Exploratory study: breastfeeding knowledge, attitudes towards sexuality and breastfeeding, and disposition towards supporting breastfeeding in future Puerto Rican male parents

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Identify the breastfeeding knowledge, the attitudes towards sexuality and breastfeeding and the disposition towards supporting breastfeeding in future fathers were the aims of this study. A non-probabilistic sample (n=100) of future Puerto Rican male parents was used in this study. A self-administered questionnaire was used consisting of four sections. Descriptive statistics were used for data analysis and t-test to the inferential analysis. 88.8% of the participants presented a low level of knowledge. However, 81.6% had a positive attitude toward sexuality and breastfeeding. Also, 92.0% of the

participants indicated much/enough willingness to support their partners in exclusively breastfeeding. Disposition to support the breastfeeding was associated with knowledge towards breastfeeding (p=0.04) and attitudes toward sexuality and breastfeeding (p=0.00). The knowledge and the attitudes, in this study, are strongly related with the disposition of the father to supporting the breastfeeding in the future.

Key words: Fathers, Attitudes, Disposition, Breastfeeding

t this moment in Puerto Rico, breastfeeding is not part of the cultural norm. Modernization has resulted in social, cultural and economic changes that have produced a decrease in breastfeeding practices. Among the most important changes we have observed a loss of support for the breastfeeding mother. This support had been experienced traditionally by women with experience in extended families.

At the present time, young mothers frequently do not know where to go for advice, encouragement, and support for breastfeeding. The need has arisen for prospective fathers to offer psycho-social and physical support to the mothers(1). Freed and their colleagues (2), point out that future male parents should be included in breastfeeding education programs and that it is important to confront myths and incorrect beliefs to help to overcome obstacles in breastfeeding initiation. Pérez Escamilla et al.(3) have concluded that breastfeeding promotion should be designed to reach both women and their partners, so that the latter can influence positively in the decision of the mothers to breastfeed their babies.

In Puerto Rico, on the other hand, Botello and collaborators(4) have reported that support from the baby's father is one of the factors which enable the mother to breastfeed the baby for a longer period of time. Similar results were found by Scott et al.(5). Likewise, Matthews et al.(5), point out that strategy to change the social attitudes should include the babies' fathers, since they need information and they can be helpful in supporting breastfeeding.

The purpose of this study was to explore, in a sample of future male parents, their knowledge about breastfeeding, their attitudes towards sexuality and breastfeeding, and their disposition to support breastfeeding once their children are born.

Method

Study design. The study was exploratory with a correlational design. It is exploratory because it seeks to examine a topic that has never been studied, or of which there is very little information in Puerto Rico.

Population and Sample. The target population study was constituted of future male parents who were awaiting

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the birth of their first son. One-hundred future male parents were selected through a non-random opportunistic sample. The snowball technique was used to identify the participants in this study.

Measures. A self-administered questionnaire, based on the literature, was used in the study. It included four parts with 29 premises. Ninety eight of the questions were closed and 2% were open questions. Specifically, the first part of the questionnaire collected socio-demographic information (six questions). The second part included 14 premises about breastfeeding knowledge. This was measured through Guttman's Scale (Yes, No, I do not know). Eighty percent or more of correct premises were considered as indicating a high level of knowledge.

The third part picked up the attitudes of the participants towards sexuality and breastfeeding. It consisted of 7 premises with a Likert type scale (4 points). A negative attitude was defined as a score of 17 points or less and a positive attitude was defined as a score of 18 points or above.

The fourth part gathered information on the disposition of the participants to support breastfeeding once their first baby was born. For this purpose, two premises were used. One was directed at identifying the disposition to support breastfeeding. For this, an ordinal scale was used that classified the disposition from very willing to not willing. The other premise was directed at identifying, among those who showed some positive disposition, what type of support they were willing to provide (See definitions).

The instrument was validated in its psychometric properties (unpublished data), and found to be valid and reliable for the purposes of the study. Also, this study was approved by the Institutional Review Board of the University of Puerto Rico, Medical Sciences Campus.

Definitions. Disposition type to support breastfeeding was defined according to Gamble and Morse(7). The participant could indicate that:

He would participate in the decision to breastfeed, as well as in the baby's care and in the domestic tasks of the home (Committed Father).

He would not participate in the decision to breastfeed, but he would support his partner. He would also participate in the baby's care and in the tasks of the home (Assisting Father).

He would participate in the decision to breastfeed, but would help little in the baby's care and in the tasks of the home (Father Supervisor).

He would not participate in the decision to breastfeed, in the baby's care or in the tasks of the home (Far away Father).

Statistical analysis. Descriptive Analysis was carried

out with descriptive statistics (percent, frequency). Tstudent test, One Way ANOVA and Scheffé Post Hoc test were used to establish mean difference between continuous variables.

Results

Participant's profile. The median age was 20 years (SD=4.4) with a range between 18 and 39 years. 43.0% cohabited with his partner but were not legally married. The scholarship median was 12 years (SD=2.5) and 48.8% had some level of higher education. On the other hand, 60.0% were employed and 38.3% reported monthly revenues between \$100.00 and \$499.99. Lastly, the median duration of pregnancy of the partners was 5 months (SD=2.3). Specifically, 40.4% indicated that their partner was in the second trimester of pregnancy (Table 1).

Table 1. Participant's Profile

Variable	n	%
Age (years) (n=100)		
18-19	43	43.0
20-22	31	31.0
23-39	26	26.0
Marital Status (n=100)		
Legally Married	19	19.0
Single	36	36.0
Divorced	2	2.0
Consensual	43	43.0
Education Level (n=99)		
Less High School	1 1	11.1
High School	40	40.4
More High School	48	48.5
Income (S) (n=94)		
0.0-99.9	19	20.2
100.00-499.99	36	38.3
500.00-999.99	27	28.7
$\geq 1,000.00$	12	12.8
Pregnancy Trimester (n=99)		
First	33	33.3
Second	40	40.4
Third	26	26.3

Breastfeeding knowledge. 88.9% of the participants presented a low level of knowledge towards breastfeeding, while the remaining 11.1% had a high level of knowledge. Specifically (Table 2):

43.0% were unaware that breastfeeding is the natural continuation of feeding from the umbilical cord, when the baby was inside the mother's uterus.

36.0% were unaware that the breastfed baby always receives a complete food, at the ideal temperature and free of bacteria.

72.0% were unaware that the baby fed exclusively

Table 2. Breastfeeding Knowledge Results

Items		Incorrect	
Breastfeeding is the natural continuation of feeding from the umbilical cord, when the baby was inside the mother's uterus	L.		
(n=100). 2. Breastfeeding is the natural way to feeding	57.0	43.0	
the baby (n=100).	92.0	8.0	
 The breastfed baby always receives a complete food, at the ideal temperature 	:	26.0	
 and free of bacteria (n=100). The breastfed baby receives a complete nutrition according to the baby's need 		36.0	
(n=100). 5. The baby fed exclusively with human milk	86.0	14.0	
does not need to take water or other foods during the first six months of life (n=100). 6. The human milk protects the baby against	28.0	72.0	
illnesses (n=100). 7. The premature and low birth weight baby	71.0	29.0	
are develops better if it is fed with human milk (n=100). 8. Breastfeeding helps to the mother and the	71.0	29.0	
baby have a special bonding (n=100). 9. Breastfeeding helps the mother's uterus return more quickly to its natural size	82.0	18.0	
(n=99). 10. The mother who breastfeeds her baby loses the weight that was gained during	24.2	75.7	
pregnancy faster (n=100). 11. Breastfeeding can be a natural birth-control	40.0	60.0	
method (n=100). 12. The mother who breastfeeds enjoys natural protection against breast, ovarian and	25.0	75.0	
uterine cancer (n=99). 13. The mothers can breastfeed successfully.	42.4	57.6	
regardless of the size of her breasts. 14. The quantity of milk that the mother takes place does not depend on the size of	72.0	28.0	
the breasts.	39.0	61.0	

with human milk does not need to take water or other foods during the first six months of life.

-29.0% were unaware that human milk protects the baby against illnesses.

-29.0% were unaware that the premature and low birth weight baby are develops better if it is fed with human milk.

75.7% were unaware that human milk helps the mother's uterus return more quickly to its natural size.

60.0% were unaware that the mother who breastfeeds her baby loses the weight that was gained during pregnancy faster.

75.0% were unaware that breastfeeding can be a natural birth control method.

57.6% were unaware that the mother who breastfeeds

enjoys natural protection against breast, ovarian and uterine cancer.

-28.0% were unaware that the mothers can breastfeed successfully, regardless of the size of her breasts.

-61.0% were unaware the quantity of milk that the mother takes place does not depend on the size of the breasts.

Attitudes toward sexuality and breastfeeding. 81.6% of the participants had a positive attitude toward sexuality and breastfeeding, while the remaining 18.4% presented a negative attitude. Specifically, over 70% of the participants agreed that the women's breasts should not only be for sexual pleasure, and that breastfeeding does not make the marriage relationship more difficult, nor does it make the woman lose her interest in sexual activity.

On the other hand, over 80% of the participants agreed that breastfeeding does not make the mother less attractive to her partner and is not an obstacle for sexual activities. 64.7% agreed that breastfeeding does not make the mother's breasts drop.

It should be noted that the least positive attitude among the participants was related to breastfeeding in public. 55.5% of the participants disagreed that it is acceptable for the mother to breastfeed in front of family and friends (Table 3).

Disposition toward supporting breastfeeding. 92.0% of the participants indicated much/enough willingness to support their partners in exclusive breastfeeding until six months of age. Only 8%, of the participants indicated to be a little/not willing.

According to the definition of Gamble and Morse (7), of 92% of the participants, 87.0% was classified as committed dad type. That is to say, they would participate in the breastfeeding decision, in the baby's care and in the tasks of the home. It should be noted that no participant was classified as a far away dad (Table 4).

Inferential Analysis. There was a significant relationship between knowledge towards breastfeeding and the disposition to support it. Specifically, it was observed that those future parents who were willing to support breastfeeding for their children had more knowledge in the area that those who did not show disposition to support it (t=2.072, p=0.04).

Similarly, there was a significant relationship between the attitude towards sexuality and breastfeeding and the disposition to support it. Those future parents that had a positive disposition to support breastfeeding had more positive attitudes than those who did not have disposition to support it (t=3.80, p=0.00).

Lastly, a marginally significant difference it was met between breastfeeding knowledge and the participants' age ($F_{anova} = 2.82$, p=0.06). According with Sheffé Post

Table 3. Attitudes Toward Sexuality and Breastfeeding Results

Items	Strongly Agree (%)	Agree (%)	Disagree (%)	Strongly Disagree (%)
1. Women's breast should not only be for sexual pleasure	en de la companya de	V 4541.572.75	640-200-600	W. 62 TV
(n=100).	46.0	27.0	12.0	15.0
 Breastfeeding the baby does not make that the breasts falls (n=99). 	35.4	29.3	25.3	10.1
 Breastfeeding the baby does not make less attractive to the mother for their couple (n=100). 	45.0	38.0	10.0	7.0
 Breastfeeding does not make the marriage relationship more difficult (n=100). 	46.0	30.0	16.0	8.0
Breastfeeding does not make the woman lose her interest in sexual activity.	47.0	29.0	15.0	9.0
6. Breastfeeding is not an obstacle for the sexual relationships				
among the baby's parents. 7. It is acceptable that the mother gives the breast to the baby	50.5	33.3	9.1	7.1
in front of family and friends.	17.2	27.3	21.2	34.3

Table 4. Disposition toward supporting breastfeeding results.

Category	n	%
Committed Father	80	87.0
Assisting Father	8	8.7
Father Supervisor	4	4.3
Far away Father	0	0.0

Hoc Test, the participant groups between 23 and 39 years (mean=8.52) had better mean points than the participants between 20 and 22 years (mean = 8.19) and between 18 and 19 years (mean=7.33), respectively.

Discussion

It was observed that the majority of the participants in this study had a low level of knowledge about breastfeeding. The lowest level of knowledge was observed, specifically, in the area of maternal breastfeeding benefits. Over 75% of the participants were unaware that breastfeeding helps the mother's uterus return more quickly to its natural size (uterine involution); and that it can be a natural birth control method. It should be remembered that breastfeeding liberates the hormone oxytocin, which stimulates uterine contractions, and thus helping to expel the placenta and to reduce blood loss after childbirth(8). If the mother maintains breastfeeding for a longer period, the subsequent contractions will help her uterus recover its original size(9). On the other hand, consistent breastfeeding retards the return of fertility, providing up to 98% protection against pregnancy during the first 6 months postpartum, as long as the mother remains amenorrhea breastfeeds in an exclusive or almost

exclusive manner(10).

Even when the level of knowledge of the participants about breastfeeding turned out to be low, their attitudes toward sexuality and breastfeeding turned out to be positive. However, for the participants it was unacceptable that the mother breastfeed in public. This attitude is evidence of the sexual value of the breasts for the participants of the study. Voss, Finnis and Manners(11), as well as, Botello et al.(4), found similar results in their respective studies.

Sexualization of the breast has had such deep implications, that breastfeeding has been given an image of sexual activity and, as such, should be carried out in private.(12). There are many women who choose to not breastfeed in public because they feel embarrassed and uncomfortable in doing so(13). Also, many people feel shame when seeing a mother breastfeeding; they do not know what to do, where to look, etc.(12). It is possible that the participants of this study perceive their partners both as expectant mothers of their children, where breastfeeding is in compliance with their natural role, while at the same time they visualize their partners as their wives in the sexual aspect, where breastfeeding competes with the breasts' intimate role in sexual play. These two visions could enter in opposition, because the woman's breasts are seen as having opposing roles. If the sexual role prevails, then breastfeeding in public is rejected.

On the other hand, practically all of the participants showed a positive disposition towards supporting breastfeeding once their baby is born. In fact, the majority of participants were identified as future committed parents with breastfeeding. Moreover, it was observed that the participants with a positive disposition had better knowledge and attitudes related to breastfeeding than

those that showed less disposition. These results compare favorably with the literature. Littmann, VanderBrug and Golfarb(14), found a direct relationship between the father's approval and breastfeeding incidence. Likewise, Bentley and collaborators(15) found that the intention to breastfeed was related directly with the attitudes of the mother's significant relatives, especially the baby's father. In fact, there is scientific evidence which point out that breastfeeding is practiced for a longer period when the attitude of the baby's father is more positive.

Lastly, a marginally significant relationship was observed between the participants' age and breastfeeding knowledge. Perhaps, older future parents have been exposed to more information or observational events related with breastfeeding. However, this result was not observed for the attitudes, so this aspect should be explored in future studies.

Resumen

Identificar el conocimiento sobre lactancia materna, las actitudes hacia la sexualidad y la lactancia materna y la disposición hacia apoyar la lactancia en futuros padres, fueron los objetivos de este estudio. Una muestra no probabilística (n=100) de futuros padres varones puertorriqueños participaron en el estudio. Se utilizó un cuestionario autoadministrable de cuatro secciones. Estadísticas descriptivas fueron usadas para el análisis de los datos, así como, pruebas t para los análisis inferenciales. 88.8% de los participantes presentaron un nivel bajo de conocimiento. Sin embargo, 81.6% tuvo una actitud positiva hacia la sexualidad y la lactancia materna. También, 92.0% de los participantes indicaron tener mucha/ bastante disposición a apoyar a sus parejas a llevar una lactancia materna exclusiva. La disposición a apoyar la lactancia materna estuvo asociada con el conocimiento sobre lactancia (p=0.04) y las actitudes hacia la lactancia materna y la sexualidad (p=0.00). El conocimiento y las actitudes, en este estudio, están fuertemente relacionadas con la disposición del padre a apoyar la lactancia materna en el futuro.

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