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## The developmental process of public-mindedness in migrant health volunteers during a public health emergency: Evidence from Samut Sakhon, Thailand

Kanyarat Phungprayoon<sup>1\*</sup>,  Praphaphan Un-ob<sup>2</sup>, Teeradej Chairaroon<sup>2</sup>,  Teeranong Skulsri<sup>3</sup>

<sup>1</sup>Population Education Program, Faculty of Social Science and Humanities, Mahidol University, Phutthamonthon, Nakhon Pathom 73170, Thailand.

<sup>2</sup>Department of Education, Faculty of Social Science and Humanities, Mahidol University, Phutthamonthon, Nakhon Pathom 73170, Thailand.

<sup>3</sup>Institute of Population and Social Research, Mahidol University, Phutthamonthon, Nakhon Pathom 73170, Thailand.

Corresponding author: Kanyarat Phungprayoon (Email: [phkanyarat@hotmail.com](mailto:phkanyarat@hotmail.com))

### Abstract

This study explores the developmental process of public-mindedness among migrant health volunteers (MHVs) during a public health emergency in Samut Sakhon Province, Thailand. A qualitative research approach was employed, involving in-depth interviews with 15 MHVs and 13 key informants from government and non-government organizations. Data were analyzed using thematic analysis. The development of public-mindedness was found to occur in three stages: formation, development, and empowerment. This process is shaped by a combination of personal factors, including life experiences, perceived benefits of volunteerism, personal interests, and readiness in terms of career and well-being, and environmental factors such as role models, social networks, family support, religious and cultural values, and previous experiences of receiving assistance. Learning and socialization, particularly in the stages of pre-entry, training, and active duty, play a crucial role in shaping attitudes and behaviors associated with public-mindedness. The study highlights that public-mindedness among MHVs is not innate but cultivated over time through complex personal and contextual interactions. To strengthen MHV engagement, national and local health agencies should implement supportive policies and structured capacity-building systems that promote meaningful and sustained participation in both routine health service delivery and emergency response contexts.

**Keywords:** Health policy, Migrant health volunteers, Public health emergency, Public-mindedness, Samut Sakhon.

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**Transparency:** The authors confirm that the manuscript is an honest, accurate, and transparent account of the study; that no vital features of the study have been omitted; and that any discrepancies from the study as planned have been explained. This study followed all ethical practices during writing.

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## **1. Introduction**

Migrant workers represent a significant social phenomenon that reflects patterns of population mobility in the era of globalization. In Thailand, their numbers have steadily risen over the past two decades. By 2018, approximately 4.9 million foreigners resided in the country, with over 3.9 million being migrant workers from Cambodia, Laos, Myanmar, and Vietnam, accounting for more than 10% of the national workforce [1]. This dynamic is particularly evident in Samut Sakhon Province, a major industrial hub that hosts more than 9,000 factories [2]. While migrant workers contribute substantially to the country's economic growth, they continue to face structural vulnerabilities, including discrimination, limited labor rights, and insufficient access to healthcare services [3]. These challenges become even more pronounced during public health emergencies, such as infectious disease outbreaks, which demand comprehensive and adaptive risk management and response strategies [4, 5].

To address these challenges, Thailand has established a public health volunteer system that builds upon the foundation of community-based health volunteers to create a mechanism that responds to the country's ethnic diversity [6, 7]. In Samut Sakhon Province, more than 7,000 community health volunteers have been trained since 2005, taking on roles in health promotion, disease prevention, and coordination of health services [2]. Despite these efforts, the program's sustainability remains constrained by factors such as labor mobility, inconsistent participation, and a lack of continuous policy support [8]. During the COVID-19 crisis, widely regarded as a human-induced health disaster, the vital role of migrant workers became increasingly evident as they served as an essential frontline mechanism in managing public health emergencies. Migrant workers faced overlapping crises, including heightened risks of infection, unemployment, stigmatization, and social insecurity [9-11]. Amid these challenges, migrant health volunteers (MHVs) played a critical role in risk communication, outbreak surveillance, facilitating access to healthcare services, and serving as a vital bridge between migrant communities and the health system. Despite facing the same risks themselves, they chose to selflessly assist others, demonstrating a form of public-mindedness that evolves gradually through personal life experiences, as well as support from family, community, and government policies [12-14].

In addition to their roles during epidemics, the public-mindedness of migrant health volunteers (MHVs) represents vital social capital in disaster risk reduction (DRR) and the management of various health-related disasters, including emerging diseases, environmental hazards, pollution, and industrial accidents. As trusted local actors who know the area and understand community needs, MHVs provide a critical force that centralized bureaucratic systems alone cannot replace [15, 16]. The development of community health volunteers should therefore focus on enhancing their capacity to serve as early warning agents, coordinators, situation monitors, and post-disaster mental health supporters. This can be achieved through blended training approaches that combine classroom learning with scenario-based simulations, as well as by establishing formal recognition mechanisms and career pathways in the public health or humanitarian sectors to promote sustained motivation [17]. This study aims to analyze the developmental process of public-mindedness among MHVs in Samut Sakhon Province within the context of the COVID-19 crisis. It delves into the experiences, motivations, and environmental factors that play a role in volunteering, while also aiming to create a model for volunteer development that emphasizes not only health skills but also the spirit of communal assistance. This model can be further applied in other contexts, including public health, community development, and disaster management in the future.

## **2. Literature Review**

### **2.1. Concept of Volunteering/ Public-Mindedness / Volunteer**

The concept of volunteering is closely tied to the idea of public-mindedness, both of which play critical roles in civic engagement and social cohesion. According to Royal Institute [18] a volunteer spirit reflects altruistic behavior driven by joy and fulfillment, with no expectation of reward. Such acts involve a dedication of time, energy, and intellect toward societal benefit, rooted in empathy and compassion. In the Thai context, Phra Paisal Visalo emphasizes that this spirit goes beyond charity; it is a moral endeavor that uplifts one's ethical self through service to others [19].

The public mind, meanwhile, refers to an individual's civic consciousness, encompassing responsibility, cooperation, and lawful participation in community life. While volunteering often involves helping behavior, the public mind emphasizes broader civic awareness and the collective good [18].

Volunteering in Thailand can be classified into three categories [20]:

1. State-initiated volunteering – Activities coordinated by government agencies, often with minimal compensation.
2. Interest-based volunteering – Long-term engagement motivated by specific interests, such as environmental advocacy.
3. Issue- or crisis-based volunteering – Emergent responses to social problems or disasters, which strengthen social bonds and leadership skills.

### **2.2. Concept on the process of developing Public-Mindedness**

The development of a public mind is widely recognized as a civic virtue essential to building resilient societies. Khammani [21] notes that virtue originates internally, while ethics manifests outwardly. Saikaew [22] proposes that public consciousness evolves through three dimensions: intellectual understanding, emotional appreciation, and behavioral expression.

In youth development, Chattrayalak and Pleawthong [23] present a three-phase model: motivation, development, and cultivation, emphasizing experiential learning and curricular integration. Similarly, Kanchanaphan [20] identifies family, religion, culture, and life experiences as foundational influences that shape civic commitment over time.

Overall, these perspectives highlight that public-mindedness is not innate but a result of structured learning, supportive environments, and continuous engagement. These concepts form the theoretical foundation for exploring how such qualities emerge and evolve among migrant health volunteers in times of public health crises.

### **3. Materials and Methods**

This research employed document analysis and qualitative case study methodology using in-depth interviews. The study was conducted in Samut Sakhon Province between July and October 2023. The research site was purposively selected based on three criteria: (1) it has one of the largest migrant populations in Thailand (second only to Bangkok); (2) it has implemented a formal policy and established concrete systems for developing MHVs since 2005; and (3) it was heavily impacted by the COVID-19 pandemic, during which MHVs played a critical role in the province's successful response.

#### *3.1. Participants*

The study involved two groups of informants.

- (1) Fifteen MHVs were purposively selected based on expert consensus using the following inclusion criteria:
  1. Demonstrated public-mindedness through traits such as concern for the common good, altruism, social responsibility, cooperation, and a lack of expectation for personal gain;
  2. Volunteered continuously in Samut Sakhon for at least three years; and
  3. Had experience working as MHVs during crises such as epidemics or natural disasters.
- (2) Thirteen staff members from governmental and non-governmental organizations with at least three years of experience in migrant health and MHV development in Samut Sakhon.

#### *3.2. Data Collection*

Data were collected primarily through semi-structured in-depth interviews, supplemented by non-participant observation to capture behavior and body language. Open-ended questions were designed to explore motivations for becoming MHVs, personal and environmental influences on public-mindedness, perspectives on the development process of MHVs, tools and methods used, strengths and limitations, and encountered challenges. An interpreter was used during interviews with participants who could not communicate in Thai to ensure data accuracy.

#### *3.3. Data Analysis*

Content analysis was employed, following these steps: (1) Transcribe interviews verbatim and review content for understanding; (2) Categorize and code data into sub-themes, then identify key themes; (3) Analyze relationships among themes; (4) Summarize findings with direct quotes from participants; and (5) Ensure reliability through triangulation using interviews, field notes, multiple informants, and related documents.

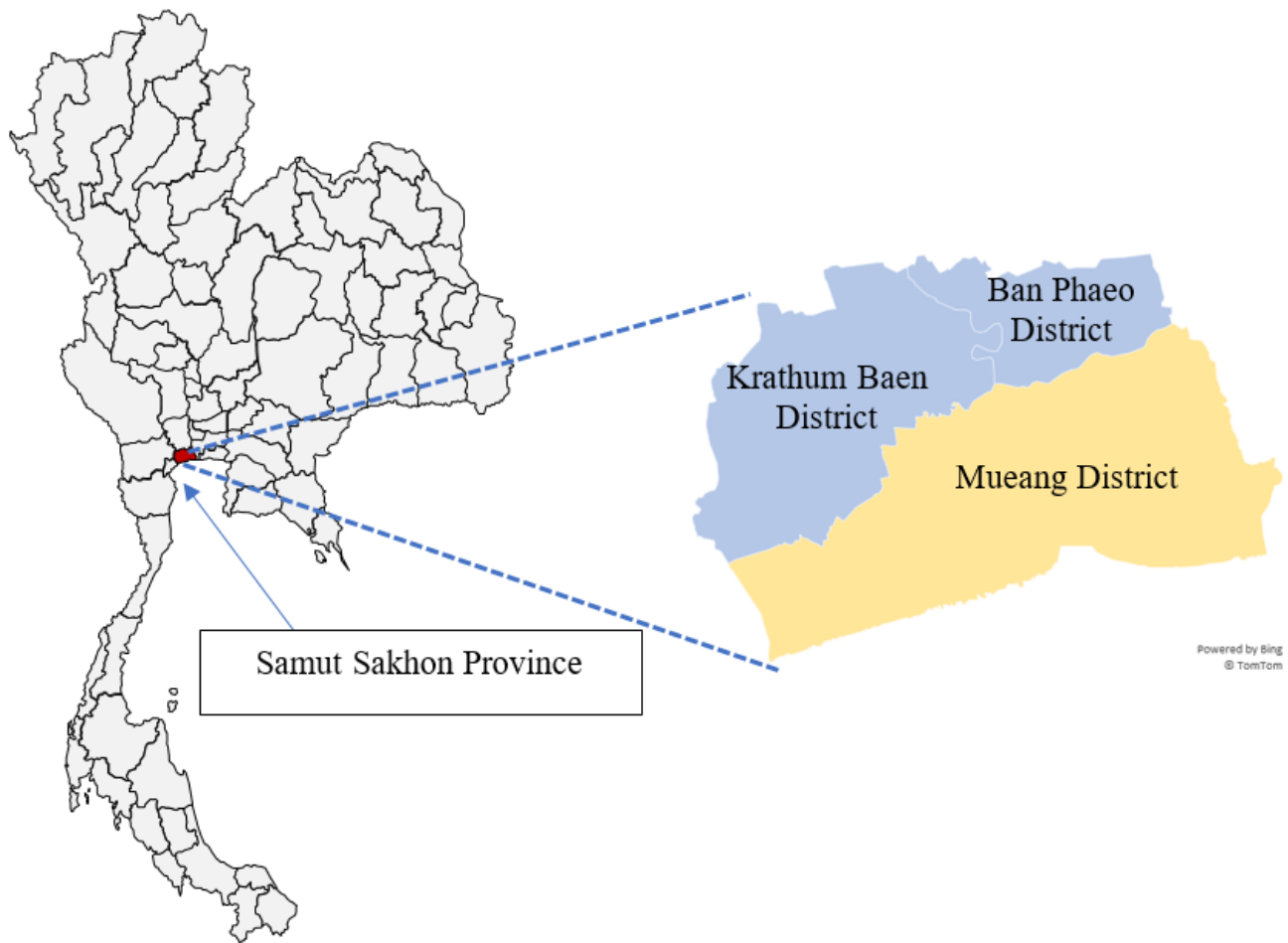
#### *3.4. Ethics*

Ethical considerations were prioritized to protect the rights and well-being of vulnerable MHV participants. Ethical approval was granted by Mahidol University's Human Research Ethics Committee (Certificate No. 2023/090.2505) following researcher training in human research ethics. The study adhered to core ethical principles: respect for persons, maximizing benefits while minimizing risks, and ensuring justice.

### **4. Results**

#### *4.1. Context of Samut Sakhon Province*

Samut Sakhon is a coastal province in central Thailand, consisting of three districts: Mueang Samut Sakhon, Krathum Bae, and Ban Phaeo. The province is well known for its seafood industry, salt farming, and more than 9,000 factories, making it a major destination for migrant workers, particularly from Myanmar, Cambodia, and Laos. In late 2020, Samut Sakhon became the epicenter of Thailand's second wave of COVID-19, with the Central Shrimp Market in Mueang District identified as the initial outbreak cluster. Therefore, this study selected Mueang District as the study area. The high population density and crowded living conditions of migrant workers accelerated the spread of the virus and posed significant challenges to disease control. Migrant Health Volunteers (MHVs) played a crucial role in helping to curb the outbreak and were a key component of the success known as the "Samut Sakhon Model" a best practice model for managing COVID-19 in provinces with large migrant populations.



**Figure 1.**  
Map of Samut Sakhon Province.

#### 4.2. General Information of Research Participants

The target group for this study was selected using purposive sampling and consists of:

- 1) Migrant Health Volunteers (MHVs): This group consists of 15 MHVs: 8 males, 5 females, and 2 individuals of alternative gender identities, aged between 26 and 57. Their duration of stay in Thailand ranges from 7 to 30 years, with most residing in the country for over a decade. All currently serve as MHVs in Tha Sai, Bang Ya Phraek, and Maha Chai subdistricts. Eight members have more than 10 years of volunteer experience, while seven have less than 10 years.
- 2) Officers from Government Agencies and Non-Governmental Organizations: This group comprises 13 individuals: 9 males, 3 females, and 1 person of alternative gender identity, aged between 27 and 64. They represent three key sectors:
  - 2.1) Provincial-level officers working closely with MHVs, including those from the Samut Sakhon Provincial Public Health Office, Samut Sakhon Hospital, and Ban Kamphra Health Promotion Hospital.
  - 2.2) Ministry of Public Health officials, such as a former WHO advisor in Thailand and officers from the Primary Health Care Division, Public Health Administration Division, and International Cooperation Office.
  - 2.3) NGO representatives, including staff from the Rak Thai Foundation, Labour Rights Promotion Network Foundation (LPN), and Proud Association.

#### 4.3. The Public-Mindedness Development Process among MHVs

The development of public-mindedness is an internal process within individuals, shaped by the interplay of personal factors, environmental influences, and the processes of learning and socialization that play a critical role, spanning the pre-entry stage, the MHVs' training stage, and the stage of performing their duties. Together, these stages contribute to the formation of public-mindedness, including its definition, components, and the recognition of the value of social engagement, ultimately leading to the adoption of public-mindedness behaviors. The three stages are as follows (Figure 2);

The development of a public mind is an internal process within individuals, shaped by the interplay of personal factors, environmental influences, and the processes of learning and socialization. This development occurs across three stages: the pre-entry stage, the stage of entering MHV training, and the stage of performing MHV duties. Together, these stages contribute to the formation of public-mindedness, including its definition, components, and the recognition of the value of social engagement, ultimately leading to the adoption of public-minded behaviors. The three stages are as follows:

- 1) The formation stage involves cultivating, training, and gradually accumulating perceptions that develop into an individual's consciousness. This process is reinforced by positive reinforcement of public-minded values and begins in

childhood. Families play a critical role during this stage by raising, teaching, and training children, often incorporating religious teachings and practices into their upbringing through verbal instruction and modeling behaviors. For example, parents who teach their children about making merit and giving alms regularly instill habits of generosity, sharing, and helping others, which serve as a foundational mindset for public service activities. Encouraging teenage children to become disciples of respected monks helps them learn and internalize religious principles that emphasize being good individuals. Religion and culture are particularly influential among Burmese migrant workers, fostering a sense of community, mutual assistance, and compassion for others. Additionally, experiencing help from others during times of hardship, whether from fellow migrant workers, employers, or Thai individuals in the same community, motivates migrant workers to pay it forward and assist others in the future. These factors, both direct and indirect, contribute to the socialization of MHVs, fostering a strong sense of public-mindedness.

2) The development stage involves organizing learning experiences related to public-mindedness both inside and outside the classroom, with a focus on learner-centered approaches. Socialization during this stage is facilitated by groups of friends, government officers, and NGOs, all of whom play crucial roles. Fellow Burmese migrant workers, often living in the same community, dormitory, or working in the same establishment, are key individuals who encourage others to join MHV training and take on MHV duties. Government officers and NGOs not only invite migrant workers to become MHVs but also provide the training needed to equip them with essential knowledge and skills. This includes topics such as communicable and non-communicable diseases, family planning, and first aid. These efforts include fostering appropriate attitudes and social roles by teaching about volunteerism, public-mindedness, traditions and culture, and relevant laws. Additionally, government officers and NGOs serve as role models by regularly visiting communities to assist migrant workers, both in normal situations and during crises such as epidemics or natural disasters. This combination of direct and indirect socialization fosters the development of public-mindedness among MHVs.

3) The empowerment stage focuses on strengthening the sustainability of public-mindedness within MHVs, ensuring it remains stable and robust, an essential factor that enables them to continue their duties. This stage begins when migrant workers take on their roles as MHVs. Witnessing fellow migrant workers in distress becomes a key motivator, fostering solidarity and a desire to help their peers overcome challenges and improve their quality of life. This stage involves indirect socialization, leading to public-minded behaviors demonstrated in various ways. Examples include delivering food to workers in quarantine during the COVID-19 pandemic, coordinating with authorities to assist workers facing financial difficulties or poor living conditions, and helping non-Thai-speaking workers access services and receive proper care. Additionally, while some MHVs initially took on the role with the hope of gaining personal benefits, such as receiving a COVID-19 vaccine, their perspective shifted after starting their duties. They recognized the value of their work in benefiting others, motivating them to continue even after achieving their initial goals.

#### *4.4. Definition and Components of Public-Mindedness among MHVs*

MHVs with over 10 years of work experience and those with less than 10 years share the same meaning: helping others voluntarily and without expecting anything in return, which reflects a selfless attitude. Meanwhile, the MHVs with less than 10 years of work experience, who are the new generation under 40 years old, also convey different meanings, including creating opportunities and giving chances to themselves and others, building social networks for themselves, and seeking skills that enhance their careers (Table 1).

**Table 1.**

Definition of public-mindedness from the perspective of MHVs.

Theme	Definition	Example of a quote
Altruism	Helping others	"...We've always been here, and while we're here, we want to contribute to the community we live in..." (migrant health volunteer aged over 40 years)  "...We helped those who were disadvantaged, such as new mothers who had no money for milk. We coordinated, inquired, and provided assistance. We made them feel at ease; at least we were able to be of some benefit to them..." (migrant health volunteer aged under 40 years)
	Voluntary action	"...The Thai people take care of us, support our health, and share their knowledge with us. If they ever need assistance, we are more than happy to help..." (migrant health volunteer aged over 40 years)  "...The Proud Association never forced anyone; everything was done voluntarily. Some tasks were truly demanding and offered no compensation, yet people still participated. It couldn't be enforced anyway..." (migrant health volunteer aged under 40 years)
	Not expecting anything in return	"...As volunteers, we understand that there's no payment involved. We contribute with our hearts..." (migrant health volunteer aged over 40 years) "...If we assumed there was no travel cost, we still went. If we were ready, we wouldn't work on Sunday; we were already there. If we had to work, we couldn't go, but if we didn't get paid, it didn't matter. We still helped..." (migrant health volunteer aged under 40 years)
Personal benefits	Creating and giving opportunities	"...Without being volunteers, accessing information would be quite difficult for us. Through volunteering, we gain knowledge and share it with others..." (migrant health volunteer aged under 40 years)
	Building a social network	"...I can't study at home, so I came here to learn. There are so many opportunities to gain knowledge, and most of the hospital staff are my teachers..." (migrant health volunteer aged under 40 years)
	Seeking skills that enhance careers	"...I had planned to become an interpreter since childhood. I studied at the Non-Formal Education Center and graduated from kindergarten. Now, I work as an interpreter at Samut Sakhon Hospital..." (migrant health volunteer aged under 40 years)

According to the experience and perception of the MHVs, public-mindedness comprises two main subcomponents: internal components, which include qualities such as sacrifice, compassion, understanding, acknowledgment of the diverse differences among service recipients, and courage; and external components, which encompass knowledge, skills, and social networks (Table 2).

**Table 2.**

Components of public-mindedness from the perspective of MHVs.

Theme	Component	Example of a quote
External component	Knowledge and skills	'...For patients who cannot speak Thai, we will assist in communicating with the public health officers or hospital staff... Burmese people are sick and don't know what to do. We will advise them to go to the hospital, or if they can't find their way, we will write a note or inform the nurses who are on the ground to contact them ...'
	Social network	'... The community supports us. Here, if anyone has a problem or something, we know everything. They call us Channel 7 and ITV (laughs) ...'
Internal component	Sacrifice	'...Normally, we work for 6 days and take Sunday off. On Sundays, we can help and make ourselves useful to others...'
	Compassion and kindness	'...I want others to be happy and see their bright, cheerful eyes. Even though I may be struggling, seeing others smile brings me happiness as well...'
	Understanding the diversity of recipients	'... If we have the heart, whenever we ask for help, we will go without hesitation. We must also choose what is convenient for them and what they need...'
	Courage	'... During COVID-19, just having a volunteer spirit is not enough. You have to be courageous too ...'

#### 4.5. Factors Related to Public-Mindedness Development of MHVs

There are two important factors: personal factors, which refer to the internal characteristics of the individual that affect public-mindedness, and environmental factors, which refer to the environment of the organization that influences public-mindedness, as follows;

#### 4.5.1. Personal Factors

Life Experiences: MHVs often face significant hardships such as political instability in Myanmar and fear of seeking care while undocumented in Thailand. These struggles foster empathy and a deep motivation to prevent others from suffering similarly, an essential trait in times of crisis.

*"...I don't want others to go through what I did. Even though I struggle, seeing others happy makes me happy too..."* (Migrant Health Volunteer)

Perceived benefits of volunteer work: Gaining health knowledge and confidence in navigating systems allows MHVs to assist others more effectively, including during health crises or disasters when access and understanding are critical.

*"...Now I'm confident. I know what food is good, I'm not afraid to go to the hospital or help others go too..."* (Migrant Health Volunteer)

Personal Interest: For some, volunteering fulfills a dream of serving as a healthcare worker. This role readiness becomes valuable in emergency scenarios, where they act as cultural and linguistic bridges.

*"...I've always wanted to be a doctor. I help people who can't speak Thai. This is what I can do to be part of that profession..."* (Migrant Health Volunteer)

Career and well-being readiness: Stability in employment and living conditions enables migrants to shift their focus toward community welfare and disaster response roles.

*"...In the beginning, I earned just 150 baht a day. It took months to save enough to send money home..."* (Migrant Health Volunteer)

#### 4.5.2. Environmental Factors

Role models: Thai public health staff and early MHVs inspired others through their visible roles in health education and community resilience, an example especially relevant during disasters.

*"...I saw them educating and helping. It inspired me to follow their example..."* (Migrant Health Volunteer)

Belief in religious and cultural principles: Burmese traditions emphasize helping others and mutual aid, forming a cultural foundation for acting in times of collective hardship, such as natural disasters or public emergencies.

*"...Our culture and religion teach us to help each other, to support those who are in need..."* (Migrant Health Volunteer)

Social networks: Close connections with interpreters, NGOs, and peers often serve as entry points to MHV training. These networks also function as key communication and mobilization channels during disasters.

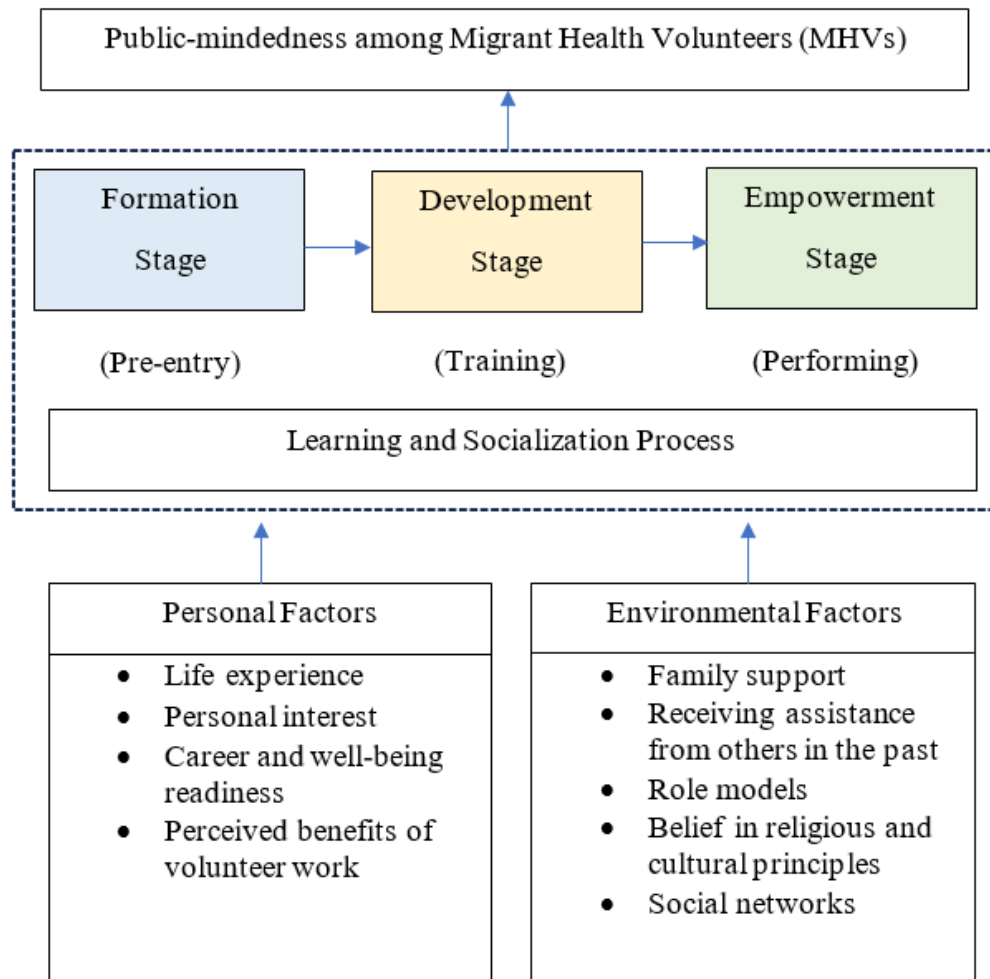
*"...A hospital interpreter invited me. I knew I'd gain knowledge to help myself and my community..."* (Migrant Health Volunteer)

Family Support: Family involvement enables MHVs to sustain volunteer work and remain active during crisis periods, including in emergency shelters or as community liaisons.

*"...My wife is also an MHV. My family supports me..."* (Migrant Health Volunteer)

Receiving assistance from others in the past: Past support from others fosters a sense of gratitude and social responsibility, motivating MHVs to step up during emergencies.

*"...When I was sick, my boss took care of me. I want to give back and help others too..."* (Migrant Health Volunteer)



**Figure 2.**  
The public-mindedness development process among migrant health volunteers.

## 5. Discussion

The development of public-mindedness among migrant health volunteers (MHVs) occurs through a tripartite process: (1) formation, (2) development, and (3) empowerment. This process is influenced by a combination of personal attributes, environmental contexts, and experiential learning during the pre-entry, training, and service phases. These stages collectively foster a nuanced understanding of public-mindedness and the significance of civic participation. Notably, MHVs, shaped by their distinctive experiences as migrant workers, conceptualize public-mindedness differently from native populations. For MHVs, public service transcends altruistic motives, functioning also as a mechanism to establish social networks, affirm individual and collective identity, and facilitate socio-cultural integration amid legal, social, and linguistic challenges. This developmental trajectory must be situated within the broader framework of disaster risk reduction (DRR) and health disaster management, particularly under the exigencies of the COVID-19 pandemic, a human-induced disaster that exposed systemic vulnerabilities [24-26]. MHVs operated as frontline agents in health communication and service provision within high-risk migrant communities, exemplifying global trends where community volunteerism constitutes a critical pillar of DRR and resilience building [27, 28]. Their engagement embodies the concept of "disaster citizenship," denoting active participation in disaster preparedness and response activities regardless of official status or formal recognition [27, 28]. This role is especially vital across diverse disaster typologies, including natural hazards such as floods and climate-related events, as well as anthropogenic crises like pandemics and industrial accidents, predominantly in migrant-dense localities where state capacity is limited. Comparative analyses with migrant volunteerism in other contexts highlight shared elements underpinning public-mindedness: voluntary service, altruistic intent without financial remuneration, and the extension of aid beyond familial circles. Volunteers commonly pursue the expansion of social capital, identity formation, and skill acquisition to enhance employment prospects [26]. Extant literature identifies multifactorial determinants of public-minded behavior, encompassing intrinsic personal factors (e.g., altruism, self-efficacy, motivation) and extrinsic environmental influences (e.g., social support, role modeling, contextual values) [29-31]. An in-depth understanding of these mechanisms within MHVs, particularly under disaster and crisis conditions, yields critical insights for strengthening community-based disaster preparedness and response frameworks. Consequently, policy interventions should institutionalize MHVs as integral actors within public health systems and local disaster governance structures to enhance the resilience and responsiveness of health disaster management.



## 6. Conclusion and Recommendation

This study reveals that migrant health volunteers (MHVs) possess unique perspectives on public-mindedness shaped by their experiences as migrant workers, which are vital in disaster risk and crisis management. For younger MHVs, public-mindedness links closely to personal development, skill building, and social network expansion, enhancing resilience and livelihood security. The COVID-19 pandemic underscored the critical role of courage and commitment in volunteer service during crises. MHVs' motivations differ from native populations, combining personal drivers and environmental supports. These findings highlight the need for targeted policies that strengthen and sustain MHVs' public-mindedness. Training should combine classroom learning with scenario-based disaster preparedness and emergency response exercises. Recognition systems and career pathways in health or humanitarian sectors can encourage long-term engagement. Moreover, these insights can guide preparedness for future health disasters such as emerging diseases or environmental health threats by promoting adaptable training, cross-sector collaboration, and formal integration of MHVs into disaster governance to build resilient, inclusive communities.

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