

CHAPTER II

LITURATURE REVIEW

This research is the study of participatory learning process implemented with mothers and supporters group to promote breastfeeding. The research is conducted through literature review and research which can be summarized as follows:

- 2.1 Breastfeeding
- 2.2 Participatory Learning (PL)
- 2.3 Persuasive Communication

2.1 Breastfeeding

Breastfeeding is recognized widely as the most vital way to nurse an infant due to its various benefits to postpartum mother, infant, family, society and country, including environment. In aspect of infants' growth and development, providing infants with breast milk gives them the most complete nutrition possible, especially during the first 6 months of life postpartum. Breast milk straight from the breast is always sterile, clean, easily to digest. It provides the mix of nutrients and antibodies necessary for each infant to thrive. Moreover, it seems to protect against a common infant respiratory infection and incidence of digestive disorder. Breastfeeding also plays a vital role in the protection from allergies during infancy. In respect of dental health, breastfeeding is noted to help the infants' teeth and jaw healthy (Neeson & May,1986). Not only are there benefits to infants, breastfeeding is also helpful to postpartum mothers' health, for

instance, the better contraction of uterus, promoting uterine involution, decreasing a risk of postpartum hemorrhage, reducing the incidence of breast and ovarian cancer, anemia, and osteoporosis. Maternal benefits also include a delay of the return of normal ovulation and menstrual cycles during lactation, reduction in the extra weight put on during pregnancy. Prolonged lactation also helps to promote the spacing of children (Unicef, 1992) Besides, it can help reduce a risk of deep vein thrombosis and prevent the urinary tract infections in mothers. Additionally, breastfeeding also provides the societal benefit to both mothers and infants. They will enjoy the emotional benefits of the very special and close relationship and bond formed through breastfeeding. The physical contact and tender touch can help infants feel more secure, warm and comfort. Mothers are empowered by their ability to provide complete nourishment to their infants. They will take pride in knowing they give their infants the very best and will be conscious of being mother. (Hoekelman et al.,1987) In term of benefits to family, breastfeeding helps save time and money to purchase, measure and mix formula. It also provides savings on healthcare cost and related time lost to care for sick infants due to the unclean formula feeding or insufficient nutrients in formula. In light of benefit to community and country, each year globally, breastfeeding helps save more than one million infants in each country from the preventable disease and illness. It provides millions of baht savings to government in importing the formula from abroad annually. Further, it reduces the rate of leaving infant after childbirth. Considered the environmental benefits when infants are breastfed, it is no waste in breastfeeding and less use of natural resources so it is better for our environment. (Unicef, 1992)

According to the various benefit of breastfeeding, World Health Organization recognized the significant decrease in breastfeeding both in developed countries and developing countries. Therefore, a joint WHO/UNICEF statement “Protecting, promoting and supporting breastfeeding was announced in 1979. To promote breastfeeding globally, WHO also stipulated the International Code on the Marketing of Breastmilk Substitutes in 1989. Further, WHO incorporated with UNICEF had also defined the maternity practices for health facilities and midwifery worldwide, the so-called “Ten Steps to Successful Breastfeeding” (WHO,1989) This written guideline was aimed to communicate with healthcare personnel to ensure that every health facility providing maternity service fully practices the guideline to encourage and support breastfeeding comprehensively. (Family Health Section, Health Department, Ministry of Public Health, 1993) Besides, in 1991, UNICEF and WHO also introduced the implementation of the Baby Friendly Hospital Initiative, BFHI (WHO,1991) in a range of countries around the world to increase the breastfeeding rate and create the better environment to support the postpartum mothers to continue breastfeeding successfully. There were twelve countries selected to be the pioneer in this program, including Thailand. To implement this program, the health facility should have a written breastfeeding policy which addresses all ten steps and protects breastfeeding. The following is Ten Steps to Successful Breastfeeding which every facility providing maternity services and care for newborn infants should have (WHO,1991):

- Step 1: Have a written breastfeeding policy that is routinely communicated to all health care staff.
- Step 2: Train all health care staff in skills necessary to implement this policy.

- Step 3: Inform all pregnant women about the benefits and management of breastfeeding.
- Step 4: Help mothers initiate breastfeeding within the first half-hour after birth.
- Step 5: Show mothers how to breastfeed and how to maintain lactation even if they should be separated from their infants.
- Step 6: Give newborn infants no food or drink other than breastmilk, unless medically indicated.
- Step 7: Practice rooming-in-allow mothers and infants to remain together 24 hours a day.
- Step 8: Encourage breastfeeding on demand.
- Step 9: Give no artificial teats or pacifiers (also called dummies or soothers) to breastfeeding infants.
- Step 10: Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

The findings of factor associated with breastfeeding from research and review show that there are several obstacles in breastfeeding. For instance, the woman's employment situation, necessity in working outside is the frequently occurred factor, which causes them to stop breastfeeding in the first three to four months postpartum (Suthida Prangsurang & Pasakorn Srithipsukho, 1999). Lack of support from community is another obstacle which resulting in being unable to give a continuous breastfeeding (Evans, Lyons & Killien, 1986). Lack of support and cooperation in breastfeeding and nursing the infants from other family members can be also an obstacle in breastfeeding (Ladawan Prateepchaikul, 1989). To conclude, all mentioned

factors can contribute to the erosion of continuous breastfeeding. Therefore, it is more likely that the mutual support from family members could influence the mother to give breastfeeding continuously.

Mutual supports from family members, husband, mother, neighbor or healthcare personnel are prominent factor in selecting the method of nursing infants. Burkhalter (cited in Wilmoth & Elder,1995) had conducted the study about exclusive breastfeeding for six months of life in Chile basing on the factor of social support. In his study, the social support factors include giving the health education to the pregnant women at least four times during antenatal care and providing the mother eight home visits by health personnel team during the first six months postpartum. The mothers who encountered any problems would be revisited every week to ensure that they could give breastfeeding continuously. The finding illustrated that 95 per cent of mother who participated this program gave exclusive breastfeeding to their babies after the first month postpartum. This finding pointed out that the supports from the health personnel could boost the longer exclusive breastfeeding duration. England also faced the problem in the erosion of breastfeeding. Example of exclusive breastfeeding in England includes the implementation of the joint breastfeeding initiative: JBI in 1988. JBI is mainly aimed to support and stipulate the steering committee to promote the exclusive breastfeeding in the communities. The result of this initiation encouraged the continuous breastfeeding and this committee continued working to promote and support breastfeeding. (Henschel & Inch, 1996).

Successful exclusive breastfeeding can be influenced by the infant-feeding information and well supports provided during antenatal period until the lactation period. The greater perinatal breastfeeding support program, the more successful breastfeeding is. Those supports are essential and helpful to postpartum mother in succesful breasfeeding can be summarized as following (Sommapat Sornchai, 1987):

1. Previous experience in breastfeeding: Clark and Harris (1979) concluded that experience in breastfeeding is a key component in successful breastfeeding. The parous mothers are generally more successful in nursing their infants with breastfeeding than the new mothers or young mothers. During the prenatal period, the more infant-feeding information, antenatal education and support provided to the pregnant women, the more successful in exclusive breastfeeding is. Mothers who lack of knowledge, information, counseling and mutual supports are less likely to initiate or continue breastfeeding (Ministry of Public Health ,1988).
2. During the antenatal period until the vulnerable postpartum period, husbands and family members are regarded as the vital supporters who encourage and motivate the exclusive breastfeeding. Therefore, they need to be educated about the infant-feeding during lactation, for instance, healthy food and nutrition for postpartum mothers. They need to motivate the mothers to nourish themselves with good food, take enough rest to produce the sufficient breast milk (Saranya Chitchareon,1994)

3. Good neighbors who experience in nursing infants should motivate and give guidance in breastfeeding.
4. Health care personnel 's support and their knowledge of breastfeeding has been recognized as important factor to successful breastfeeding
5. The mothers who are interested in acquiring the knowledge of breastfeeding can get the information via magazine, medical periodical and radio programs.

According to the study of Rattanawadee Boonprapha (1993) about the exclusive and inclusive factors associated with breastfeeding in rural setting in the north of Thailand. The target group consists of 18 mothers in the northern part. The finding shows that the degree of success in breastfeeding did not depend on the mother only, it relied on the understanding and mutual support from their husbands, relatives, friends and healthcare personnel including community. Each part plays important role to successful breastfeeding. So, the supporter should be the family members. However, it depends on their readiness and consent to be the supporter for their family. Their mutual support and assistance will help promote the continuous breastfeeding successfully.

2.2 Participatory Learning (PL)

According to Professor Nicole, Participatory Learning is regarded as the most effective method for human development in respects of knowledge, attitude and skills. The method derived from the process of meta analysis. As a result, it yields fundamental framework of participatory learning, which comprises two elements.

1. Experiential Learning
2. Group Process

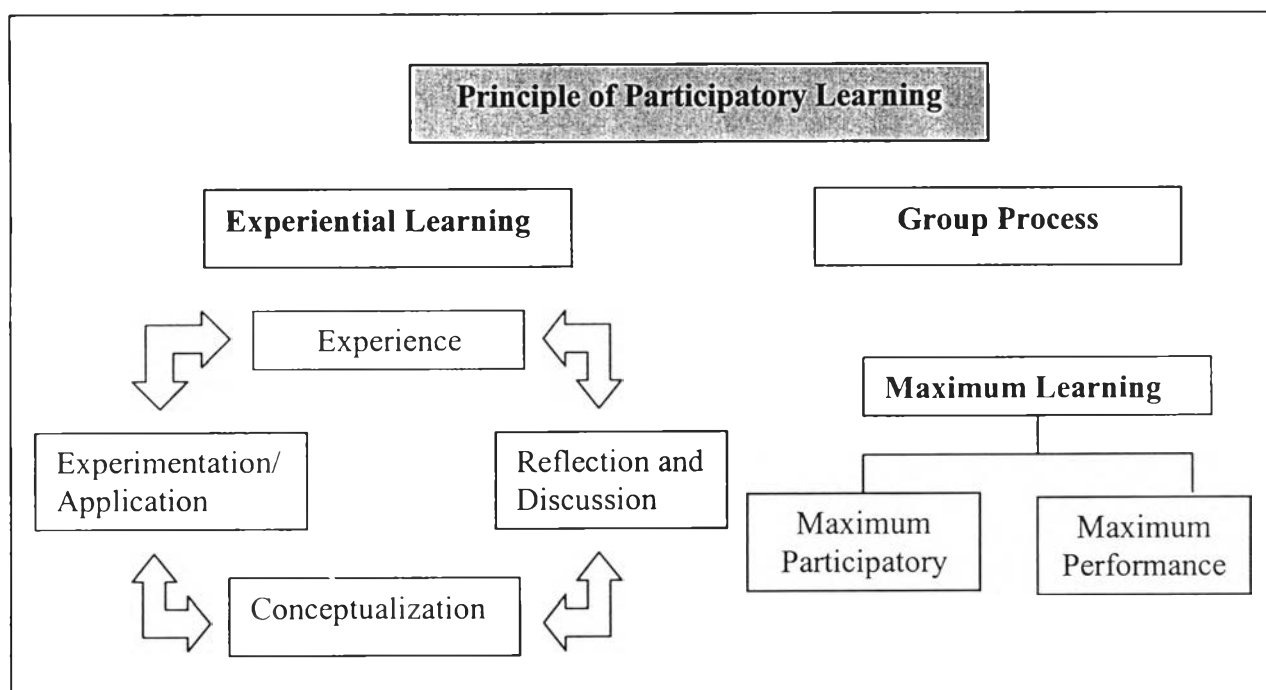


Figure 2.1 : Principle of Participatory Learning

1. Experiential Learning

Experiential learning is one kind of learning which emphasized on studying from learners' past experiences. It consists of four elements as follow (Yongyut Wongpiromsarn et. al., 1997)

- 1) Experience: instructors generally encourage learners to study and share their former experiences amongst the group. This exchange will help enhance knowledge effectively.
- 2) Reflection and discussion: Instructors encourage the learners to participate in order to share and exchange their feelings with the group's members. The instructors determine the discussion topic for learners to analyze and brainstorm so as to extend and discuss knowledge and to yield various conclusions consequently.
- 3) Understanding and Conceptualization: learner's understanding can lead to establishment of conceptualization. This could be done by learners or instructors initiating the conceptualization and completing it successfully.
- 4) Experiment/Application: learners implement course material to apply for their own practice.

In this project, the Components of Participatory Learning were applied as follow :

1. Experience	The instructors advise the learners to use their own experience to develop their knowledge.
2. Reflect and Discussion	The instructors advise the learners to have various activities to challenge their opinion, learn from their group and appreciate their opinions of their group.
3. Understanding and Conceptualization	The learners understand the concept. Either the learners started the conceptualization or the instructors continue until complete, or alternatively the instructors lead that the learners then the learners until this conceptualization is complete.
4. Experience/Application	The learners apply their knowledge to use in a similar situation from their practice.

Source : Ministry of public health : 1999

The relationship of these four components is dynamic. As a result, it is feasible to initiate from any components and then move or change to the other three factors. In essence, it does not matter which components to be an inception. Yet it is necessary that all components need to be included in the process completely.

2. Group Process

Group Process is a crucial, basic concept when being combined with the experiential learning. It will help the learners yield the best results with maximum performance and maximum participatory. (Yongyut Wongpiromsarn, et. al., 1997)

The most essential factor for learners to achieve maximum performance is work design. The instructor determines the clear activities checklist, member's roles and duty as well as clear structure between members to achieve the learning objectives in the teaching plan. Participatory learning aims to have learners developed in three respects.

(Figure 2.2)

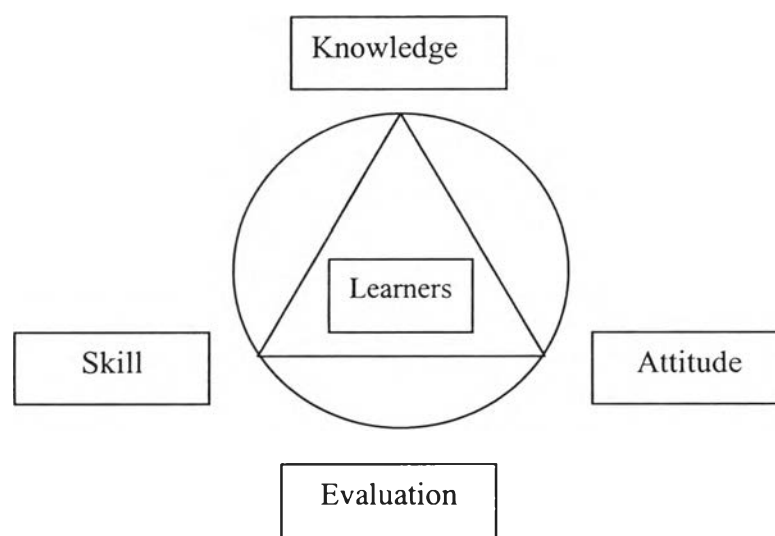


Figure 2.2 : Purpose of Participatory Learning

1. Knowledge: This is the development step to extend the current knowledge or enhance the new knowledge. Learner will go through the learning process which includes learning, understanding and applying by means of participatory learning with four components as already mentioned above. Pawinee Soontaratarawong (1998) studied the participatory learning process in consumer protection at the primary school which effect the attitude and food selection behavior of primary level students in Nakhonnayok province. It was found that participatory learning helped improve food selection habits of target student group. It also indicated that after being given the training through participatory learning, the target group had a better knowledge about consumer protection and food selection than before being trained and better than those who not received training. And the social study of Banchorn and Roongtip (1992) at the subject of life strengthening and AIDS for agricultural technical college students through the mean of participatory learning illustrated that the students possess the better understanding about AIDS after implementing such learning method.
2. Attitude: It is the adjustment or nourishment of learners' attitude in order to have their mindset for a certain subject. The right attitude will be likely to bring about decent behaviors. To create the right attitude, it includes two steps as follow:
 - 2.1 The step of creating affection: learner's emotions are created by motivation, persuasion or convincing in accordance with the

training purpose. This will lead to the conceptualization, attitude creation or adaptation. This step composes of two activities.

- 1) Motivation step: the learners will be motivated by means of media or activities to encourage the studying ambiances.
- 2) Revelation step: extend the knowledge from learner's participation, conveying their experiences, thoughts or attitude through instructor's media.

2.2 Thoughts and beliefs system management: it relies on group process to achieve the maximum participatory. The different opinions amongst members allow the learners' thought and belief system to be altered.

The study of Suparp Gleabua and Supapan Soonsinpai about the knowledge of drug preventive attitude through participatory learning process in Mathayom one students in Chonburi Province found that participatory learning affects the student's attitude in respects to develop drug awareness as a serious issues, their sympathy to those who use drugs, and self-esteem in themselves for not associating with such addiction. The attitude in those three aspects was developed better when comparing to those before program being implemented. In addition, the study of Pavinee Sunthorntharawongse (1998) also illustrated that the attitude of primary level students in Nakhonnayok about the food consumption was improved better after the participatory learning process was introduced.

3. Skill is the ability developed from practicing without previous experiences. The teaching process include two stages as follows:

3.1 Theory: In this stage, it will focus on studying the concept and learn the importance of skill from analysis, discussion and conceptualization.

3.2 Practice: In this stage, the learner will practice the theory or concept by experiment and application.

According to the study of Wantanee Chawapong (1997) about the effect of participatory learning in health promoting behavior according to the national health act for the housewives in rural setting area in Chiangmai, it was shown that the participatory learning helped promote healthcare services in rural area of Chiangmai province. A target group--a group of housewives--was provided the knowledge of healthcare and developed accordingly. In effect, their knowledge and behavior in respect of healthcare had changed for the betterment when comparing to those who not participated the program. In addition, Boosabong Jethanon and Kathawoot Farsumtia (1998) studied by participatory learning efficiency in the topic of prevention Malaria disease with a group of soldier, and found that soldier's awareness to the disease were altered--they were more aware of how serious the disease will bring about. This result is also consistent with the study of Pawinee Soontaratarawong (1998) which found that participatory learning helped improve food selection habits of target student group in Nakornnayok province.

In essence, the learning process of a person is shaped through circumstances and experiences exchanging with his or her surrounding. And in general, it begins with correct information acknowledgement through analysis of such knowledge; conceptualize his or her beliefs until creating the attitude towards that information which cause the change in behaviors. Eventually, it will create the skill and sustainable learning which regarded as the true learning.

Therefore participatory learning has been widely implemented--whether it is for educational development or healthcare purpose. The concept of this method reflects the mindset that productive learning should be done through cultivating relationship and helping each others. (Prawate Wasri, 1998). According to literature compilation and review, participatory learning would help learners to develop their knowledge, attitude and skills through sharing their experiences, brainstorming, discussion which finally leads to conceptualization. Moreover, learners not only can apply the knowledge in their daily basis appropriately but can change their attitudes into the right directions also which bring about the sustainable development in the long term. In this study, participatory learning is one implemented method to educate mothers and supporters for promoting exclusive breastfeeding. Another purpose is to provide knowledge and right attitude at nursing the infant by exclusive breastfeeding which result in successful breastfeeding continuously.

Regarding to the basic concept of participatory learning, the researcher had created a participatory learning program/ workshop for mothers and supporters in family, so that they understand and have the right mindset for breastfeeding. As a

result, not only is breastfeeding promoted, but a child is nursed constantly by breast milk.

2.3 Persuasive Communication

Brembeck & Howell (1952) stated, “Persuasion is the acute attempt to change thoughts and actions by driving human beings to achieve a certain predefined goal or the influence attempt over others”.

Scheidel (1967) stated that persuasive communication is the cooperated activity between speakers and audience, at which speakers attempt to influence over the audience’s behavior by using both verbal and body language.

Anderson (1971) defined persuasive communication as a communication process that senders attempt to find specific response from receivers.

Bettinghaus & Cody (1987) stated that persuasive communication is the attempt of one person to alter another’s beliefs, attitudes and behaviors by transmitting a certain message.

Thus, persuasive communication means communication in order to persuade, advise or suggest others to follow a certain thing. The purpose of studying the persuasion is to conceive the understanding and alter the others’ behavior so as to follow certain things through the effective communication. The effective

communication is a tool in persuasion which focusing on the target, that is, receivers, situation, messages and channel.

In conclusion, "Persuasive Communication" is the communication process from service providers to influence thoughts, attitudes, values and behaviors of service receivers through information given or evidence . Its purpose is to encourage the service receivers to decide to do exclusive breastfeeding in nursing their child constantly. In short, the instructor is responsible for convincing the target group to nurse their children through breastfeeding.

To persuade the mothers to breastfeed their children needs to convince them to agree with the instructor's training. Persuasion is one kind of motivation to do a certain thing. When persuading the mothers, not only it changes their idea but also causes them to do something additionally. The action is influenced according to the idea altered.

To establish the persuasion is to provide the knowledge of nursing a child by breastfeeding (Why needs to nurse a child by breastfeeding?), and the benefits of breastfeeding. The expected consequence is breastfeeding among the group of mothers.

In general, human being will focus on what they benefit mainly. So, to decide to one certain thing, they will consider how much the benefit they get. The mothers will not recognize the breastfeeding if they do not realize its benefit or its effect which will happen to themselves, their children, family and society. As a result, psychologies use

this assumption to summarize the characteristic of the persuasion and the pattern of the acceptance of human beings as followings.

- Human beings will accept all new ideas, concepts or thoughts as long as it does not conflict with their previous beliefs or attitude. If it is against to their own beliefs, they will close their acceptance.
- Human beings will follow the advice or suggestion as long as it is not obstructed by their physical disability or conflicted beliefs. If it is the difference only, they still keep following those advices.
- The acceptance depends on the source of advice. This can refer to the advisor. If the advisor is a specialist or an expert, it is more likely to get acceptance from the audience.
- The acceptance of human beings depends on the reliability of the advice.
- Human beings are more likely to accept the latest advice, rather than the previous ones.
- The advice will be more acceptable should act upon repeatedly.
- Human being's desire will usually overcome reasons when he or she decides to believe.
- Advice comes in a natural manner is likely to be more acceptable than the ones with conspiracy or hidden agenda.

Wirat Lapirattanagul (1997) stated that persuasion is the sender's attempt to influence the receivers' thoughts, ideas and behaviors in order to persuade or convince the receivers to act upon something or believe in some certain things. However, since

beliefs are related with actions closely, it is crucial that each belief is imposed at the subject to receivers' will. The rules for persuasive speech are as follows.

1. By motivating human being's basic desire.
2. By persuading to meet receiver's satisfactory and needs.

Therefore, in order to persuade the receivers successfully, it is essential to understand their basic needs so as to understand and motivate them in accordance appropriately. The Monroe's motivation Sequence theory (1975) asserted the five steps for persuasion as follow.

1. Attention: messages are transmitted to create receiver's attention.
2. Need: receivers are motivated to do or act upon something which can meet their desires and needs.
3. Satisfaction: receivers are willing to follow the messages which meet their satisfaction.
4. Visualization: senders transmit the message or the relevant signal to the receivers which help visualize, and motivate them to decide to take an immediate action accordingly.
5. Action: This step is the consequence of persuasion. The receiver will take any certain action according to the message received from the senders. The attitude, behavior, feelings and thought would reflect the changes caused from persuasion.

Rosenberge and Hovland (1960) stated that the result of persuasion is the changes in receivers' attitude and beliefs when responding. It also reflects the changes in the receivers' concept and awareness, emotions, feelings and behavior.

1. Changing in concept, awareness or the belief to a certain subject as well as the value we give to our surroundings. Typically, the changes in concept, awareness and belief can be detected through the speech after receiving the persuasive messages. Nonetheless, the changes in concept might not occur suddenly, yet it would happen when getting more information during a conversation. As we may realize, the sender might be unable to convince the receiver so much as they take an immediate action. But it would help change their concept and awareness, which are the basic elements for changing behavior in the future.
2. Changing in affection: It is the explicit changes of emotions such as laughing, crying, frightening and etc, which can be noticed and measured from receiver's physical and verbal response.
3. Changing in behavior: It is the explicit change of behaviors. These changes are somewhat difficult to occur. And they can be noticed by the receivers' speech and actions.

Nonetheless, whether the changes are caused from thoughts, concept, and influence over emotions or behaviors, these changes cannot be distinguished clearly or occurred independently. Somehow, there are several causes for changing in human's behaviors, yet it is certain for one thing: all changes initially occurred from changing in attitude of receivers. Further, the complexity of communication topic is one factor

effecting the changes also. In addition, the changes sometimes will not occur immediately, but take times to go over the changes. Therefore, the senders need to be aware and cautious when persuading the receiver in order to get result successfully as planned.

Alternatively, Orawan Pilanowat (1994) mentioned about persuasive communication that it would become so effective that can change people's behaviors only when senders understand the receivers' personal situation and environment condition clearly. Also the senders should concern the basic components of persuasion as follows.

1. Internal factors of receivers.
2. External factors of receivers.

1. Internal Factors of Receivers: The internal factor of receiver is the analysis to determine the target group. Whether or not the receiver will be persuaded depended on the following factors.

- 1.1 Demographics include gender, age, nationality, education, occupation.
These are the factors effecting the different learning experience and social interaction.
- 1.2 Knowledge and attitude of the receivers which relevant to communication topics.
- 1.3 The person who influence certain behavior of the receivers.

As a result, the receivers should be categorized into two groups: receivers who are expected to change behaviors; receivers who influence the changing behaviors of target groups.

2. External Factors of Receivers.

- 2.1 The internal differences of sender include sender's reliability, social status and power, relationship with receivers as well as other demographic such as ages, gender and occupation.
- 2.2 The situation analysis involved the exploring and understanding the current social situation in the aspects of historical and cultural from those communicated group.
- 2.3 The difference of media: the degree of persuasion is depending on the kind of media. The sample is to compare personal communication with public communication such as radio, television, etc.

In summary, persuasion affects changes in affection, perception, emotions, feelings as well as behavior. Such effect required to study the components of senders, receivers, the relationship of the messages, knowledge, thought as well as the changing behaviors occurred in an obvious manner. It is essential for the instructor to convince the mothers and supporters to accept the breastfeeding and continue nursing their children by using breast milk constantly.

According to this persuasive communication concept, it can be applied in a situation at which there is interaction between healthcare officers, mothers and

supporter in family. Mothers and supporters, thus, are convinced and promoted to recognize the value and benefits of breastfeeding by using media through the participatory learning process. The successful example of mothers giving exclusive breastfeeding continuously, as well as disadvantages or diseases developed in a child not nursing by breast milk could be used to persuade the mother in target group to initiate or continue breastfeeding.