

INVOLVEMENT OF FATHERS IN THE BREASTFEEDING PROCESS

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ABSTRACT: The aim of the present study was to identify the involvement of fathers in the breastfeeding process in a state maternity hospital in the Central-West of Brazil. A descriptive study with a quantitative approach was carried out with the use of primary data collected by means of structured interviews, with 56 fathers accompanying their puerperal partners. There was a prevalence of fathers aged from 25 to 31 years, 20 (35.71%), married, 22 (39.29%), and with complete high school education, 18 (32.14%). All pregnant women carried out prenatal appointments and 36 (64.29%) fathers accompanied them. Twenty-three (41.07%) fathers received guidance on breastfeeding and there was a prevalence of nurses, 17 (30.36%), among the professionals who provided them with information. The main facilitating factor for fathers to help in breastfeeding was the desire to support their wives, 37 (66.08%), and the main difficult factor was the adjustment of working hours, 19 (33.93%). Being next to their partners is the way fathers found to encourage breastfeeding, and their involvement is fundamental to the success of this process.

DESCRIPTORS: Breast Feeding; Prenatal Care; Pregnant Women; Paternity.

A PARTICIPAÇÃO DO PAI NO PROCESSO DE AMAMENTAÇÃO

RESUMO: Este estudo objetivou identificar a participação do pai no processo de amamentação em uma maternidade estadual da região centro-oeste do Brasil. Pesquisa descritiva de abordagem quantitativa, utilizando-se de dados primários coletados por meio de entrevistas estruturadas, junto a 56 pais acompanhantes de suas puérperas. Predominaram pais na faixa etária de 25 a 31 anos, 20 (35,71%), casados, 22 (39,29%) e com ensino médio completo, 18 (32,14%). Todas as gestantes realizaram pré-natal e 36 (64,29%) pais as acompanharam. Receberam orientações sobre amamentação, 23 (41,07%) pais e dentre os profissionais que forneceram informações, predominou o enfermeiro 17 (30,36%). O principal fator facilitador para os pais ajudarem na amamentação foi a vontade de apoiar a esposa 37 (66,08%) e o dificultador, conciliar o horário de trabalho, 19 (33,93%). Estar junto da mulher é a maneira que os pais encontraram para favorecer a amamentação e sua participação é fundamental para o sucesso desse processo.

DESCRIPTORIOS: Aleitamento materno; Cuidado pré-natal; Gestantes; Paternidade.

PARTICIPACIÓN DEL PADRE EN EL PROCESO DE AMAMANTAMIENTO

RESUMEN: Este estudio buscó identificar la participación del padre en el proceso de amamantamiento, en maternidad estatal de región centro-oeste de Brasil. Investigación descriptiva de abordaje cuantitativo, utilizando datos primarios recogidos mediante entrevistas estructuradas realizadas a 56 padres acompañantes de sus puérperas. Predominaron padres en faja etaria de 25 a 31 años, 20 (35,71%) casados, 22 (39,29%) y con enseñanza media completa, 18 (32,14%). Todas las parturientas realizaron prenatal y 36 (64,29%) padres las acompañaron. Recibieron orientación sobre amamantamiento 23 (41,07%) padres. Entre los profesionales que brindaron información predominó el enfermero, 17 (30,36%). El principal factor facilitador para que los padres ayuden en el amamantamiento fue la voluntad de apoyar a la esposa, 37 (66,08%), y el dificultador, conciliar los horarios laborales, 19 (33,93%). Permanecer junto a la mujer es el modo que los padres encontraron para facilitar el amamantamiento, su participación es fundamental para el éxito del proceso.

DESCRIPTORIOS: Lactancia Materna; Atención Prenatal; Mujeres Embarazadas; Paternidad.

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● INTRODUCTION

Breastfeeding is the oldest and most effective feeding mode for the human species. The influence of this food on children's health is of utmost importance, is pointed to as the most appropriate feeding mode for the healthy development of infants and the only effective food able to properly meet all of the physiological needs of children under six months old⁽¹⁾.

The recommendation for exclusive breastfeeding to children in their first six months of life and up to two years old as a complement has scientific bases. There are several benefits of breastfeeding: reduction in cases of diarrhea; pneumonia; and weight gain, in addition to not offering the risk of contamination, being inexpensive, and being always ready⁽²⁾.

The involvement of fathers in breastfeeding during the first ten days after childbirth is of utmost importance for breastfeeding continuity, because of difficulties that might often occur during breastfeeding. It is essential that a bond is formed among mother-father- infant since pregnancy. The more active the presence of fathers in the preparation phase for maternity encourages mothers to breastfeed for a longer time. Therefore, the approval of fathers for breastfeeding is a key factor in the success of breastfeeding⁽³⁾.

The knowledge of fathers regarding the benefits of breastfeeding, as well as their help, understanding, and support in decision making together with mothers may be relevant items when they breastfeed their children⁽⁴⁾.

Although the involvement of men in the breastfeeding process is gaining significant importance, their feelings on the breastfeeding process of their children and what their difficulties and demands are so that they are able to help more and experience this moment in a positive way is still little known⁽⁵⁾.

Therefore, based on the relevance of the involvement of fathers in this process, the aim of the present study was to identify their involvement in the breastfeeding process along with the puerperal women admitted to a Baby Friendly Hospital in the city of Campo Grande, in the state of Mato Grosso do Sul.

● METHOD

A descriptive and exploratory study with a quantitative approach was carried out in a Maternity Hospital School in the city of Campo Grande, in the state of Mato Grosso do Sul, Brazil. The hospital unit received the distinction "Baby Friendly" and is considered a reference for maternal-infant care by the Brazilian Ministry of Health.

The participants in the study were 56 men accompanying their puerperal partners, fathers of the babies born in the maternity hospital studied. This number was determined by means of the identification of fathers in the record of the Daily Census instrument, which showed their presence as accompanying fathers during the data collection period, according to the following inclusion criteria: fathers who were present at the maternity hospital in the puerperal period and with their newborns who were under exclusive breastfeeding. Fathers under 18 years of age, indigenous, quilombolas, and those whose puerperal partners were discharged before the interview were excluded.

A structured interview applied together with the fathers by the own researcher was used for data collection, in a private place within the maternity hospital from December 17, 2015 to January 31, 2016, based on a guide with questions approaching the following variables: sociodemographic characteristics; prenatal follow-up; guidance on breastfeeding; facilitating aspects and difficulties in the involvement of fathers in the breastfeeding process; and attitudes of fathers encouraging breastfeeding.

The results were presented by means of tables and analyzed through descriptive statistics, with absolute and relative frequency discussed based on the pertinent literature.

The research project was approved by the human research ethics committee of the Federal University of Mato Grosso do Sul under protocol no. 1.371.269.

● RESULTS

Table 1 presents the sociodemographic characteristics of the population of the study. There was a prevalence of fathers aged from 25 to 31 years, 20 (35.71%), married, 22 (39.29%), followed by stable union, 21 (37.50%). Regarding the variable education level, complete high school education, 18 (32.14%), and incomplete high school education, 15 (26.79%), had the highest percentages.

Table 1 – Sociodemographic characteristics of fathers. Campo Grande, Mato Grosso do Sul, Brazil, 2016.

Variables	N	%
Age (years)		
18 to 24	19	33.93
25 to 31	20	35.71
32 to 38	9	16.07
39 to 46	8	14.29
Marital status		
Married	22	39.29
Stable union	21	37.50
Single	13	23.21
Education level		
No education	1	1.79
Complete elementary school	6	10.71
Incomplete elementary school	10	17.85
Complete high school	18	32.14
Incomplete high school	15	26.79
Complete higher education	1	1.79
Incomplete higher education	5	8.93

Table 2 shows that, in total, 56 (100%) puerperal women carried out prenatal care and the majority, 46 (82.14%), sought care in the public healthcare service and more than half were accompanied to their prenatal appointments by their partners, 36 (64.29%). Regarding guidance provided on breastfeeding, more than half of the fathers, 33 (58.93%), did not receive any guidance, and among those who received guidance, 23 (41.07%), the majority, 17 (73.21%), evaluated it as excellent. The professionals who most provided guidance were nurses, 17 (30.36%), followed by pediatricians, 13 (23.21%), and obstetricians, 10 (17.86%).

Table 2 – Distribution of puerperal women who carried out prenatal follow-up and guidance received by their partners on breastfeeding. Campo Grande, Mato Grosso do Sul, Brazil, 2016. (continues)

Variables	N	%
Prenatal		
Yes	56	100
Healthcare service		
Public	46	82.14
Private	10	17.86
Prenatal follow-up by the partner		
Yes	36	64.29
No	20	35.71

Received guidance		
No	33	58.93
Yes	23	41.07
Evaluation of the guidance		
Excellent	17	73.91
Good	4	17.40
Regular	2	8.69
Bad	0	0
Professional who provided guidance*		
Nurse	17	30.36
Pediatrician	13	23.21
Obstetrician	10	17.86
Professional of the milk bank	6	10.71
Nursing technician	5	8.93
Others	3	5.36
Nursing student	2	3.57

*Fathers who had more than one response

Regarding the aspects reported by fathers that facilitated their involvement in breastfeeding, supporting their wives was considered as the main aspect, 37 (66.08%), and adjustment to working hours, 19 (33.93%), as the most difficulty aspect, followed by difficulty in remaining awake during the night, 11 (19.64%). As attitudes encouraging breastfeeding, there was a prevalence of the aspect being able to be next to the partners during the breastfeeding process, 31 (55.37%), and helping them to place the newborn in their arms, 28 (50.02%), as shown in Table 3.

Table 3 – Facilitating aspects and difficulties in the involvement of fathers and their attitudes to encourage breastfeeding. Campo Grande, Mato Grosso do Sul, Brazil, 2016.

Variables	N	%
Facilitating aspects*		
Support to the wife	37	66.08
Involvement with the mother and child	18	32.15
Knowledge on the topic	7	12.50
Having more free time	4	7.15
Difficult aspects*		
Adjustment of working hours	19	33.93
Remaining awake during the night	11	19.64
Lack of information	9	16.07
Fear	1	1.79
Did not report difficulties	16	28.57
Encouraging attitudes*		
Being close	31	55.37
Placing them in the mother's arms	28	50.02
Encouraging breastfeeding	22	39.29
Picking them from the cradle	16	28.59
Others	2	3.57

*Fathers that had more than one response

● DISCUSSION

The results of the present study showed a higher percentage of fathers aged from 25 to 31 years, which is similar to a study carried out in the Clinics Hospital of Uberlândia in the state of Minas Gerais, in which there was a prevalence of fathers aged between 26 and 39 years. This suggests that young adult fathers have more knowledge on breastfeeding⁽⁶⁾.

The presence of a steady partner encourages mothers extend their lactation period⁽⁷⁾. The present study showed that this characteristic must be considered a positive element, because most fathers reported being married, followed by those in a stable union.

Regarding education level, complete and incomplete high school education presented the highest percentages, which are findings similar to a study conducted in the Regional Hospital of Ceilândia in the Federal District⁽⁸⁾. Higher education level of fathers leads to the search for information that may help their partners and children in the breastfeeding process⁽⁶⁾.

With the purpose of increasing access to and improvement of prenatal quality, the implementation of good practice in childbirth and birth care, including the right of women to choose their companions in childbirth, the Rede Cegonha⁽⁹⁾ was launched in 2011 by the Brazilian Health Ministry.

This increase in access may have contributed so that all pregnant women in this study could carry out their prenatal appointments, corroborating a study conducted in the city of Pelotas in the state of Rio Grande do Sul, whose result was 97.90%⁽¹⁰⁾. The perception of pregnant women with regard to prenatal care is seen as an fundamental care in this period, especially for the child's health and their own health care⁽¹¹⁾.

In a qualitative study involving puerperal women, all of them reported having received care in private hospitals⁽¹²⁾, contradicting the present study, in which there was a prevalence of a search for care in public healthcare services.

A strategy adopted by the federal government was the implementation of the prenatal care for partners, whose aim is providing men with an opportunity to take care of their own health while taking their partners to prenatal appointments, with the purpose of generating healthy affective bonds and quality of life for the whole family⁽¹³⁾.

When questioned about paternal accompaniment during prenatal appointments, 36 (64.29%) reported that they accompanied their partners, which is an attitude that shows an important change in the behavior of fathers. An opposite situation was found in a study carried out in the city of Cáceres in the state of Mato Grosso⁽¹⁴⁾, whose rates reached 23 (76%) of the fathers, that is, more than half did not accompany their partners to prenatal appointments.

In a study conducted in the city of Dourados in the state of Mato Grosso, all fathers reported being pleased at being able to accompany their partners to prenatal appointments, which enables a greater knowledge about changes in pregnancy, reducing the anguish caused by doubts on how to care for their children⁽¹⁵⁾.

The inclusion of fathers in educative activities during the prenatal and puerperium periods are fundamental, because baby care is the task of the couple. When fathers are encouraged and guided to take care of their children, they will help mothers to overcome obstacles that may arise in the breastfeeding process⁽¹⁶⁾. In the present study, it was found that more than half of the parents did not receive guidance on breastfeeding. However, another study showed that only one-third (34.7%) did not receive guidance⁽⁴⁾.

In 2004, the Ministry of Health launched the *Política Nacional de Atenção Integral à Saúde da Mulher* (National Policy for Women's Health Comprehensive Care – PNAISM, as per its acronym in Portuguese), whose proposal is to encourage the involvement of nursing in actions for women's health, especially in prenatal care, including educative actions that place women as active individuals in their health care⁽¹⁷⁾.

The professionals who most provided guidance to fathers were nurses, followed by pediatricians and obstetricians, and it was evaluated as excellent. Health institutions must prepare their professionals

involved with the breastfeeding process, so that they can improve the quality of care provided to support and welcome couples⁽¹⁸⁾.

Based on facilitating aspects in the involvement of fathers in breastfeeding, support to wives was pointed to as the main aspect. Another study showed that fathers proved to be involved in this phase, acting directly in situations favorable to the act of breastfeeding⁽³⁾. However, adjusting working hours and remaining awake during the night were pointed to as the main difficult aspects, which were findings similar to those reported by fathers in a study carried out in the city of Bauru in the state of São Paulo⁽¹⁹⁾.

As a strategy to increase and encourage the involvement of fathers in this process, the *Política Nacional Integrada para a Primeira Infância* (Integrated National Policy for Early Childhood) was created, modifying the extension of paternity leave from five to twenty days. When ensuring the involvement of fathers in their children's first moments of life, paternal presence becomes a right of the child and enables men and women to share care tasks with their children⁽²⁰⁾.

It was found that being next to partners and placing the child in the arms of the mother are attitudes that the fathers interviewed found to encourage breastfeeding. Similar attitudes were found in a study carried out with fathers who were users of the Brazilian Unified Health System in the East of the city of Goiânia, whose fathers reported a disposition to help their partners in the breastfeeding period, cherishing their children when they were crying and placing them in the arms of their mothers for breastfeeding⁽²¹⁾.

● CONCLUSIONS

The present study showed a prevalence of fathers aged between 25 and 31 years, married, and with complete high school education. All pregnant women carried out prenatal appointments and most of them were accompanied by their partners, which is an attitude that will favor the involvement of fathers in the breastfeeding process.

The number of fathers who did not receive guidance on breastfeeding is worrying, and when received, nurses were the most mentioned professionals. The involvement of professionals responsible for prenatal care is fundamental in this process of guidance and paternal inclusion. Further investment in educative actions is required, and fathers must be led and encouraged to participate more in this process.

Being next to their partners is the way fathers found to encourage breastfeeding, and their involvement is essential for the success of this process.

This study presented limitations, because it was only possible to identify fathers whose names were recorded in the Daily Census instrument. Therefore, more accuracy in the completion of the data in the healthcare unit is recommended, which will favor future studies.

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