

THE ROLE OF FATHER IN BREASTFEEDING: CHALLENGES FOR NURSING IN THE ROOMING-IN CARE

O papel do homem-pai na amamentação: desafios para a enfermagem no alojamento conjunto

El papel del padre en lactancia: desafíos para enfermería en alojamiento conjunto

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ABSTRACT

Objectives: analyze how the father has participated of the practice of breastfeeding in the rooming-in care and the efforts of the nursing team for the couple make this action. **Method:** descriptive study with qualitative approach, with the interview of 15 fathers who accompanied their newborns in the rooming-in care of a public maternity hospital in the city of Rio de Janeiro, from March to May, 2016. **Results:** the participation of the fathers in the breastfeeding is a process in construction. Its main support is to be close, although they already are able to take care of the mother and the baby, which favors the breastfeeding. **Conclusion:** it is essential that the father has an active and aware participation in the breastfeeding to become an encourager of this practice and positively influence the mothers, strengthening the mother-father-son trinomial bond.

DESCRIPTORS: Paternity; Newborn; Rooming-in care; Breastfeeding; Nursing.

RESUMO

Objetivos: analisar como o pai tem participado do processo de aleitamento do recém-nascido no alojamento conjunto e os esforços da equipe de enfermagem para que essa ação seja realizada pelo casal. **Método:** estudo descritivo com abordagem qualitativa, tendo sido entrevistados 15 pais que acompanhavam seus recém-nascidos no alojamento conjunto de uma maternidade pública no município do Rio de Janeiro, no período de março a maio de 2016. **Resultados:** a participação do pai no aleitamento é um processo em construção. Sua principal manifestação de apoio é estar próximo, embora já consigam realizar cuidados com a mãe e com o bebê, o que favorece a amamentação. **Conclusão:** é fundamental que o pai tenha uma participação ativa e consciente no aleitamento materno para tornar-

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se um incentivador dessa prática e influenciar positivamente as mães, fortalecendo o vínculo do trinômio mãe-pai-filho.

DESCRITORES: Paternidade; Recém-nascido; Alojamento conjunto; Aleitamento materno; Enfermagem.

RESUMEN

Objetivos: analice cómo ha participado el padre en el proceso de amamantar al recién nacido en el alojamiento conjunto y los esfuerzos del equipo de enfermería para que esta acción sea llevada a cabo por la pareja.

Método: estudio descriptivo con enfoque cualitativo después de haber entrevistado a 15 padres que acompañaron a sus recién nacidos en el alojamiento conjunto en un hospital público de maternidade en la ciudad de Río de Janeiro, de marzo a mayo de 2016. **Resultados:** la participación de los padres en la lactancia es un proceso en construcción. Su principal expresión de apoyo es estar cerca, aunque ya pueden cuidar a la madre y al bebé, lo que favorece la lactancia. **Conclusión:** es esencial que el padre tenga una participación activa y consciente en la lactancia, convertirse en un animador de esta práctica e influir positivamente en las madres, fortaleciendo el vínculo entre el trinomio madre-padre-hijo.

DESCRIPTORES: Paternidad; Recién nacido; Alojamiento conjunto; Lactancia; Enfermería.

INTRODUCTION

Throughout history, the stereotype of the protective father and material provider has been anchored in certain figures of identity such as “superman”, the person responsible for supporting the family, who in contemporary times has been reconfigured and assuming new functions, such as companion, childcare worker, domestic service employee, among others.¹

The insertion of women in the labour market has contributed greatly to reviewing the role of men in society. Parents had to assume a more participative posture in the domestic sphere and this proximity exposed the importance that the presence of the parent has in the child's life. This change in the man's posture pointed out the several damages that the paternal absence brings to the child development.²

Today, the father figure, his relationship with his children and his role as a father can affect the lives of his descendants. The quality of his presence or absence, his inability to support his wife, his non-involvement in the issues that afflict the child or adolescent, his omission from certain issues are examples of failures in the contemporary role of father.³

In order to alleviate these shortcomings, the father should participate in the life of his children as soon as he knows of their existence. Involving him/her in the activities of pregnancy monitoring, inserting him/her in the plan of guidelines for the arrival of the baby is not only of great importance for the creation of the bond of the parents with their children, but also forms a supporter of the policies of attention to the health of the children, especially that of greatest relevance for his/her excellence and contributions: breastfeeding.

The participation of the partner during pregnancy contributes to the physical and psychological health of the mother, the well-being of the unborn child and the personal growth of men. We also add that it will make the man able to understand the female work of breastfeeding the newborn,

leading him to exercise a more effective participation in this activity.⁴

Breastfeeding is cited by Brazilian public policies as the wisest natural strategy of bonding, affection, protection and nutrition for the newborn child, constituting an important measure to favor children's health conditions, besides being the most sensitive, economic and effective intervention for reducing child morbidity and mortality.⁵

Men have a peculiar role in breastfeeding: they can support their partners by assisting them in their own care, as well as in the care of the newborn baby. Unfortunately, many men do not have information about how they could help their partners, including many negative feelings that arise with the arrival of a baby could be alleviated or even avoided if they had the real awareness of their role.⁵

The paternal involvement in breastfeeding, in the first 10 days after birth, is extremely important for the continuity of breastfeeding due to the difficulties that can usually occur in breastfeeding. It is essential that a mother-father-baby bond is formed from the moment of pregnancy. The more active presence of the father in the phase of preparation for motherhood will encourage the mother to breastfeed for longer, contributing to the success of breastfeeding.⁶

Fathers' own knowledge of the advantages of breastfeeding and their support, understanding and support in making decisions can be relevant when mothers offer breast milk to their children.⁷

In order to guarantee the participation of the Brazilian father in the care of the woman and the newborn, the Federal Laws nº 11.108/2005, known as the Companion Law, and nº 13.257/2016 were promulgated, which guarantees to the genitor up to 2 (two) days to follow medical consultations and complementary exams during the period of pregnancy of his wife or companion, besides extending to 20 days the maternity leave, originally of 5 days, for employees of the Citizen Company Program.

Although the Law of the Escort is not specific in relation to the father, since it legitimizes the woman's right to have an escort, her free choice, during the process of childbirth, birth and puerperium, offers conditions that allow the man-father to be at the partner's side, giving him physical or emotional support.⁸

The health professionals, especially the nursing team, who are 24 hours assisting the couple in their accommodation, should be attentive and offer attention to the new father, encourage and stimulate their participation in this vital period for the family, integrating him to the care, listening to him, removing doubts, teaching him, encouraging him, valuing him in the process of breastfeeding, facilitating the coexistence of the woman with her partner, all this aiming at strengthening the bond mother-father-child. It should also include the father in the actions of promotion, protection and support to breastfeeding, as for example, in the moments of massage and milking.⁵

The benefits of breastfeeding transcend the newborn. Through it, the woman reestablishes her anatomy more quickly before giving birth, prevents puerperal hemorrhages,

empowers the feeling of mother. Undoubtedly, its effects on the baby's health corroborate with the decrease in infant morbidity and mortality by being associated with fewer episodes of diarrhea, acute respiratory infections and other infectious diseases, being able to supply the nutritional, immunological and psychological needs of the child.⁹

Considering the benefits of breastfeeding and the need for support during this process, this research aimed to analyze how the father has participated in the process of breastfeeding the newborn in the joint accommodation and the actions of the nursing team so that this action is carried out by the couple.

METHOD

This study integrates the research entitled "Conquering spaces: the participation of the father in the care of the newborn in the joint accommodation", carried out in 2016, which collected data not analysed at the time and which, due to its relevance and an analysis corpus with recurrences and repetitions of ideas, allowed us to destroy a saturated material concerning the participation of parents in breastfeeding their newborn babies.

It is a descriptive study with a qualitative approach, seeking to encourage active and conscious fatherhood and promote positive impacts on children's development and gender equality.

The study was conducted in the Joint Housing (JH) sector of a public maternity ward of a federal institute for the Health Care of Women of Children and Adolescents, located in the South Zone of the city of Rio de Janeiro.

Fifteen parents were interviewed who accompanied their wives and newborns in the joint accommodation. The convenience sample was defined on the basis of the following criteria: parents aged 18 years or older who were with their newborn in the joint living quarters, and excluded parents who were with the newborn in the Neonatal Intensive Care Unit (ICU) or who had some sensory impairment.

The semi-structured interviews were conducted by the researcher from March to May 2016 in the physical space (box) where the trinomial was hospitalized. They were recorded in MP4 device, transcribed in full and coded in E1 to E15 (being the letter E referring to the Interview and the numbering from 1 to 15, forming the sequence of the interviews). The data were categorized according to the approximations of the themes that emerged from the parents' statements, being interpreted and analyzed in the light of references on paternity and breastfeeding.

Ethical principles were respected according to Resolution 466/12 of the National Health Council and safeguarded through the signing of a Term of Free and Informed Consent. The research was approved by the Research Ethics Committee of IFF/FIOCRUZ, and its CAAE is nº 79913317.1.0000.5269

RESULTS AND DISCUSSION

The profile of the 15 parents who participated in this study included an age group between 18 and 44 years. As for schooling, five (33.3%) had incomplete secondary education,

five (33.3%) had completed secondary education, two (13.3%) had incomplete higher education and three (20%) had completed higher education. In relation to occupation, the 15 (100%) reported being formally employed. Regarding marital status, three (20%) reported being married, three (20%) in a stable union, eight (53.3%) single, and one (6.67%) divorced.

Regarding the number of children, of all 15 interviewed, eight (53.3%) answered that they had one child, one (6.67%) answered that this was the second child, three (20%) answered that they had three children and three (20%) had four children. During the interviews it was identified that 13 (86.67%) of the parents participated in the prenatal and that 12 (80%) attended the birth.

Considering the results obtained, the data were organized into two categories of analysis: 1) The participation of the father-man in the breastfeeding process; and 2) Nursing challenges in the inclusion of the father-man in the joint housing.

THE PARTICIPATION OF THE FATHER-MAN IN THE BREASTFEEDING PROCESS

To understand how it is possible for parents to participate in breastfeeding their newborn baby, it is important to talk about some concepts that are part of this process.

The first concept refers to the act of breastfeeding, which according to the Portuguese Language Dictionary (2009) means "to give milk to, raise milk to, breastfeed", and is related to the meaning of breastfeeding, which is "the act or effect of breastfeeding".^{10,np}

Breastfeeding can be performed in different ways, as long as the infant receives milk directly from the mother or milked from the mother's breast and offered in the cup, or pasteurized human milked milk from the human milk stool in the cup. This concept allows breastfeeding of the newborn baby to be promoted not only by the mother, but also by someone who helps her. At this moment, nothing is more propitious than to insert the father in this care, seeking to bring him and his baby closer together.¹¹

Breastfeeding (Breast-feeding) is the ideal food for the newborn (NB) and provides numerous benefits to the mother and society. We understand that its benefits transcend the nutritional role and reinforce the need for the mother and father to participate in the growth and healthy development of the child.¹²⁻¹³

The second concept to be clarified is that of breastfeeding. According to the Dicionário da Língua Portuguesa (2009), breastfeeding means "to suckle; to raise the breast; to suckle; to lactate".¹⁰

Breastfeeding is much more than feeding the child. It is a process that involves deep interaction between mother and child.⁵

We must bear in mind that breastfeeding is significantly influenced by the environment in which the puerperal is inserted. Therefore, for this practice to be successful, the mother needs constant support and encouragement. This activity can be initiated within the hospital institution itself, through health professionals.¹⁴

The nurse should make a commitment to guide the couple on breastfeeding and the whole process of promoting, encouraging and supporting breastfeeding, with emphasis on welcoming, communicating and educating in health.¹⁵

In our universe, we can see that parents are concerned with supporting their wives during the breastfeeding of their children, even if at that moment their participation is a mere presence. For E2:

Stay on her side. (E2)

She'd take that breastfeeding part, and I'd always be there helping her... So you have to take her side all the time, you know? So she can breastfeed, so she can bathe. So she can take care of herself. We're already married, we're together, so we have to be there, we have to stand by her side. (E2)

From the talk of E2, one observes the father's interest in participating in breastfeeding, making it clear that the act of breastfeeding is a woman's exclusive practice, but with which he can contribute (help) in another way. It is very important to provide paternal support during breastfeeding, because the man can transmit confidence and tranquility during this moment, besides creating a bond between the mother-child-father trinomial.

In an integrative review study by Turaça, Borges and Alves (2012) who approached the father as a support for breastfeeding, it was possible to see that among all the family members and close people mentioned, the presence of the father was listed as the most relevant support for breastfeeding from the maternal perspective. The paternal influence is highlighted as one of the reasons for the increase of its incidence and prevalence, that is, the father influences the woman's decision to breastfeed and contributes to its continuity.¹⁶

The father's interest in participating in breastfeeding, of being present, giving affection, being a partner and sharing in some way the responsibility for breastfeeding appears in the speech of E8:

Then, too, when she [baby] was suckling, I helped keep her [NB] awake because she just wanted to sleep. So I'd stand there with her, helping her like this. (E8)

In E4's statement, one sees the companionship between the couple when the father helps in breastfeeding, without the woman's need to ask. This contributes to a strengthening of the marriage and the bond of the father with the child, which is developed through the care:

At dawn, mostly I get up, she sleeps [the mother], I pick her up [the baby] and I put my breast in [breastfeeding]. I put a burp on her because she can't keep getting up [...]. (E4)

The father is not only an encourager of breastfeeding, but the main influence of breastfeeding, contributing to the strengthening of family bonds.⁶

A study conducted by Ferraz et al in 2016 showed the opinion of women on the participation of fathers in breastfeeding. In this study it was possible to identify that 83% of puerperal women considered the participation of the father important in this period. And 70.8% of women said that without this participation it would be very difficult to breastfeed.

In this sense, the father is a figure who, although he cannot "breastfeed", can contribute by helping in the practice of breastfeeding, which can be demonstrated in the speech of E11:

[...] taking turns [during the dawn]. I don't have milk, I don't have the breast, but we'll review it. She gives [the breast], then she rests, I stay in her lap with [baby]. (E11)

Participating effectively in the care of the woman's body, due to breastfeeding, was also something commented on by the parents:

Sometimes I'd give the massage before the baby sucked to help (E10)

In the case of E10, the father figure goes beyond the presence to touch his wife. Touching the breasts demonstrates the concern and care of a father committed to the nutrition of his child and the well-being of his partner. On many occasions, the female breast can be related to the sin of exposing the flesh as a focus of erotic ostentation.¹⁷ One sees the resignification of the role of a man in touching a woman's breast not only for sexual purposes, but also as a helper to breastfeeding.

Demystifying the male figure in the breastfeeding setting is an important step for the father to be included in the process of breastfeeding his child.¹ The nursing team should guide, teach, and encourage the man to touch his wife, stripping him of the preconception that the male touch refers only to sexualization.

This is confirmed in the study by Turaça, Borges and Alves (2012) in which it is commented that health professionals are references for those who need information. Technical guidelines carried out at prenatal, maternity, or even puerperium reflect positively on the incidence and prevalence rates of breastfeeding.¹⁶

In contrast, in a study by Pinto, Martins, Campana et al, 2018, it was observed that this father, even wanting to participate, encounters many barriers, showing his invisibility even when he is present. Professionals still find it difficult to see this father as a positive presence, as an ally throughout this process.⁷

In this sense, the Breastfeeding Committee of the Instituto Federal Fluminense (IFF) and the Oswaldo Cruz Foundation (FIOCRUZ) (2017) created a booklet "Ten steps for effective participation of the father in breastfeeding". We highlight step 3: "Whenever possible, participate in the moment of breastfeeding: your presence, caresses and touches during the act of breastfeeding are important factors

for the maintenance of the affective bond of the trinomial MOTHER+SON+PAIR”^{18:np}

Baby care should be a couple's job. This premise makes it essential for parents to participate in educational activities during the prenatal and puerperium. The construction of the couple's knowledge, with encouragement and guidance from the parent, will favor the transposition of obstacles that may arise in the breastfeeding process.¹¹

It is worth mentioning the Municipal Decree 24.083, of April 2, 2004, which institutes the Month of Paternity Valuation, in August, in the city of Rio de Janeiro. During this period, the health units, schools, other equipment and municipal projects that work with children, adolescents and their families should develop activities focused on the themes of “paternity” and “the involvement of men in the care of children and adolescents.”¹⁹

It is important to note an opportunity to train professionals and review institutional routines in order to expand the frequency of fathers and men in general to the regular activities of each institution, as well as a greater willingness among younger men in parental care.

Challenges of nursing in including the father-man in the joint accommodation

we will discuss in this category the challenges of nursing in relation to the insertion of the father in the breastfeeding process of his newborn. Through the parents' reports, we analyze how the nursing team prepared this father to participate in breastfeeding.

In our research, we identified that parents were guided in the technique of breastfeeding through the cup:

Just the little glass, just once. But it was pretty quick. (E5)

Yeah, the girl on the team taught me on the first day, when the glass arrived she said, Dad, this is the complement, a 20 ml glass, it has to be given this way, then she taught me to put the gauze down, she [baby] pulls, she lets go, she has to keep stimulating, because she [baby] starts to drink and wants to sleep, then you touch her mouth and so, for her to come back, feel the taste again, and drink everything. (E12)

To give the milk, they taught. I gave it three times. (E13)

[About the use of the cup] Someone on the team taught me a little bit how to give the cup. Like when the kid sticks out his tongue, and it goes slowly, really slowly. So as not to spill everything. (E14)

From the above, you can see that you have been taught and explained how to give the milk in the cup to the baby. In the case of E5, the time that the professional is willing to explain about the glass technique is an important element for the father to learn how to do it. For this father, the time

the professional used was not enough for him to learn. A greater sensitivity of the team is needed at the moment of orientation, so that everyone, regardless of the time spent, can fully participate in this process.

However, some teams already show greater concern about the involvement of the father in the process of breastfeeding his child, as noted in the E12 speech. In it, it is noticeable that the professional had a greater attention when teaching, being enlightening in every detail of the explanation.

The reality expressed by the parents, while revealing a gap in nursing care, also shows that some professionals are already changing their attitude towards inserting paternal care from the first days of the baby's life.

In a study by Rêgo, Sousa e Rocha (2016) we confirmed that parents show satisfaction in providing care to their children, especially when they realize that their partner and/or health professionals recognize and value their initiatives and attempts at success. Parents point out the advantage of having an apprentice-oriented nurse.¹

The lines E13 and E14 demonstrate how a targeted explanation to parents provides greater safety in the practice of breastfeeding by cupping, since they have been guided. Even without mentioning the amount of time spent on the explanation, it is concluded that it was enough for them to carry out the action themselves more than once.

The use of the cup is a possibility to feed newborns (NB), proposed by UNICEF, when they are not yet being exclusively breastfed or when the mother is unable to breastfeed at the moment. This is the case with one of the newborns in the study, who was in phototherapy, in which he had a limited amount of time to breastfeed so as not to cause long pauses in treatment. In these cases, the baby sucks 20 minutes at the mother's breast and then the mother offers the complement and returns the baby to therapy.²⁰

The study showed that the nursing team has tried to insert the father also in the care of the woman, preparing her for the act of breastfeeding, as stated in the following statements:

Everything. I learned, the massage, as it should be done. (E6)

About breastfeeding, they talked about the massage on her breasts (companion) [...] showed (how she does the massage), soon after I did the same way, she stood by my side to see if it was right. (E10)

It is clear from the speeches how much the nursing team makes a difference in this practice, serving as a catalyst for parents' performance in the care of their child. From the reports, it can be seen that the professional sought to bring the father closer to breastfeeding itself, encouraging him to assist the mother in breastfeeding care.

In cases of manual milking, it is important for the father to learn the technique of how it is done, because the process is often tiring and, being well guided, this father is able to alleviate the physical wear and tear for the woman and contributes to avoid complications such as breast ingurgitation or even mastitis.

In the study by Rêgo, Sousa e Rocha (2016) it was shown that fathers and mothers are not only similar in their sensitivity to the child, but also experience success in breastfeeding. Anxiety is a common feeling for fathers and it is believed that it can be diminished with guidelines that make it possible to broaden knowledge, skills and attitudes, as well as exposing ways in which the father should support breastfeeding.¹

In the puerperium, the nurse can support the father in his interaction with his son and wife, strengthening their skills and strengths. As it is the joint accommodation, which is a propitious environment for providing information and removing doubts, it is essential that the team, besides explaining and guiding, encourages the father's participation in breastfeeding, first bath and other care. The health team must be prepared and trained to provide more supportive, integrated and effective assistance, guiding and supporting the family.²¹

CONCLUSION

When we analyze how the father is inserted in the practice of breastfeeding, we see that this is something new and under construction. In some parents' imaginary, the act of breastfeeding is intrinsic to the mother due to her milk-producing anatomy and physiology. However, others extrapolate this thought and have ventured deeper into this horizon, actively participating in breast care (massage) before breastfeeding, supporting this practice and being at the woman's side at the moment of feeding.

Parents who have watched their child breastfeed have an admiration for breastfeeding, seen also as an opportunity for family closeness, causing the paternal bond to form and develop at every moment. For them, breastfeeding their child becomes a source of pride and generates a concern to meet the needs of the baby, seeking to do the best, even if it is the temporary offer of milk in the glass, recognizing that all attention and care in this period is paramount to the well-being of the new member of the family.

We highlight the contribution of the nursing team in this process, acting in such a way as to include the father in the care of both the newborn and the mother, participating in the breaking of gender stereotypes and making the man a co-author of care.

The number of parents interviewed does not allow us to generalize the information, but it opens windows for new research on the participation of the father in breastfeeding. We hope to provoke new perspectives on breastfeeding, this process being recognized as couple breastfeeding, and we hope that new studies will explore this universe, seeking the increasingly effective involvement of men.

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