

CHAPTER V

DISCUSSION AND RECOMMENDATION

5.1 Discussion

This study was a quasi-experimental design aimed to elucidate the breastfeeding promotion in the group of mothers and supporters through the participatory learning program in respects of infants nursing plan and duration for breastfeeding. The study methods began with screening the study group based on similar geographical features of the study district and characteristic of the study group. In this case, the study group consisted of 60 pregnant women and 60 supporters who were educated about the health education during pregnancy through the participatory learning program in Nayong district during June-July 2004. The control group consisted of 60 pregnant women who were educated by routine health education method in Wangwisate district, during June-July 2004.

Participatory learning program for mothers and supporters is the key element in the intervention program proposed in this study. The researcher held a workshop seminar regarding the breastfeeding promotion through the participatory learning program for health officers in charge of maternity and children care at health service center. The researcher together with the health staff also designed the participatory learning program for providing health education for mothers and supporters during

pregnancy. In addition, home visit after giving birth was also included into this program. The data was gathered both before and after program implementation conducted through the interview concerning the personal data of mothers and supporters, recording form of breastfeeding, manual script of interview and observation note. In term of qualitative data collection, the researcher had developed and adapted the interview questions, then applied to two samples whose profile similar to study group. The changes have been made until the interview script was ready for data collection.

According to the finding of breastfeeding promotion through the participatory learning program, it was found that there were three kinds of milk feeding in the group of mothers and supporters who received the health education through participatory learning program, that is, 1) Exclusive Breastfeeding 2) Breastfeeding and Formula Milk Feeding 3) Formula Milk Feeding. It showed that there were up to 38 people (63.3 per cent) in the study group nursed their infants by exclusive breastfeeding up to 4 months whereas there were only 5 people (8.3 per cent) in control group. This can be explained that participatory learning program successfully encouraged mothers and supporters to breastfeed, since the program emphasized on breastfeeding for at least 4 months.

Based on the study results,, the most crucial factor contributed to the increasing rate of exclusive breastfeeding was the participatory learning program. In Nayong District, breastfeeding rate at least 4 months continuously was 63.3 percent which was

much higher than the last survey in Nayong of 4.2 percent, and higher than national average of 3.6 percent.

Training Program by Participatory Learning Process

Participatory learning process emphasized on developing skills, cultivating attitude through experiences. It is learning by doing to call for changes and continuous development. The self-learning process was performed between learners and instructors. And such process created an extension of knowledge network, guideline and unique practices. After implementing participatory learning program to study group, it was found that the program promoted and supported breastfeeding, helping mothers and supporters to realize the values and benefit of breastfeeding. Although the knowledge content given to the study group was the same as the control group, the approach and method in delivering the content were different. The process of participatory learning program included lecture, discussion to exchange knowledge and experiences amongst members, manual for breastfeeding, demonstration of breastfeeding, as well as, workshop to practice breastfeeding for the group.

Before the program was implemented, the average score indicating knowledge and understanding of breastfeeding between study and control group was statistically similar. However, after the program was implemented, the average score of the study group was statistically higher than the control. The score reflects the results of participatory learning program, in that, the program offered to the group, knowledge and experience exchanges, as well as, understanding and insight to the issues of

breastfeeding. Likewise, the study of Suree Chantaramolee (1994) found that learning with persuasive communication could change behaviors, beliefs and attitudes so long as learners realize the value and benefits of the subject. When the mothers understand the concept and realize its value, they will initiate the breastfeeding. This is also consistent with the study of Sudaporn Vilarnγκool (1995) which studied about the effectiveness of health education through the participation of fathers in nursing their infants. It was found that the fathers who educated through participatory learning program possessed better knowledge and understanding about infants nursing than those educated with routine health education.

Home Visit was a problem evaluation stage to solve immediate problems arises from breastfeeding. Since problems that mothers and supporters encountered were different and needed prompt solutions, mothers were more likely to confront the problem during this period. Home visit approach provided such needs and allowed mothers and supporters to continuously practice breastfeeding. The advice from home-visit officers of health center not only provided the solution to solve issues regarding breastfeeding, but motivated learners to apply the knowledge, skill, attitude and positive value effectively. With satisfactory of the outcomes guaranteed, the group tends to adopt such behavior routinely since the values and benefit have been demonstrated.

Therefore, home-visit approach was a way to provide motivation, support and promote breastfeeding. As such, supportive level of breastfeeding increased at every month: the first month at fair level; the second month at good level, the third and forth

month at excellent level. This finding was consistent with the study of Sirirat Angkhanavin (2001) which studied about the effectiveness of health education involving the participation of father in nursing infants. It illustrated that fathers who received the health education would give more participation in milk feeding and cleaning in week four more than week eight and week eight is more than week four. This was also consistent with the study of Sudaporn Vilangkul (1995) and Yoavaluck Chairkhuntod (1996) which found that fathers with participatory learning program indicated the higher supportive level in following weeks after the inception of the program.

More importantly, the results of this study showed that exclusive breastfeeding rate among mother in the study group was higher than those in the control group. Factors that could have influence over the duration and the pattern feeding included participation in the participatory learning program, age, occupation, income, parity at enrollment, supporting. Based on the relevant literature review and research, it is found that 1-month postpartum period is the duration mothers and supporters is likely to encounter with problems and turn to formula milk instead. The results of this study indicated that mothers who participated in the participatory education program were 12 times more likely to exclusively breastfeed their babies for 1 month than those mothers who received routine health education program. It was also found that mothers who participated in the participatory education program were 11 times more likely to exclusively breastfeed their babies for 4 month than those mothers who received routine health education program.

It may be concluded that the participatory learning program was effective for mothers and their supporters in applying the knowledge to their practices. During home visits, mothers and supporters could solve their own problems and practice it skillfully. They were confident to continue exclusive breastfeeding at least four months. Therefore, it was useful to encourage mothers and family supporter to breastfeed through participatory learning program as a part of breastfeeding promotion. This will result in the increase of breastfeeding rate in Nayong district and the better quality of mothers and children's life.

Research Limitation

1. This research was aimed to study the effectiveness of breastfeeding promotion in mothers and supporters through participatory learning program. This group consisted of the people who received the prenatal service at the health center in Nayong district and gave birth at Nayong Hospital in Trang province. It focused on a sample group of population. As it also consisted of qualitative study in some parts which was subjected to opinion, cultural and social beliefs, including specific practices of the group, the application of the study might be limited to population similar to the studying group.

2. Although the Breastfeeding Promotion Policy of Ministry of Public Health determined to support and encourage the postpartum mothers to breastfeed exclusively at least six months, the researcher could not conduct the study for that long period due to limitation of study time frame. Thus, the researcher studied, followed up and evaluated the breastfeeding for four months. In the next step after four month period,

there is follow-up evaluation for breastfeeding in maternity and children service at health service provider.

5.2 Recommendations

The recommendations of breastfeeding through participatory learning are as follows.

1. Apply the participatory learning process as a guideline in breastfeeding promotion in the group of mothers and supporters. This program should focus on how to support and promote the breastfeeding among the mothers through participatory learning process during pregnancy, prenatal and postpartum. Since the participatory learning program is an interactive approach, the learning comes from the members' maximum participation and experience exchange. The participants would be able to develop and cultivate the knowledge and understanding in order to consistently employ in daily practices.

2. Focus on supporting, promoting and evaluation process and follow-up plan by home visit in the first 1-2 weeks postpartum, and then on monthly basis for 6 months so as to be informed of the problems arise from breastfeeding and to provide prompt action to solve such problem. Since the first 1-2 weeks until 1 month postpartum is a sensitive and critical period at which mothers need the most supports to keep the practices.

3. Establish a breast milk clinic by implementing participatory learning program to promote breastfeeding. Located in center of a community, the clinic would

act as a pilot project or supporting network for breastfeeding promotion in primary service providers, giving knowledge and understanding to mothers and supporters.

4. Home-visit: person who in charged of home visit should be the same person for the whole program, as they understand family data and keep track of the problems.

5. Apply the concept of participatory learning process to other health promotion activities to promote health care services, which consistent to health system reform policy. The health promotion activities would emphasize on community participation mainly so that community's members are a part for health behavior development.

Recommendations for further study

1. Follow up and evaluate the effects of breastfeeding promotion through the participatory learning program in the study group, for instance, rate of diseases or complication aroused by breastfeeding in mothers and their infants , rate of infection in infants, service received by mothers and infants, growth development in infants, comparing those to the control group.

2. Apply the participatory learning program to the normal Health Education for those women whose profiles are similar to the study group.

Sustainability

1. Apply the breastfeeding promoting through participatory learning program to Health Education for pregnant women of CUP at Nayong district, Trang province.

2. Emphasize on the participation of all the heads and health personnel at health service center in Nayong district in idea exchange for implementation plan of CUP in maternity and children care in respect of breastfeeding promoting through participatory learning program in the group of mothers and supporters. The result of study would be the guideline in sustainable breastfeeding promotion.