Are Fathers Underused Advocates for Breastfeeding?

Abstract:

Sir,

Does breastfeeding need advocates? The findings and recommendations of this interesting study by Kenosi et al are not contentious, suggesting that educating and involving fathers may improve breastfeeding rates. However, it is no longer usual to refer to the “benefits” of breastfeeding because feeding human milk to infants is the biological norm; from this perspective there are no benefits of breastfeeding but instead risks of breastmilk substitutes. Perhaps a fathers role is as protector of his partners and babies from the risks of not breastfeeding. The report does not outline details of when the study was conducted at Cork University Maternity Hospital, name the infant feeding information materials provided to fathers, or describe the content of antenatal classes attended by over half of respondents. Previous Irish studies examining antenatal information, including a recent project in which I have been involved, found a wide variety in the sources of information and that the provision of materials sponsored by infant formula manufacturers remains a significant issue. It is clear that a great deal more research needs to be done to establish the antenatal education needs of parents and the efficacy of educational materials and teaching approaches.

Although breastfeeding initiation rates in Ireland are low they have been rising in recent years. The National Perinatal Statistics, latest figures from 2009 show that mothers living in County Cork have one of the highest rates of combined feeding (mothers milk and artificial milk) which may indicate a lack of confidence in exclusive breastfeeding. Providing more antenatal information is unlikely to show changes in breastfeeding rates if hospital practices do not support exclusive breastfeeding and if mothers are not enabled to carry out their decisions. An expectant father may need information and discussion about many topics, not only breastfeeding. Routine antenatal consultations provide opportunities to impart information, answer questions, and to encourage antenatal class attendance. Unfortunately, men are not generally aware that, under the Maternity Protection (Amendment) Act of 2004 they have a once-off entitlement to time off work to attend the final two antenatal classes in a course.

It may be timely to undertake a pilot study to see if effectively structured education for fathers on the importance of breastfeeding, health services practices that enable breastfeeding, and the support that fathers can provide would affect breastfeeding motivation, confidence and rates. This type of study would be in keeping with the objectives of the National Breastfeeding Strategic Action Plan and would be useful towards developing a common framework for antenatal education with best practice guidelines around teaching approaches and evidence-based resources.

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References