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PERCEPTION AND SUPPORT GIVEN BY FATHER IN MAINTENANCE OF BREASTFEEDING

PERCEPÇÃO E APOIO DISPENSADO PELO PAI NA MANUTENÇÃO DO ALEITAMENTO MATERNO

PERCEPCIÓN Y APOYO DADO POR EL PADRE EN EL MANTENIMIENTO DE LA LACTANCIA MATERNA

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ABSTRACT

Objective: to analyze the participation of the father during breastfeeding period, as well as their perception of the importance of support at that stage. **Method:** cross-sectional descriptive study with a qualitative approach, with 20 parents of children participating between three months old and one year old who are experiencing breastfeeding of their children. Data analysis was based on the qualitative analysis. The research project was approved by the Research Ethics Committee, protocol 091202/10. **Results:** the study highlighted the following reporting units: baby care, home care and care of the mother's diet. Regarding to knowledge about breastfeeding, we realized the following reporting units: health promotion and disease prevention, providing mother/child bond, promoting better development and growth. **Conclusion:** we emphasize that the father's support in maintaining breastfeeding allows the promotion of baby's health and, consequently, greater interaction between father/mother/child. **Descriptors:** Breastfeeding; Father-Child Interaction; Father's Behavior.

RESUMO

Objetivo: analisar a participação do pai durante o período de amamentação, bem como sua percepção sobre a importância do apoio nessa fase. **Método:** estudo descritivo transversal, com abordagem qualitativa, no qual participaram 20 pais de crianças entre os três meses de vida e um ano de idade que vivenciaram a experiência da amamentação dos filhos. A análise dos dados fundamentou-se na Análise de Conteúdo Temática. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa, protocolo 091202/10. **Resultados:** foram destacadas as seguintes unidades de registro: cuidados com o bebê, cuidados com a casa e cuidados com a alimentação da mãe. No tocante ao conhecimento sobre o aleitamento materno, percebemos as unidades de registro: promoção da saúde e prevenção de doenças, proporciona vínculo mãe/filho, promove melhor desenvolvimento e crescimento. **Conclusão:** ressaltamos que o apoio do pai na manutenção do aleitamento materno possibilita a promoção da saúde do bebê e, consequentemente, uma interação maior entre pai/mãe/filho. **Descritores:** Aleitamento Materno; Interação Pai-Filho; Comportamento Paterno.

RESUMEN

Objetivo: analizar la participación del padre durante el período de amamantar, así como su percepción sobre la importancia del apoyo en esa fase. **Método:** estudio descriptivo transversal, con enfoque cualitativo, en el cual participaron 20 padres de niños entre tres meses de vida y un año de edad que vivieron la experiencia de la amamantada de los hijos. El análisis de los datos se fundamentó en el Análisis de Contenido Temático. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación, protocolo 091202/10. **Resultados:** fueron destacadas las siguientes unidades de registro: cuidados con el bebé, cuidados con la casa y cuidados con la alimentación de la madre. En lo referente al conocimiento sobre la lactancia materna, percibimos las unidades de registro: promoción de la salud y prevención de enfermedades, proporciona vínculo madre/hijo, promueve mejor desarrollo y crecimiento. **Conclusión:** resaltamos que el apoyo del padre en El mantenimiento de la lactancia materna posibilita la promoción de la salud del bebé y, consequentemente, una interacción mayor entre padre/madre/hijo. **Descriptor:** Lactancia Materna; Interacción Padre-Hijo; Comportamiento Paterno.

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INTRODUCTION

Breast milk has all the nutrients needed for healthy growth and development of a child. The benefits are many for the mother, infant and society as a whole; it is considered the essential food for infants in the first six months of life. The World Health Organization (WHO) recommends the practice of exclusive breastfeeding (EBF) for six months and thereafter the introduction of complementary foods up to two years old.¹

The exclusive breastfeeding rate in general in the world is 37%. In Brazil, only 41% of babies under six months are exclusively breastfed. The rate is similar to the world average, calculated by WHO in less than 40%, but is well below the ideal percentage defined by the organization, which is between 90% and 100% of children in this age group.²

Among the benefits for the mother, there is a reduction of postpartum amenorrhea, low cost and increasing the bond between mother and child. For the child, it is also important for protection against allergic and chronic diseases, reducing possibility of obesity, good cognitive development, among others; and for society, the low cost and the reduction of hospitalizations.³

Regarding to nursing care for the promotion of breastfeeding, it is recommended the nurses' work in nursing consultations during prenatal, postpartum and child care, guiding and encouraging mothers to the maintenance of exclusive breastfeeding until the sixth month of age. The father/partner must also be included in care, since he can be an important ally and partner in breastfeeding. The fact that the health professional invite the man to accompany the pregnant woman in the meetings and individual consultations can bring confidence, self-esteem and emotional bonding opportunity with the child, certainly minimizing insecurity and common concern to future parents.

Nurses play an important role in the promotion of breastfeeding, since the maintenance of exclusive breastfeeding is strongly influenced by its guidelines.⁴

The interest for this study was from the observation during the stage in public health, the absence of parents in monitoring of prenatal and child care, in addition to nursing mothers complaining about the lack

of support for breastfeeding. There is little incentive initiatives for paternal support lactation. Initiatives to guide and strengthen exclusive breastfeeding does not include the father and but he can play a decisive role for the maintenance of lactation.

However, the breastfeeding process, while simple, is one of the great challenges of the entire health care team. Only information or guidance is not enough for women to succeed in their breastfeeding experience or be motivated to do it. It is necessary to give concrete conditions, using strategies for promotion. Therefore, breastfeeding should be seen as a priority action to improve the health of children and their families.

Lot of things are heard about exclusive breastfeeding, its importance and encouragement by the media. But where is the father of the child being breastfed? How is the support of parents in breastfeeding? How parents realize the importance of this moment? What is their knowledge about the benefits of breastfeeding?

Approaching these issues are necessary to reflect on the father's role in breastfeeding, contributing to the strengthening of family ties and gender equality, showing parents that they are also important in this so special period of the couple's life and even more special for the one that was generated.

This study aims to contribute the support of parents, to assume active responsibility in caring for the child; encouraging nurses and other health professionals in father's recognition as a major influence in the breastfeeding process, as they are the practice stimulating agent and significant source of support for women. Therefore, the nurse has to motivate and enhance the father's participation in the breastfeeding period during health education activities held in meetings with pregnant or nursing visits, and thus contributing to the success in breastfeeding.

OBJECTIVE

- To analyze the participation of the fathers during breastfeeding period, as well as their perception of the importance of supporting at that stage.

METHODOLOGY

Cross-sectional study with a qualitative approach. The study subjects were 20

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parents of children between three months old and one year old who have experienced breastfeeding of their children. Parents who lived with his partner and his son who were breastfed were included. Women who had any kind of disease that prevented breastfeeding were excluded.

The identification and contact with the participant was through the Family Health Strategy team. We used the convenience sampling. Seven of the participants were identified in the unit when accompanied his partner and son on a routine visit. The others were identified by the mother awaiting childcare consultation, at the time we scheduled a home visit for the interview with the parents. We emphasize that all interviews were conducted in previously scheduled time at home with the participant.

Data were collected in September and October 2013 in the city of Chorozinho in the state of Ceará/CE and ended after reaching saturation of the reports. We used semi-structured interviews, recorded and transcribed in full. Data analysis was based on the analysis of Bardin thematic content and categorization criteria was the logical-semantic (thematic categories).⁵

The study was approved by the Ethics Committee in Research of the Institution with the number 091202/10, according to the Declaration of Helsinki as revised in 2000 and Resolution Number 466/12 of the National Health Council.

Each participant signed a Term of Informed Consent (TCLE), being informed about the study objectives. To ensure anonymity, participants in the reports are

Table 1. Description of the thematic category of father’s support given for the mother during breastfeeding. Fortaleza- CE, 2013.

Reporting units	Sub-units	n
Baby care	Hygiene	18
	He stays with the baby so the mother can rest	10
Taking care of the house		4
Mother’s nutrition care		5

The activities described in Table 1 were identified by parents as a way to support the mother during breastfeeding. Baby care and taking care of the house are actions that demonstrate the need to provide more time for the mother. In addition, we also observed the zeal with mother’s nutrition, which is necessary since their nutritional status will influence the production of milk.

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shown with the letter “P” followed by the Arabic numeral identification. We emphasize that the data collected were used only for the purpose of this study.

RESULTS

In order to contribute to the analysis of the speeches of the study subjects, we present the characterization. They were parents from 17 and 49 years old. Two of them were adolescents. Most of them were adults from 20 to 40 years old. As for education, fifteen of the respondents completed high school, four completed elementary school and only one is attending university. With regard to marital status, all live and reside with their families, ten married and ten in a stable relationship, enabling greater support and bond with the child. With regard to monthly income, the survey reveals that most of them gains from one to three minimum wages.

In a second moment, we analyzed the speeches of participants from the interviews, which were transcribed in full by the researcher, being subjected to exhaustive reading. Based on the analysis, interpretation and synthesis of content, and to enable data analysis, the following themes were developed: the paternal support during breastfeeding; parental knowledge about the benefits of breastfeeding; and the importance of paternal support during breastfeeding.

The following reports exemplify this thematic category:

I try to reassure, soothe her, do not stress, agreement and put the baby in the chest. P5
I safe the baby to burp, for her to rest. P6

Table 2. Description of thematic category of father’s knowledge about the benefits of breastfeeding, Fortaleza - CE, 2013.

Reporting Unit	n
Health promotion and disease prevention	19
Providing mother/son bond	5
Promoting better development and growth	11

Knowledge about the benefits of breastfeeding was described in a superficial and simplistic way. We did not observe the details of the several benefits by the breast milk. The answers were simple and short. Parents recognize that breast milk protects against some diseases, however, they were unable to exemplify them as following reports:

It immunizes various diseases and approaches the mother. P2
It prevents diseases, makes a healthy child. P8

The nutrients of the milk have been reported. However, they did not specify what kinds. These nutrients were recognized as essential for proper growth

and development of children, of which some parents recognize their importance:

It serves as a complete food, it means that even 06 months of life the baby needs no other food. P12
It is the exclusive food which is of great importance. P18

Two parents also highlighted the establishment of a connection in the mother-child bond by the moment of greatest contact, exchange of glances and attachment:

Every day we get more attached. P9
Let the child more beloved, healthier. P8

Table 3. Description of the thematic category of the importance of father’s support during breastfeeding. Fortaleza - CE, 2013.

Reporting unit	n
Father-mother-son Bond	18
Father’s support	10
Preventing diseases (cancer)	2

When asked them if they considered important their support to the mother, they recognize this importance highlighting the need of father-mother-child bond. These data demonstrate the awareness and the role of parents, as expressed:

It is important because it protects the child from everything. P12
It is of fundamental importance because the psychological part of the mother is not ready. P16.

Two parents reported that their support in breastfeeding maintenance prevents cancer in his wife, according to the report:

I believe it is good for her and she has to complete the cycle and protects against cancer. P10

DISCUSSION

The way people face life and the results obtained is the consequence of a combination of biological and cultural factors, and it is related to the family structure.⁶ Therefore, the family organization and the father’s attitude toward the mother-child can greatly influence breastfeeding.

In maternal perspective, the presence of the father is the most relevant support for breastfeeding. It is highlighted as one of the

reasons for the increase in incidence and prevalence, and influence the woman’s decision to breastfeed and contribute to its continuity. A study also shows that parental knowledge about the benefits of breastfeeding has potential to support breastfeeding.⁶

Regarding the nutritional value of breast milk,as major nutrients there are the carbohydrates, fats, proteins, vitamins, minerals and iron.³

Breastfeeding is nutritionally complete with all the necessary nutrients for the exclusive feeding in the first six months of life and complementary until two years old. Human milk is rich in essential fatty acids, essential for the growth of the brain and the retina, which is probably one of the justifications for the cognitive advantages and vision.⁷

Breastfeeding is considered one of the fundamental pillars for the promotion and protection of children’s health worldwide. The superiority of human milk as a food source, protection against diseases and affection make the world experts recommend exclusive breastfeeding for six

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months after birth and supplemented by the second year of a child’s life.⁸

The nutrient constituents of human milk create the conditions for a different growth of what happens with artificial milk (growth optimization) with greater weight gain in the first months of life and a relative decrease in the following months. This difference in growth seen in the first year of life should be seen as the model, the ideal standard, not a defect, as it has happened.⁹

It is worth noting that the feeding time is individual. There are babies who are content quickly, others take longer, so it is necessary to leave them free to be satisfied. Thus, breast milk quenches thirst, feed, nurses, immunize, it is natural, it has no cost, it helps in facial development, always at the ideal temperature, hygienic and can be taken anywhere.

The bond between mother and child can be easily explained. The basic processes involved in motherhood as strong stimulus related to pregnancy, childbirth and breastfeeding would trigger a series of behavioral responses, contributing to the formation of a positive bond. In addition, it is known that the newborn has features that facilitate this relationship, especially through breastfeeding, where there is direct contact with the mother through the look, calling, touch and body heat in the dyad, nothing explaining the same stimulations with parents.¹⁰

Reading the lines shown above allows us to identify the awareness of parents about the benefits of breastfeeding.

Regarding the relationship the participant between breastfeeding and cancer, a study claims that breastfeeding reduces the risk of women developing breast cancer. Research indicate that breastfeeding from four to 12 months reduces by 11% the incidence of the disease, compared to mothers who breastfed for three months or less and that in a period of 24 months the incidence falls to 25%,¹¹ There is also data showing that women who were breastfed have a lower 25% risk of developing the disease than women who had fed by bottle.

At a time when the practicality speaks louder, the mother benefits from giving the breast, it does not need to leave home in search of special milk, bottles, actually, she does not need to go to the kitchen or prepare milk, boil bottle, hit temperature or the preparation and still question can if it

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is sour or spoiled. It is just put the baby to her chest and he will be satisfied with the nutrients and maternal love.

The father may also contribute getting involved in the basic care of their children, such as hygiene, nutrition and sleep, keeping a closer physical contact and increasing the bond with the family. It is more than just supporting this relationship, he acts in his own way, ensuring child protection, but with a different balance. The mother tends to calm the child when is agitated and distressed, while the father tends to place the child in situations where is forced to confront the surrounding environment, providing protection.¹¹

With it, it can be discussed the influence of cultural aspects in the bond between father and child, essential for the proper development of the newborn. Therefore, it is clear that culture has a very important role with regard to the care and parental responsibility, as they are encouraged and strengthened male behavior in the care of infants. Through these testimonials, we can realize the importance of parental support in the maintenance of breastfeeding, providing rest periods for the mother, in addition to increasing the bond in the family.

FINAL REMARKS

This study focused on issues related to paternal support of breastfeeding, allowed us to identify changes in parental attitudes that have contributed not only to the practice of breastfeeding, but mainly to the parent/mother/son interaction. In the men under study, we realized the interest in experiencing all moments of the pregnancy, enabling the transformation of social relationships of gender and strengthen bonding.

Men/parents interviewed were users of the Unified Health System, mean age of 20-40 years old, ranging in level of education and average household income of 2.9 minimum wages. However, these socioeconomic and cultural characteristics were not presented as a cause of difficulties or impeding of breastfeeding. According to the fathers, the mos difficult their participation in the breastfeeding period is the working hours that according to them, it was at least 40 hours per week, requiring long time absent from home, where they could only be helping and physically

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attending after arriving from work and/or on weekends.

According to the research, all had experiences with breastfeeding of previous children, and they explained how this experience influenced the decision to encourage women to breastfeed this child, indicating a change in the father's role in the family context.

All parents were unanimous in saying that breastfeeding was essential for the proper development of the child, encouraging and even charging the wife that the child was breastfed. It was noted in their speeches the importance of the father's influence at the beginning and maintenance of breastfeeding.

As in the reproduced speeches, many of the fathers reported having accompanied the monitoring of the health of the woman and baby in prenatal care; expressed interest and satisfaction in being able to care for their children and to have a more effective participation in family life. They were present in breastfeeding by supporting and encouraging the woman, caring the wife and son, in the division of household chores, helping to position the child to the mother's womb, in the care of other and current children through bath, sleep, games, trips and participating in the consultations related to health.

Fatherhood perceived in the statements of the respondents indicated that the family relationship has qualified the meaning of fatherhood. That is, with the arrival of the child, the couple becomes a nuclear family, which makes them appear new responsibilities. Collaborating in baby caregiver tasks allows the "new father" not only traditional feelings of fatherhood but also to realize the feelings associated with the active participant role.

It is emphasized the need to include the father, actively guiding him and encouraging him to participate in the tasks to support his wife and of child caregiver, from the prenatal, early childhood and throughout their development. Such actions will likely revert to changes in conceptions and, consequently, in the exercise of fatherhood, which will enable the support, encouragement and promotion of breastfeeding, increasing breastfeeding rates and promoting the health of children.

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