and well-being of Thai citizens.

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Appendix

Training course: capacity building of Thai fortunetellers to engage in mental health counselling

training topics	what trainees get after the training	objective:	lesson plan	measurement	time
Day 1	<ul style="list-style-type: none"> • Definition of mental health • Cause of mental health deterioration • Common mental and psychiatric problems 	<ol style="list-style-type: none"> 1. Understand the meaning of mental health. 2. Know the causes of mental health deterioration. 3. Be aware of common mental health problems. <p>• How to screen for mental health problems by using the tools: stress assessment form (ST-5), depression assessment form (2Q & 9Q)</p> <ul style="list-style-type: none"> • Appraisal guidelines and advice • Practice using screening test 	<ul style="list-style-type: none"> • Bring it into the teaching plan and have the lecturers explain the content according to the training topic. 	<ul style="list-style-type: none"> • Participation in teaching. • Pretend of mental health and counseling expertise. 	3 hrs.
Day 2	Self-esteem	<ol style="list-style-type: none"> 1. Analyze and understand self-personality. 2. Able to recognize and plan to improve their personality. 	<ul style="list-style-type: none"> • Show an example of the tools, and how to use the tools. • Practice using tools for assessments and interpretations and giving advice. <p>• Watch the role play, and the speakers are randomly asked by the participants about what kind of personality they have seen from the role play.</p> <p>• Take a personality analysis form and interpret the results.</p> <p>• Describe the meaning of personality, characteristics of personality that affect service, and guidelines for improving.</p>	<p>One hr. 30 min.</p>	

Training course: capacity building of Thai fortunetellers to engage in mental health counseling (continued)

training topics	objective: what trainees get after the training	lesson plan	measurement	time
Day 2 self-esteem (continued)	<p>Basic communication skills</p> <ul style="list-style-type: none"> • Listening and observation skills <p>Day 2</p> <ul style="list-style-type: none"> • Divide the trainees into groups of 5 for discussion according to the assigned issue. • Let everyone find a way to improve their personality that is suitable for 2 - 3 service characteristics and put it on the whiteboard. 	<p>1. Explain the meaning objectives and guidelines for using listening and observing skills.</p> <p>2. Explain the effects of listening and observation skills in consulting.</p> <p>3. Use listening and observation skills in counseling appropriately.</p>	<ul style="list-style-type: none"> • Lectures on listening and observation skills. • Demonstrate listening and observation skills. • Analyze and discuss the subject matter demonstrated. • Assign tasks to practice listening and observation skills. • Randomly evaluate the trainees. 	<p>One hr.</p> <p>30 min</p>

Training course: capacity building of Thai fortunetellers to engage in mental health counseling (continued)

training topics	objective: what trainees get after the training	lesson plan	measurement	time
Consulting skills and processes	<ol style="list-style-type: none"> 1. Explain the meaning, objectives and guidelines for using the skills of reviewing and summarizing. 2. Explain the consequences of using the review skills and conclude counseling. 3. Appropriate use of reviewing and summarizing skills in counseling. 	<ul style="list-style-type: none"> • Lectures • Demonstrate the reviewing skill. • Have the participants analyze the demonstration of reviewing skills. • Demonstrate summarizing skills by asking the participants to tell a story with one speaker being a listener and using the skills to summarize. • Practice • Randomly assess and answer questions. 	<ul style="list-style-type: none"> • Practice • Can tell the benefits of using reviewing and summarizing skills. • Observation 	One hr. 30 min
Day 3	<ol style="list-style-type: none"> 1. Explain about the meaning objectives and guidelines for the use of capturing and reflective skills. 2. Describe the effects of using capturing and reflective skills in counseling. 3. Appropriate use of capturing and reflective skills in counseling. 	<ul style="list-style-type: none"> • The speakers tell stories and let the trainees use their listening and observation skills. • Randomly ask what the educator noticed or caught and how did the narrator feel? • The speaker describes the content of capturing and reflecting feelings. • Divide into groups of trainees and assigned tasks to discuss the assigned issues. 	<ul style="list-style-type: none"> • Practice • Can tell the benefits of using capturing and reflective skills. • Observation 	2 hrs.

Training course: capacity building of Thai fortunetellers to engage in mental health counseling (continued)

training topics	objective: what trainees get after the training	lesson plan	measurement	time
Conclude knowledge and referral guidelines for people with mental health problems and apply approaches to forecasting.	As a guideline to support fortunetellers to provide screening and counseling services and be able to refer appropriately.	<ul style="list-style-type: none"> • Group discussion for action plan to achieve goals. • Review and plan for success. • Open-mindedness, commitment to learning, such as what we will do? What happened? What have we learned? What we will do next? • Gaining new knowledge from fortune tellers. 	<ul style="list-style-type: none"> • Questions and answers • Can advise or refer clients appropriately. 	1 hr.
Summary of consulting principles.	To assess and review lessons of learners after completing/doing various activities that they have learned.	<ul style="list-style-type: none"> • Doing AAR (after action review) 	<ul style="list-style-type: none"> • Questions and answers • Able to apply knowledge to service recipients. 	2 hrs.