



Project Journey

Project Name: Sook Sisaket - Rural Health

Team Members: Prut, Shahid, Sanu, Monika, Moh, Kim

Brief description of the project (2-3 sentences):

Baan Hang Wao is a farming village in north-east Thailand. In this project we address challenges related to rural health.

Starting Context

- What was the original problem framing brief you began with?

Diabetes and hypertension are common health problems indicated by the villagers. Most of the villagers are elderly. Local health volunteers think it is due to the villagers' diet and insufficient nutrient intake. There are 8 elders with paralysis and 3 persons on wheelchair in the community. They are being taken care of by their family.

- What are some basic statistics about the town you worked in and the local or national context that are relevant to this project?
- Who was the original contact you worked with from the community?
Village's health volunteers Wan and Roj.

Gathering Information (Wed, July 26?)

- What does research show about this particular challenge?

There are several health challenges in the village that could be tackled. The most common ones that we've identified were:

1. helping the subdistrict hospital and health volunteers to do their work
2. effectively, tackle the human resource issues
3. occupational health: farmers and muscle pain, could lead to disability
4. drugs: cascading to other problems, who wants to live in
5. diabetes: help from prevention to management
6. supply side: how can we make the service provider side more proficient.

7. disability

From your interviews, home stays, and observations what are you hearing/observing are the main challenges people are facing related to your project topic?

A lot of health problems that were identified by villagers were “blamed” on being old or side effects of farmer’s work. The health issues were considered standard and something that most of the people were to experience. It also identified that around 25 people are suffering from diabetes and effected by other diseases as a consequence of diabetes.

- What did you observe was valuable to people?

It was mixed to the communities based on their perspectives, some identified exercise can be the solution to address diabetes, some wished to reduce their muscle or back pain. After couple of interactive sessions, communities get engaged in exercise activities by and large to maintain better and healthy life. Finally, it appears that engagement and ownership of the community was assured under the banner of Health Club for conducting exercise.

- What did you discover about community behavior and habits that is relevant for this project?

People didn’t really thought about prevention. They thought the treatment was the only way of dealing with the problem. There was also lack of confidence in what doctors and nurses tell them to do. The current behavior is very strong and it will be difficult to change.

- What other insights did you discover about your original project?

There is an opportunity to use innovation to tackle lack of human resources at the sub-provincial hospital. Self-care is another opportunity that could be explored as well as preventive measures and care.

- What activities or tools did your team use to collect the information and gain insights? Please including any photos of your process (even of flip chart paper drawings).



Stake holder interviews, OAT

(Re)Framing the Problem (Thurs, July 27)

- What are some of the main challenges in your project area that you notice people are facing?
- Did the information you gather make you want to change your project completely? If so, how?

At first we weren't sure if we want to tackle occupational health for farmers or issues related to diabetes. We've started with the research on occupational health which confirmed our assumption that the biggest problem relates to muscle pain. More and more manual work is

being replaced by machines and the injuries are not as severe as before. After reviewing statistics about other diseases we've decided to focus on diabetes.

- What is the [PATH statement](#) you chose to focus on? What criteria did you decide is most important to include in it?

IN BHW one of the most common health problems is diabetes for people over 50. They are not aware they can prevent the disease. We will focus on introducing community based activities addressing exercise and diet with the aim to create healthy habits to reduce the risk of getting diabetes.

The most important criteria: community, high impact, reach

- What was the most challenging part about framing the problem for your team? What was the easiest part?

The most challenging part was the scope. In rural health there are a lot of problems that need to be solved. Each of those problems are important and deserve to be solved. Even within one topic there are several angles one can take. Deciding on the problem and angle took us quite some time. The easiest part was to quickly book interviews and speak with the stakeholders. Everyone was willing to help us.

- What activities or tools did your team use to frame the problem?

Questions to be asked, interviews, debrief, personas, problems per persona, prioritising, PATH

Co-Creating a Solution (Fri, July 28)

- What solutions already exist and why aren't people already using them?

According to our findings from health volunteers, there is a governmental project to encourage community members to do aerobic dance. However, nobody is the leader for the activity. Moreover, village repeatedly mentioned that they had always wanted to exercise yet there was no opportunity for them to do so. Few of the community members already used to do exercise at their home but never thought to motivate others to do so.

- What resources are locally available that you could use to solve this problem?

The local community has appropriate spaces for villagers to do outdoor activities such as group exercise. As well as, community radio which is highly convenient for public relation. The materials identified for exercise like bamboo stick and rubber band has been used to develop the solution of the problem.

- Who in the community has show the most interested in co-creating a solution with your team? Why do you think they are interested?

Elderly women seemed to express the most interest in our solution i.e. exercise. Our assumption is that it was because they enjoyed doing group activities with other community members. During the event, we had a small exercise session for people who would be interested. Once a few community members started to do the exercise, other members began to join the group and exercise together. Peer pressure also played its role. We noticed that the community members did some unexpected moves as they were encouraged by their fellow villagers.

- What habits are available that you could leverage as a part of your solution?

Villagers are fond of socializing. They love doing group activities as we notice during our exercise session that they encouraged each other to do more exercise when they gathered as a group. Therefore, we consider this as a trigger point we can use as an opportunity for the solution.

- What solution did you chose to create? And What activities or tools did your team use to design it?

Our team planned to develop two main solutions for maintaining user's nutrition intake and exercise. Finally, based on the community response and readiness, we created one solution jointly with the community for physical exercise. The considered availability and access to the materials to develop the exercise tools and designed 2 set of exercise materials, one is special bamboo stick and another is bamboo with rubber band.

While, we also created three exercise options. Firstly, a community gym with exercise machines and equipment made from bamboo. Secondly, exercise radio and, lastly, an application that provides users workout notifications, amount of calories burnt in each workout session and reward for each one.

A ToT and design proto type session was organized with the community members where they were extensively consulted about the exercise activities. They selected their Trainer, volunteers, location for exercise, strategy to invite male participants and committed to –

- Motivate others to join the exercise session by using the radio and attract people by telling them about the benefits of exercise to live healthy
- Conduct training sessions regularly (Daily)
- To ensure safety
- Transfer to knowledge to others when someone is busy
- Will use the Line group for sharing information and photos

The community named the initiative as Health Lovers Club BHW

Technology/Final Prototype (Thur, Aug 3)

- What was the prototype your team designed? And how does it work?
Long bamboo stick and bamboo resistance band. Both can be used for various stretching, flexibility, and strength exercises.



- What materials are needed to build it and how do you build it?
Bamboo stick (can also use PVC pipe) and rubber bands
- How much did it cost to make it?
The raw materials cost is 20 baht (0.7 USD) for 2 meters of bamboo and 65 baht (2 USD) for 500 g of rubber bands
The material cost of bamboo stick (45" long) is around 12 baht
The material costs of bamboo resistance band (10" long) is around 5 baht
- Who is the intended user of the prototype?
The villagers who participate in group exercise

Lessons Learned (Thurs, Aug 3)

- What feedback did you hear from the community about your prototype? What worked? What did not work?
They love exercising with the bamboo gym kit. They have asked us to build more for them.
- What did you learn about the Bang Haan Wao that you think is important to remember when working with the town?
 - The community loves doing things together and therefore we use community as leverage point for our innovation.
 - To ensure continuity, we decided to transfer the ownership to them and we serve as supporter.
- What did your team learn about the co-creative design process?
 - Helped facilitate the creation of BHW health club and evening exercises

Next Steps/Project Future (Thurs, Aug 3)

- Do you think your project should continue? If so, how and why and who in the community is interested to continue working on it? If not, why not and what were key lessons that you learned that you would want others to know about who try to work on this project again?
The project should and will be continued. The community has set up the health club and will initially organize and lead evening exercise activities.
- If you think the project is continuing:
 - Who on your team wants to continue working on it?
 - Mohh and Prut
 - What is the 6 month plan and who is going to be responsible for what?
TBD
How to check in when them, nudge them, and motivate them regularly?
How to encourage them to troubleshoot so they keep going?
How to encourage the men?
How to find and encourage people with diabetic risks to join?
How to incorporate activities that reduce diabetic risks?
 - What are some anticipated risks and challenges for this project's development?
 - The health club has stopped organizing evening exercises.
 - Someone gets hurt.
 - The activities don't reduce risks of diabetes.
 - How much funding (if any) do you estimate you will need for your next steps and for what?
TBD

Contact Information

- If someone wants to know more about this project, who should they contact? Please include name, phone number, and email, if possible.
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 - Suthasiny Sudprasert (Mohh) suthasiny.s@sgs.tu.ac.th and +66 (0) 86 375 1949
 - Kim Chatterjee kim.chatterjee@gmail.com
- Who in Bang Haan Wao (if anyone) is interested to continue working on this project? Please include name, phone number, and email, if possible.
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