Conference Proceedings

INTERNATIONAL BUSINESS ECONOMIC TOURISM SCIENCES TECHNOLOGY HUMANITIES SOCIAL SCIENCES AND EDUCATION RESEARCH CONFERENCE

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THE 2017 ICBTS

Conference Three Themes

The International Business Tourism and Applied Sciences Research Conference
The International Education Social Sciences and Humanities Research Conference

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INTRODUCTION

We would like to welcome our colleagues to the International Business Tourism Transport Technology Social Sciences Humanities Education Research Conference. It is the seven series in 2016 of Conference on Business Tourism and Apply Sciences was held in Amsterdam. As always many members of the ICBTS 2016 community look forward to meeting, sharing and exchanging their research ideas and results in both a formal and informal setting which the conference provides. Likewise, the concept of alternating the international conference every one month on April to November between Europe and the rest of the world is now well established. This year’s event in London (UK) Paris (France) Munich (Germany) Amsterdam (Netherlands) Boston (USA) Toronto (Canada) London (United Kingdom) Zurich (Switzerland) Berlin (Germany) Tokyo (Japan) and another continues with the cultural following the very successful and productive event held in London-Zurich in August 2016 in the field of various types for international academic research conference on Business Economics Social Sciences Humanities Education and Apply Sciences. As usual The ICBTS 2016 brings together leading academics, researchers and practitioners to exchange ideas, views and the latest research in the field of Business Tourism and Apply Sciences.

The theme of this event The 2016 ICBTS International Business Tourism Social Sciences Humanities and Education Research Conference is “Opportunities and Development of Global Business Economics Social Sciences Humanities and Education” It is also represents an emerging and highly challenging area of research and practice for both academics and practitioners alike. The current industrial context is characterized by increasing global competition, decreasing product life cycles, Global Business, Tourism Development, Social Sciences Humanities Education Apply Sciences and Technology collaborative networked organizations, higher levels of uncertainties and, above all, and customers. In our view holding this event in Tokyo represents a timely opportunity for academics and researchers to explore pertinent issues surrounding Business Economics Tourism Social Sciences Humanities Education Sciences and Technology.

Potential authors were invited to submit an abstract to the International Conference Session Chairs. All abstracts were reviewed by two experts from the International review committee and final papers were further reviewed by this volume with 30 contributing authors coming from 18 countries. This book of proceedings has been organized according to following categories:

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GUIDELINES FOR BUDDHIST ORGANISATION DEVELOPMENT IN THE PRESENT THAI SOCIETY
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SOCIAL SUPPORT OF POSTPARTUM MOTHERS BASED ON FOLK MEDICINE IN NAKORNPATOM PROVINCE, THAILAND

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ABSTRACT

Yoofai is a process of taking care of postpartum mothers based on folk medicine. It is a kind of Thai folk wisdom. Its steps involve in a method of heat. The purposes of Yoofai is to help postpartum mothers' involution of uterus rehabilitate more rapidly, as well as helping better circulation of blood, having more lactiferous, pushing lochia out better, making mother's body healthier and stronger, and recovering rapidly to normal health or nearly normal health. The purposes of this study are (1) to examine social support on Yoofai of postpartum mothers based on folk medicine in Nakornpatom Province, Thailand, (2) to compare the social support on Yoofai between postpartum mothers living in urban areas and postpartum mothers living in rural areas in Nakornpatom Province, and (3) to study the preference of postpartum mothers toward Yoofai based on folk medicine in Nakornpatom Province. The sample used to study was drawn by using the purposive sampling (based on specific criteria and by application) with the number of 30 persons from the population of postpartum mothers in Nakornpatom Province. The data was gathered between March and July, 2016 by using in-depth interview and group discussion according to a questionnaire built by the researcher. The techniques used for analyzing were frequency, percentage, mean (\( \bar{x} \)) and Content Analysis. The research findings are that the social support on Yoofai of postpartum mothers based on folk medicine in Nakornpatom Province was at the high level (\( \bar{x} = 3.74 \)). More specifically, it is found that having a baby-caretaker while being Yoofai was at the highest level (\( \bar{x} = 4.40 \)) followed by being helped by mother as the second rank (\( \bar{x} = 4.30 \)). With regard to the comparison of social support on Yoofai of postpartum mothers based on folk medicine between urban areas and rural areas, it is found that the postpartum mothers in rural areas received more social support on Yoofai than the postpartum mothers in urban areas. With respect to the preference, postpartum mothers' preference toward Yoofai based on folk medicine was at the highest level (\( \bar{x} = 4.25 \)).

Keywords—Social Support on Yoofai, Yoofai of Postpartum Mothers Based on Folk Medicine, Postpartum Mothers

INTRODUCTION

Yoofai is a process of taking care of postpartum mothers based on folk medicine. It is a kind of Thai folk wisdom which has been treated since the settlement of Thailand. Its steps involve in a method of heat. The purposes of Yoofai is to help postpartum mothers' involution of uterus rehabilitate more rapidly, as well as helping better circulation of blood, having more lactiferous, pushing lochia out better, making mother's body healthier and stronger, and recovering rapidly to normal health or nearly normal health.
At present, institutions of public health service are ready to serve postpartum mothers based on folk medicine. But most of them provide the services mixed with the privilege of postpartum mothers which have served by the National Health Security Office (NHSO). [Online]. Accessed 7 December 2016. Available from http://www.nhso.go.th/ FRONTEnd/Index.aspx. Five steps of serving postpartum mothers based on folk medicine are body massage, herbal incubation or sauna, being pressed by fomentation-hot pack, being pressed by salt-pot, following instructions of self-treatment (Ministry of Public Health, 2013: 81).

Based on the data of Thai Traditional Medicine Services of Public Hospitals in Nakornpatom Province: Year 2015, there were 5,078 postpartum mothers. However, only 214 postpartum mothers (4.20%) had rehabilitation based on Thai traditional medicine (Office of Public Hospital in Nakornpatom Province, 2016: 80). It is obvious that the service does not meet the goal according to the national health consensus. Because some postpartum mothers still do not have an opportunity to get services of Yoofai even though they have a privilege to get the services. Thus, the national health consensus needs to develop Thai traditional medicine and alternative medicine in order to be a major health service system of the country in parallel with the modern medicine (Office of the National Health Commission, Ministry of Public Health, 2009: 5). Since Yoofai method is a useful type of Thai traditional medicine for taking care of postpartum mothers, social support is a major factor influencing them. Thus, the researchers were interested in examining social support on Yoofai of postpartum mothers based on folk medicine in Nakornpatom Province, Thailand

THE PURPOSES OF THE RESEARCH

1. To examine social support on Yoofai of postpartum mothers based on folk medicine in Nakornpatom Province.

2. To compare the social support on Yoofai between postpartum mothers living in urban areas and postpartum mothers living in rural areas in Nakornpatom Province.

3. To study the preference of postpartum mothers toward Yoofai based on folk medicine in Nakornpatom Province.

THE SCOPE OF THE RESEARCH

The Scope of content. This research had been studied only social support on Yoofai and preference of postpartum mothers toward Yoofai based on folk medicine in Nakornpatom Province.

The Scope of population Postpartum mothers were only the first delivery.

The Scope of time period. The data was gathered between March and July, 2016

THE RESEARCH METHODOLOGY

With regard to social support of postpartum mothers on Thai traditional medicine based on folk medicine, it was divided into 3 parts as follows:

1. Data Collection

1.1 The characteristics of societies where postpartum mothers lived had been studied from related literature, maps and geographical materials including studying their ways of life.

1.2 The sample used to study was drawn by using the simple random sampling with the number of 30 persons from the population of postpartum mothers who had been rehabilitated at Nakornpatom Hospital, Muang District and Hooi-ploo Hospital, Nakornchaisree District, Nakornpatom Province. Fifteen postpartum mothers were sampled at Nakornpatom Hospital and another fifteen postpartum mothers at Hooi-ploo Hospital. The data was gathered between March and July, 2016. For the in-depth interview and group discussion, the sample was interviewed by using a questionnaire designed by the researchers based on the concept of social support.
2. Data Analysis

With regard to data analysis, the questionnaire used to interview postpartum mothers was designed as 5 rating scales based on Likert scale: highest(5), high(4), moderate(3), low(2), lowest(1). Scores were calculated in the form of percentage (%), mean (̅) and standard deviation (SD). All the scores were tabulated. The data analysis were divided into 3 parts as follows:

2.1 The social support on Yoofai

The mean scores were as follows:
0.00-1.00 - postpartum mothers had the social support on Yoofai at the lowest level.
1.01-2.00 - postpartum mothers had the social support on Yoofai at the low level.
2.01-3.00 - postpartum mothers had the social support on Yoofai at the moderate level.
3.01-4.00 - postpartum mothers had the social support on Yoofai at the high level.
4.01-5.00 - postpartum mothers had the social support on Yoofai at the highest level.

2.2 The comparison of social support on Yoofai of postpartum mothers based on folk medicine between urban areas and rural areas was shown in number and percentage.

2.3 With respect to analyzing postpartum mothers' preference toward Yoofai based on folk medicine, the questionnaire used to interview postpartum mothers was designed as 5 rating scales based on Likert scale: highest (5), high (4), moderate (3), low (2), lowest (1). Scores were calculated in the form of percentage (%), mean (̅) and standard deviation (SD). All the scores were tabulated.

The mean scores were as follows:
0.00-1.00 - postpartum mothers had the preference toward Yoofai based on folk medicine at the lowest level.
1.01-2.00 - postpartum mothers had the preference toward Yoofai based on folk medicine at the low level.
2.01-3.00 - postpartum mothers had the preference toward Yoofai based on folk medicine at the moderate level.
3.01-4.00 - postpartum mothers had the preference toward Yoofai based on folk medicine at the high level.
4.01-5.00 - postpartum mothers had the preference toward Yoofai based on folk medicine at the highest level.

3. The techniques used for analyzing

The techniques used for analyzing were frequency, percentage (%), mean (̅), and Content Analysis.

THE RESULTS

1. Population Structure, Family and Economy

Most postpartum mothers had the ages of 20-24 years followed by 25-29 years (40.00 and 33.30%, respectively). The minimum age was 17 years; the maximum age was 35 years. Most of them lived in rural areas (73.30%). The characteristic of their household was mostly an extended family (76.70%). Half of them had adequate income, but they could not save it.

Most of the postpartum mothers graduated from high school (43.30%). Their occupation was mostly a housewife followed by an official (40.00 and 26.70%, respectively). Everyone milks their babies by themselves. Only 40% of females in their families experienced Yoofai after giving birth. The postpartum mothers received Yoofai information from people in their families the most (66.70%) followed by the Internet (53.30%). The least source of Yoofai information that the postpartum mothers received from was public health personnel (16.70%) as shown in Table 1.
Table 1
Population Structure, Family and Economy (n=30)

<table>
<thead>
<tr>
<th>Population Structure, Family and Economy</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 20 year</td>
<td>4</td>
<td>13.40</td>
</tr>
<tr>
<td>20-24 years</td>
<td>12</td>
<td>40.00</td>
</tr>
<tr>
<td>25-29 years</td>
<td>10</td>
<td>33.30</td>
</tr>
<tr>
<td>30-34 years</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>35 years and over</td>
<td>1</td>
<td>3.30</td>
</tr>
<tr>
<td>Location</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban Area</td>
<td>8</td>
<td>26.70</td>
</tr>
<tr>
<td>Rural Area</td>
<td>22</td>
<td>73.30</td>
</tr>
<tr>
<td>Characteristics of Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extended family</td>
<td>23</td>
<td>76.70</td>
</tr>
<tr>
<td>Nuclei family</td>
<td>7</td>
<td>23.30</td>
</tr>
<tr>
<td>Level of Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Education</td>
<td>9</td>
<td>30.00</td>
</tr>
<tr>
<td>Secondary Education</td>
<td>13</td>
<td>43.30</td>
</tr>
<tr>
<td>Vocational Ed, Higher Vocational Ed.</td>
<td>5</td>
<td>16.70</td>
</tr>
<tr>
<td>Bachelor Degree or higher</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agriculturalists</td>
<td>4</td>
<td>13.40</td>
</tr>
<tr>
<td>Workers</td>
<td>6</td>
<td>20.00</td>
</tr>
<tr>
<td>Officials</td>
<td>8</td>
<td>26.70</td>
</tr>
<tr>
<td>Housewives</td>
<td>12</td>
<td>40.00</td>
</tr>
<tr>
<td>Type of Feeding Child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milk the child themselves</td>
<td>30.00</td>
<td>100</td>
</tr>
<tr>
<td>Not milk the child themselves</td>
<td>0</td>
<td>00.00</td>
</tr>
<tr>
<td>Person in the Family Experienced by Yoofai at Postpartum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>12</td>
<td>40.00</td>
</tr>
<tr>
<td>no</td>
<td>18</td>
<td>60.00</td>
</tr>
<tr>
<td>Source Received Information about Yoofai at Postpartum (can choose more than 1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Person in the family</td>
<td>20</td>
<td>66.70</td>
</tr>
<tr>
<td>Internet</td>
<td>16</td>
<td>53.30</td>
</tr>
<tr>
<td>Friends</td>
<td>12</td>
<td>40.00</td>
</tr>
<tr>
<td>Public health personnel</td>
<td>3</td>
<td>16.70</td>
</tr>
</tbody>
</table>

2. The social support on Yoofai of postpartum mothers based on folk medicine

As a whole, the postpartum mothers received the social support on Yoofai based on folk medicine at the high level ($\bar{X}$= 3.74). In consideration of each support, it was found that the postpartum mothers were supported by baby-sitter while being Yoofai at the highest level ($\bar{X}$= 4.50) followed by being taken care by mother ($\bar{X}$ = 4.30). On the contrary, they were supported by public health team at the lowest level ($\bar{X}$= 1.00) as shown in Table 2.
Table 2
The Level of social support on Yoofai of postpartum mothers based on folk medicine (n=30):

<table>
<thead>
<tr>
<th>The social support on Yoofai of postpartum mothers based on folk medicine</th>
<th>□</th>
<th>SD</th>
<th>Level of social support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supported by baby-sitter while having Yoofai</td>
<td>4.50</td>
<td>0.567</td>
<td>Highest</td>
</tr>
<tr>
<td>Taken care by mother</td>
<td>4.40</td>
<td>0.523</td>
<td>Highest</td>
</tr>
<tr>
<td>Food for health provided Some people</td>
<td>4.40</td>
<td>0.527</td>
<td>Highest</td>
</tr>
<tr>
<td>Supported by members of the family</td>
<td>4.30</td>
<td>0.729</td>
<td>Highest</td>
</tr>
<tr>
<td>Expenses supported by others</td>
<td>4.10</td>
<td>0.625</td>
<td>Highest</td>
</tr>
<tr>
<td>Supported by helpers for preparing Yoofai equipment and herb</td>
<td>4.10</td>
<td>0.713</td>
<td>Highest</td>
</tr>
<tr>
<td>Taken care by husband</td>
<td>4.00</td>
<td>0.483</td>
<td>High</td>
</tr>
<tr>
<td>Taken care by mother-in-law</td>
<td>3.40</td>
<td>0.675</td>
<td>High</td>
</tr>
<tr>
<td>Received knowledge of Yoofai well</td>
<td>3.20</td>
<td>0.573</td>
<td>High</td>
</tr>
<tr>
<td>Supported and followed up by public health team</td>
<td>1.00</td>
<td>0.486</td>
<td>Lowest</td>
</tr>
<tr>
<td>Grand Mean</td>
<td>3.74</td>
<td>0.621</td>
<td>high</td>
</tr>
</tbody>
</table>

3. The comparison of social support on Yoofai of postpartum mothers based on folk medicine between urban areas and rural areas

With regard to the comparison of social support on Yoofai of postpartum mothers based on folk medicine between urban areas and rural areas, it was found that the postpartum mothers in rural areas received more social support on Yoofai than the postpartum mothers in urban areas as shown in Table3.

Table 3
The comparison of social support on Yoofai of postpartum mothers based on folk medicine between urban areas and rural areas (n=30):

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Location</th>
<th>Number of postpartum mothers</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Urban area</td>
<td>Rural area</td>
<td></td>
</tr>
<tr>
<td>Nakornpatom</td>
<td>7</td>
<td>15</td>
<td>22</td>
</tr>
<tr>
<td>Hooi-ploo</td>
<td>1</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>22</td>
<td>30</td>
</tr>
</tbody>
</table>

4. Analyzing postpartum mothers' preference toward Yoofai based on folk medicine

As a whole, postpartum mothers' preference toward Yoofai based on folk medicine was at the highest level (𝑋̅ = 4.25). More specifically, it was found that the postpartum mothers had the preference toward expectation of the advantages that they would happen to them at the highest level (𝑋̅ = 4.50) followed by the preference toward perception of the benefits of rehabilitating postpartum mothers (𝑋̅ = 4.40). That is, they knew that Yoofai method helps involution of uterus rapidly (𝑋̅ = 4.80). Moreover, it helps body to be fresh and skin-bright (𝑋̅ = 4.70), as well as helping more lactiferous (𝑋̅ = 4.60) and pushing lochia out (𝑋̅ = 4.40). The preference toward fewer complicate steps, methods and expenses was at the high level (𝑋̅ = 3.80) as shown in Table 4.

Table 4
Postpartum mothers' preference toward Yoofai based on folk medicine (n=30):

<table>
<thead>
<tr>
<th>Postpartum mothers' preference toward Yoofai based on folk medicine</th>
<th>□</th>
<th>SD</th>
<th>Level of preference</th>
</tr>
</thead>
<tbody>
<tr>
<td>The perception of the benefits of postpartum mothers' Yoofai based on folk medicine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Helping involution of uterus rapidly</td>
<td>4.80</td>
<td>0.425</td>
<td>Highest</td>
</tr>
<tr>
<td>2 Helping body to be clean, fresh, and skin-bright</td>
<td>4.70</td>
<td>0.427</td>
<td>Highest</td>
</tr>
</tbody>
</table>
As a whole, the social support on Yoofai of postpartum mothers based on folk medicine in Nakornpatom Province was at the high level (Grand mean = 3.74). More specifically, it is found that having a baby caretaker while being Yoofai was at the highest level (Grand mean = 4.40) followed by being helped by mother as the second rank (Grand mean = 4.30). On the contrary, they were supported by public health team at the lowest level (Grand mean = 1.00).

With regard to the comparison of social support on Yoofai of postpartum mothers based on folk medicine between urban areas and rural areas, it was found that the postpartum mothers in rural areas received more social support on Yoofai than the postpartum mothers in urban areas. In terms of postpartum mothers' preference toward Yoofai based on folk medicine as a whole, it is found that the postpartum mothers' preference toward Yoofai was at the highest level (Grand mean = 4.25). More specifically, the postpartum mothers had the preference toward expectation of the advantages that they would happen to them at the highest level (Grand mean = 4.50) followed by the preference toward perception of the benefits of rehabilitating postpartum mothers (Grand mean = 4.40). That is, they knew that Yoofai method helps involution of uterus rapidly (Grand mean = 4.80). Moreover, it helps body to be fresh and skin bright (Grand mean = 4.70), as well as helping more lactiferous (Grand mean = 4.60) and pushing lochia out (Grand mean = 4.40). The preference toward fewer complicate steps, methods and expenses was at the high level (Grand mean = 3.80). This is because the postpartum mothers perceived the social support on Yoofai method of folk medicine was useful for them in helping their health rehabilitation. Hence, they decided to get the services in order to rehabilitate their health at postpartum period which is in accordance with Norman, Mun, L.(1971) who states that attitude is people's feelings and opinions toward things, persons, situation, institution and any points of view in the way they accept or refuse which affect them to be ready to react or respond the same behavior at all times.

| 3. Helping more lactiferous | 4.60 | 0.412 | Highest |
| 4. Helping to push lochia out | 4.40 | 0.432 | Highest |
| 5. Helping better circulation of blood | 4.20 | 0.321 | Highest |
| 6. Helping to relieve body pain | 4.10 | 0.423 | Highest |
| 7. Good for body and mind | 4.00 | 0.438 | High |

**The preference toward fewer complicate steps and methods**

| 1. Having convenient steps and methods | 4.40 | 0.537 | Highest |
| 2. Having steps and methods in accordance with the way of life | 3.50 | 0.642 | High |
| 3. Being worthwhile with more expenses | 3.50 | 0.674 | High |

**The preference toward expectation of the advantages**

| 1. Involution of uterus rapidly | 4.60 | 0.365 | Highest |
| 2. More lactiferous | 4.50 | 0.635 | Highest |
| 3. Recover to be in good shape rapidly | 4.50 | 0.487 | Highest |
| 4. Bright skin | 4.50 | 0.578 | Highest |
| 5. Not being chilly when being in cold weather | 4.4 | 0.538 | Highest |

**CONCLUSIONS**

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Furthermore, the findings are in accordance with Prueksach Toppa (2005) who studied “the local wisdom for taking care of postpartum mothers’ health in Prasart District, Surin Province, Thailand”. He found that drinking hot water and hot herbal water, taking warm-water bath, Yoofai, and eating herbal food help rehabilitate postpartum mothers better circulation of blood and pushing lochia out rapidly. Ounprasertpong, Ladaval (2005) studied “the complementary and alternative medicine in nursing therapeutic,” she found that social support on alternative medicine affected health rehabilitation of patients. Besides the method of rehabilitating postpartum mothers provided by hospitals, taking medicine to push lochia out, taking an herbal-water bath, using a hot bag, eating food for enhancing lactiferous, drinking herbal water, and following instructions of the principle of Thai traditional medicine are alternative science which apply for rehabilitating postpartum mothers in order to recover as soon as possible. These methods have also been in accordance with Thai culture and tradition for a long time. They are good not only for postpartum mothers’ rehabilitation, but also for helping affections among family members and neighbors. Hence, Yoofai method is an outstanding characteristic of Thai folk medicine which is not excluded from families and societies where postpartum mothers live.

ACKNOWLEDGMENT

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