

Promotion of active paternity in breastfeeding newborns

Promoção da paternidade ativa na amamentação de recém-nascidos

Promoción de la paternidad activa en recién nacidos lactantes

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RESUMO

Objetivo: Aprender a percepção de pais de recém-nascidos sobre seu papel na promoção da amamentação e instituir estratégias de promoção da paternidade ativa. **Método:** Estudo qualitativo, realizada com 11 pais de recém-nascidos investigados em um serviço público de saúde do município da Bahia, Brasil. Os dados foram coletados por entrevistas individuais e de imagens após um ensaio fotográfico com os pais e bebês, que derivou estratégias de promoção da paternidade ativa. Procedeu-se à análise de conteúdo e iconográfica, interpretadas pelo referencial a Política Nacional de Atenção Integral à Saúde do Homem. **Resultados:** Os pais expressaram sentidos e significados positivos relacionados ao exercício da paternidade que revelaram e a mobilização masculina para o desempenho do aleitamento dos recém-nascidos. **Conclusão:** A paternidade ativa pode contribuir para a promoção do aleitamento materno. Cabe aos profissionais de saúde a motivação para o engajamento e integração masculina nos cuidados com mãe-bebê. **Descritores:** Paternidade; Aleitamento Materno; Recém-nascido; Saúde do Homem; Enfermagem.

ABSTRACT

Objective: To apprehend the perception of parents of newborns about their role in promoting breastfeeding and institute strategies to promote active parenthood. **Method:** Qualitative study, carried out with 11 parents of newborns investigated in a public health service in the city of Bahia, Brazil. Data were collected through individual and image interviews after a photo essay with parents and babies, which derived strategies to promote active parenthood. A content and iconographic analysis was carried out, interpreted by reference to the National Policy for Comprehensive Attention to Men's Health. **Results:** The fathers expressed positive senses and meanings related to the exercise of fatherhood that they revealed and the male mobilization for the performance of breastfeeding the newborns. **Conclusion:** Active fatherhood can contribute to promoting breastfeeding. It is up to health professionals to motivate male engagement and integration in mother-baby care. **Descriptors:** Fatherhood; Breastfeeding; Newborn; Men's Health; Nursing.

RESUMEN

Objetivo: Aprender la percepción de los padres de recién nacidos sobre su papel en la promoción de la lactancia materna e instituir estrategias para promover la paternidad activa. **Método:** Estudio cualitativo, realizado con 11 padres de recién nacidos investigados en un servicio público de salud de la ciudad de Bahía, Brasil. Los datos fueron recolectados a través de entrevistas individuales y de imagen después de un ensayo fotográfico con padres y bebés, que derivó en estrategias para promover la paternidad activa. Se realizó un análisis iconográfico y de contenido interpretado con referencia a la Política Nacional de Atención Integral a la Salud del Hombre. **Resultados:** Los padres expresaron sentidos y significados positivos relacionados con el ejercicio de la paternidad que revelaron y la movilización masculina para la realización del amamantamiento de los recién nacidos. **Conclusión:** La paternidad activa puede contribuir a la promoción de la lactancia materna. Corresponde a los profesionales de la salud motivar el compromiso y la integración de los hombres en el cuidado materno-infantil. **Descritores:** Paternidad; Amamantamiento; Recién nacido; Salud de los hombres; Enfermería.

ORIGINAL

Introduction

The promotion of fatherhood for the active and responsible construction of men in the breastfeeding of children, especially newborns, have been configured as a challenging strategy around the world.¹ In Latin American countries such as Brazil, the literature has pointed to contexts of invisibility, distancing and even absence of men in the process of paternity and fatherhood.²

Different are the models of fatherhood, gender relations², knowledge, attitudes and practices directed to paternal, affective and singular care.³ Thus, aspects related to the social construction of masculinity have influenced the way men perceive, understand and signify the male's place in the face of care for their sons and daughters.⁴

With regard to breastfeeding, the challenges for overcoming stereotypes, prejudices and stigmas about the active and responsible presence of men are complex. There are sociocultural, educational and literacy limitations in health, as well as barriers in health services themselves, which, in addition to structural labor barriers, do not provide opportunities for men to participate in the care of their children in the first months of life.⁵⁻⁶

It is known that investment in the promotion of active and responsible parenthood is essential for the maintenance of community, family and socioaffective harmony. Men mobilized and sensitized to exercise paternity are less vulnerable to experiencing situations of violence⁷⁻⁸, strengthen affective bondrelationships and contribute to the healthy growth and development of children.⁹

When parents are engaged in the promotion of breastfeeding there is greater interaction between the binomial and/or trinomial and the achievement of nutritional, immunological, emotional and psychosocial benefits obtained by this practice⁹, as well as healthy development, the construction of experiences and affective bonds throughout life.¹⁰ In addition, it favors paternal participation in domestic work, going to health services, supporting postpartum women, demonstrating affection for sons and/or daughters, and autonomy in the post-pregnancy process.¹¹

In this context, it is important to emphasize that nursing professionals are intrinsically present in the promotion of fatherhood and in the support of breastfeeding, because professional care to the human person is in all their vital cycles.¹² Nurses and their teams work in reproductive planning, prenatal care, childbirth and puerperium, as well as in monitoring child growth and development, but there are gaps in the literature regarding paternalness¹³ which justifies the development of this study.

In view of this scenario, this study was guided by the following question: How do parents of newborns perceive their role in promoting breastfeeding?

Method

Qualitative study that is part of a larger study that aimed to sensitize the community to the importance of active parenthood in the month of celebration of breastfeeding - Golden August. The study is anchored in the normative theoretical framework of the National Policy of Integral Attention to Men's Health, from the thematic axis fatherhood care, from the theoretical-conceptual perspective of active and responsible paternity.¹⁴⁻¹⁵

For this, this concept is understood as: Having an affectionate and unconditional relationship with your child; Maintain a relationship that goes beyond financial provision; Participate in the daily care and raising of your child, giving food, helping him to dress, putting him to sleep and teaching him; Promote an affectionate bond, mutual attachment and emotional closeness to your child; Share with the mother the tasks of caring for the child and the house; Be involved in all moments of your child's development: pregnancy, birth, early childhood, childhood and adolescence; Encourage your child's development: reading stories, singing and/or putting music, supporting them in homework and playing with it.¹⁵

The study was developed in a public health service (maternity) in the city of Bahia, Brazil. For this, the data sources came from the narratives and images (photographs) of 11 men, parents of newborns who were at the time of visits in the maternity during the research development period. Men and parents who were in the maternity ward were excluded to make visits of other natures, such as neonates kept in hospital.

Data production was structured as follows: a) actions to promote active paternity with a focus on breastfeeding: first stage: planning, organization and execution of the world breastfeeding week, entitled: empowering mothers and fathers: favoring breastfeeding, from 2019. To this end, the intersectoral articulation of the State and Municipal Health Secretariats, a Breastfeeding Committee, and the board of a public maternity hospital in the municipality were performed. The integration of teaching and service was carried out through the involvement of Research Groups in the area of Child Health, and health care of men, both linked to a Nursing School of a Higher and Public Education Institution of the state. In addition, the United Nations Children's Fund (UNICEF) was supported.

Administrative meetings were held aimed at planning the Golden August campaign in order to meet the goals set by the World Health Organization (WHO) and the Sustainable Development Goals of the United Nations (UN), the initiatives of the Pan American Health Organization (PAHO) and the World Alliance for Breastfeeding Action (Waba). To this end, in a superorderly way, problems related to the theme were raised, such as the exposure of indicators on breastfeeding in the world, in Brazil and bahia; the proposals for interventions developed by the institutions participating in the campaign in 2019 were presented, and partnerships were signed for their implementation.

The health campaign entitled: lenses that achieve paternal responsibility in the breastfeeding process, structured along the molds of a photographic exhibition that involved the presence of parents and their newborns found in the joint accommodation of the maternity surveyed.

Data were collected during August 2019 by researchers linked to the public university, and they were sensitized to the relevance of paternal protagonism in supporting and encouraging breastfeeding. During the length of stay in the joint accommodation, parents were invited to participate in a photo shoot along with their sons and daughters in a photo studio set up on the premises of the maternity facility itself.

The photographs were taken through the follow-up of a previously elaborated execution protocol, which respected the specificities of the participants, the environment, and the needs for adaptations. They occurred in spaces that maintained the initial preservation of the image and privacy of the participants.

With the photograph in hand, parents were asked to answer the following questions: Tell us how you are feeling at this time of birth of your child? What are your expectations? How do you expect to participate in your child's care and breastfeeding process? Individual interviews were conducted at the facilities of the health service itself, in a reserved place, through the convenience of the participants. The interviews lasted an average of 20 minutes.

The data obtained were submitted to analysis for the extraction of thematic contents. For this purpose, the methodological stages of content analysis proposed by Braun and Clarke were used.¹⁶ The opportunity was identified, analysis, interpretation, theme and the report of patterns (themes) seized in the contents of the participants' narratives. The images were analyzed through the application of the theoretical support of iconographic analysis, which proposes the realization of a specific treatment, which allowed the location of codes deciphered in the form of content that expresses figurative testimony (imagery) as historical and empirical sources.¹⁷

It was carried out with the identification of convergences and complementarities of the contents and assembly of the descriptions next to the photographs of the participants. As a complementary strategy, we used the support of nvivo12 software for organization, systematization and data coding. In order to comply with the rigor in qualitative research, coreq recommendations were adopted.

In possession of the narratives and photographs, the photographic material produced, editing, assembly of facilities, selection, organization and systematization of the data collected in the interviews was carried out. To this end, it was supported by professionals in the field of marketing, media, journalism, health service management, technical supporters and professors/researchers in the area. The implementation of the intervention took place on a scheduled date and was structured in an agenda of thematic celebrations throughout the year 2019 and virtually in the year 2020, in the form of itinerant exhibition, through the realization of online thematic events and the use of digital social networks such as Instagram®.

The project was approved by the Research Ethics Committee, under the opinion number: CAEE: 11851619.2.0000.5531, and number: 3.313.517/2019. All ethical aspects were guaranteed in all phases of the research according to resolution 466/2012. The Terms of Free and Informed Consent (TCLE) were applied, as well as the Term of Granting the Use of Images referring to parents and babies.

Results

The study was 11 parents, of self-reported black race/color, aged between 18 and 42 years. All had incomplete elementary school, were residents of peripheral communities of the investigated municipality and only three were in paternity for the first time. The photographic exhibition entitled was exhibited in three moments, between the months of August and September 2019. In the first moment, the launch of the campaign to open the golden August celebration was launched, aimed at reaching and raising awareness of health professionals, service managers and health organizations, agents of the legislative and executive branch, activists in the area, representations of national and global organizations focused on early childhood actions, with a reach of approximately 100 participants.

The second moment of the exhibition of his gave in the public space of the city of Salvador, in an event entitled: University in the Square - UFBA is ours!, whose objective is to present to civil society an exhibition of the projects and scientific experiences developed by the university with potential directed to social, educational, scientific, artistic, cultural, sustainable, environmental, economic and political transformations, involving more than 29 colleges and undergraduate and graduate units of the university. In this event the exhibition was attended by approximately three thousand people.

In the third moment, the exhibition was mounted at the XIII Festival of Japanese Culture of Salvador 2019, an event of great magnitude held in the city of Salvador, aimed at promoting the appreciation of the culture of the Japanese community in Bahia, which was attended by about 60,000 people. At the level of computed records, visited the exhibition during this event, 700 people.

Along with the photographic records, the men, parents, unveiled the meanings attributed to fatherhood, aspiring to the motivations for the performance of active and responsible exercise, together with the care to be used to their sons and daughters. The parents highlighted the desire and concern to provide support to their companions, to their children and daughters during the processes of providing the initial care of newborns, exemplified in the contexts in which breastfeeding takes place, in direct care, in the expansion of proximity, transmission of affection, affection, in the performance of domestic activities and in the provision of the home.

The thematic categories defined for this study were: Thematic category 1: paternity and breastfeeding: male voices in focus and Thematic category 2: paternity and breastfeeding: male expressions in focus.

Thematic category 1: fatherhood and breastfeeding: male voices in focus

The theme of the content expressed in the male narratives exposed the voices about the new and the unexpected, the experience of paternalization and the exercise of paternity, birth, care for children, breastfeeding and the meanings/meanings of breast milk, the social attributes of masculinities, the affective-marital relationship and the presence/performance of the nurse in this context:

[...] I will contribute to the breastfeeding of my son by offering my love, affection, and dedicating myself to the care of the house while she rests. (E-01: Male, 32 years old, father of newborn 24 hours);

[...] in addition to contributing to the household duties, of which I already carry out, I want to get involved and be present in the care promoted to my son. (E-02: Male, 33 years old, father of newborn of 18 hours);

[...] the man needs to contribute in many circumstances, not only to the provision of the home, but also to participate in the performance of domestic activities and the first care of the baby. (E-03: Male, 41 years old, father of newborn with 24 hours of life);

[...] I already help in the livelihood of the house. Now with the arrival of another child, I will work harder, but that does not prevent me from participating in the care of my son with my wife. (E-04: Male, 35 years old, father of newborn with 24 hours of life);

[...] when I arrive from work, I intend to assist in the storage of the house, in the care as a baby, and I will be ready to give my best". (E-05: Male, 18 years old, father of newborn with 24 hours of life);

[...] As a beginning father that I am, I will seek to contribute to what my companion needs. Because of that, I've already started learning how to take care of the baby as well. It's something I've never done, but I'm willing to approach, learn and contribute to my son's care." (E-06: Male, 19 years old, father of newborn with 24 hours of life);

[...] to see my daughter grow up healthy is everything to us. I'm going to contribute by putting her in burping, I'm going to lull, and I'm going to help my wife with home care." (E-07: Male, 32 years old, father of newborn with 24 hours of life);

[...] I will seek to read about breastfeeding to know a little more about how to contribute to the growth of my daughter, because I know that man must be present in these moments, which are so important." (E-08: Male, 30 years old, father of newborn with 48 hours of life);

[...] Breast milk is sacred and is certainly the best way to promote care for my daughter. Because of this, I seek to participate in assisting in the supply of milked breast milk, because in our case the baby had difficulty in getting it near the breast. And in addition I have contact with the support of the nurse, helping me in this process. (E-09: Male, 48 years old, father of newborn with 72 hours of life);

[...] I know how hard it is for her to take care of the house and a child. I'm going to contribute to everything she needs, after all she's my daughter and my companion. (E-10: Male, 35 years old, father of newborn with 24 hours of life).

[...] participating in my daughter's care is my greatest gift. I'm going to assist my wife in every lawsuit. I know that breastfeeding is not an easy task, and therefore I intend to support it. (E-11: Male, 23 years old, father of newborn with 24 hours of life).

Thematic category 2: fatherhood and breastfeeding: male expressions in focus

This category is configured from the imagery presentation materialized in the photographs of men, parents, together with their newborns, who revealed contents of affection, concern, happiness, protection, affection and love in the face of the moment experienced.

It was evidenced that men are more present in health institutions, such as units designed to perform childbirth and postpartum care. In addition, men showed a desire to promote fatherhood in a present and approximate way from the contexts presented by their sons and daughters in the first hours and days of life, as well as expressed motivations to transpose affection, affection, love, concern and accountability to newborns. In one of the narratives, the paternal reference to the contributions of nurses' professional performance was to support the achievement of better results in breastfeeding and other care for newborns.

The fourth moment of the intervention was marked by the performance of interventional activities in virtual ambience. To this end, "Baby Week" was organized in 2020, between August 7 and 13, with the theme: "Looks for early childhood in times of pandemic". This intervention was configured in a strategy of social mobilization of intersectoral articulation with state and municipal agencies, the United Nations Children's Fund (UNICEF) and 26 other organizations that work for early childhood, a phase of life between zero and six years of age. The dissemination and strengthening of actions with a focus on promoting survival and full and integral child development, in compliance with the international agenda, was opportunistic.

In this intervention opportunity, 10 lives were held and the First International Meeting of Baby Week in the state of Bahia was held exclusively in virtual format, in the context of the Covid-19 pandemic, which was underway at the time of its realization. The meeting involved professionals from various areas of health, education, social sciences and other, national and international, students and families, totaling 3,774 views, more than 1,000 comments, 751 hours of exhibition and more than 316 subscribers. To do so, an online platform, a website, a YoutubeTM channel and an Instagram account have been created[®]. The involvement of international cooperation involved countries such as Colombia, Spain, the United States, Mozambique, Portugal and Japan.

Figure 1 - Presentation of the images that comprised the photographic exhibition: "lenses that achieve paternal responsibility in the breastfeeding process". Salvador, Bahia, Brazil, 2020.



Discussion

The findings of this study are able to express the results of the intervention research with a view to promoting strategies that stimulate the exercise of present and responsible paternity directed to the context of breastfeeding of newborns in a territory in Brazil. The contents seized from the researched participants and central actors of health interventions explained the nuances of the meanings and meanings of fatherhood, such as the triggering of the desire to occupy this space and to perform paternal care.

Initially, the question of why breastfeeding arises? In view of the exposure of the contributions of breastfeeding to the growth and development of the child, it implies emphasizing that these contributions are not exhausted in this axis, but is transpose for women, for men themselves and for society. Findings in the literature already reinforce the magnitude of these contributions, which calls for government, non-governmental, organized civil society, professionals and networks of health, education, legal, assistance, social security, labor and other orders to be engaged and committed to transforming disadvantageous scenarios of models of uncaredful, violent and absent paternity.

Involving men in the process of breastfeeding their newborn sons and daughters constitutes a powerful male empowerment strategy for the performance of the exercise of active and responsible parenthood, such as the promotion of health care, both in the logic of those who are recipients of direct care, both of men themselves, who in these circumstances, are placed as powerful agents of care.⁶⁻⁷ This context brings an important implication to public health, because it has an intimate relationship with the way men build themselves as social subjects, as well as dealing with the inscriptions of masculinities, in view of the intersectional contexts that surround them, in addition to the notions of self-care and health that they have access to and that are also welcomed by themselves.^{4,7,14}

Findings in the literature have drawn attention to the need to advance on the understanding of parental styles in order to recognize the paternal practices employed by men and the possible impacts generated on child development.¹⁸ It is also concerned with the contribution of paternal affection, communication and family socialization performed by men in the context of paternity.¹⁸ It is also concerned with the contribution of paternal affection, communication and family socialization performed by men in the context of paternity..¹⁹⁻²⁰ According to PNAISH's focus of attention, it is necessary to understand paternity beyond a legal obligation, but as a right of man to participate in the process as a whole, which includes the decision-making processes of having or not having children, planning how and when to have them, and even more processes involving the monitoring of pregnancy, the postpartum period and early childhood education.¹⁴

In the Brazilian context, research has pointed out that men when stimulated are available and sensitive to perform paternal care, exercise paternal and paternity, which signals the disruption of paradigms.¹⁹ However, men have also revealed that they have a reduced repertoire to confer care in the first days of the newborn's life, which raises the attention of nursing professionals

regarding health education and male empowerment in this context. Moreover, nurses and their nursing staff need to pay action and intervene in complex contexts, such as the experience of parents caring for children and/or daughters in hospitalization, since dilemmas of difficult coping such as the repression of paternity, dullness and emotional suppression, disarrangements in masculinities in the face of the illness of the son or daughter, may occur to men in this scenario.

Other nuances still need to be raised, such as the context of prematurity, in which parents are largely inability to produce care for newborns, especially breastfeeding processes.¹⁹⁻²⁰ It is also important to highlight the essentiality of the nursing work process in valuing paternal diversities and relational understanding of gender, in the search to recognize existing sexual and gender identities and the necessary support for men who may be able to work, as occurs with transgender men and in the commitment to cope with the pathologization of these bodies and their identities.^{7,21}

From the perspective of PNAISH, the context of fatherhood must include the dimensions of sexualities, which is seen with a significant dimension of human life, in view of subjectivity, and the affective and relational relationship that surrounds it. It also expands to the consideration of sexual rights from the recognition of the exercise of sexuality, which should not nullify people at an advanced stage of age, such as elderly men.¹⁴

In this sense, the findings of this study demonstrate that it is possible to sensitize men to the adoption of care for children, which can also positively imply their awakening for the care of their own health. Moreover, it advances in the dimension of sexual and reproductive rights, as mentioned in PNAISH, by emphasizing the need for male sensitization to exercise the right to participate in reproductive planning.¹⁴

At the institutional level, in Brazil, the Ministry of Health launched in 2016 the partner's prenatal guide for health professionals. Intentionality is that actions directed to fatherhood and care and early childhood care become daily in professional practices in health and nursing.²² Thus, there is a direction of the Ministry of Health for Primary Care, an essential space for nurses to use strategies for the elaboration and execution of care technologies with a focus on paternity, breastfeeding, reproductive planning, sexual and reproductive health masculine.¹¹

In view of the need to advance nursing and health practice with regard to the promotion of men's health from the perspective of paternity, it is emphasized for relevant contexts such as adolescent parenthood, the approximation of young adult men to sexual and reproductive rights, the fight against stigmas and prejudices about sexual and reproductive life, the recognition of the needs and projects of reproductive, family and life planning of men, such as the dissemination of health education that guarantees the provision of information on contraceptive methods, pregnancy and the exercise of responsible parenthood.¹⁴

In order for this paternal presence to be even more frequent in health services and other scenarios, it is necessary to have effective mobilization on the part of managers, technical supporters, health professionals, as well as from the regulatory spheres of the public sectors and also in the private sectors, as a way to foster the creation of a public agenda, that care, health and masculinities should be responsible.²³⁻²⁴ It should also be emphasized that the relationship

between father and children contributes to improve vaccine adherence to obtain better results at school and to increase the performance of paternal functions.

In view of these problematic contexts mentioned above, we reinforce the fact that a joint effort must be employed in order to make feasible advances in the scenario of men's involvement in breastfeeding. Thus, seek to converge with the fulfillment of the international agenda of priorities, as has been promoted by the United Nations, by outlining the objectives of sustainable development.²⁵ to be fulfilled by countries by the year 2030 and Brazilian as the strengthening of PNAISH and initiatives aimed at stimulating active and responsible parenthood.^{14-15,26}

According to a document on active paternity prepared by the United Nations Children's Fund (UNICEF),⁶ as well as the Brazilian Ministry of Health,²⁷ the role of the father in active vision is permeated by levels. The practical level is for the man to care and care about the needs and demands of the children and be taking care of the household chores. Emotional presence is the second level and is characterized by the construction of the bond and the emotional connection with the child.²⁸⁻³⁰ Personal transformation appears on a third level that is to understand the role and responsibility of being a parent and how it affects the social level. Thus, other contributions such as the reduction of violence and/or intrafamilial and conjugal abuse, the improvement of cohesion between parents and children, as well as advances in paternal care and the resignification of family dynamics, can be achieved.³⁰⁻³³

Developing strategies to promote present and responsible paternity that use in their devices the use of images for the creation of photographic exposure, strengthened health communication, noting that the resources employed are an expressive vehicle for the propagation of mobilizing information for health care. In addition, such intervention strengthens the spread of the male figure while being careful, which can stimulate others to improve and paternal exercise.

The development of the interventions allowed the transformation of traditional spaces, whether health or not, as well as inspired curiosity and sharpened interest in the theme addressed, especially among the male audience attending the exhibitions in the different roaming spaces. It should also be added that the intervention proposal designed and presented in this study can be easily reproduced and adapted in other contexts, such as those university, business, religious, of great circulation, such as subway stations, buses, airports and shopping malls. In this sense, we can see its potential and its capacity to generate in those who access it.

The limitations of this study are concentrated in the realization of a unique technique of collection of narrative data, which may have reduced the apprehension of empirical findings for the analysis of the phenomenon. The interviews were conducted on the same day of the photo shoot, which impacted on the depth of the data collected in the interview. Due to factors preventing the Covid-19 pandemic, it was not possible to conduct the new interviews with the parents participating in the initial stage of the intervention, which impacted access to data related to the first year of life of the children. Furthermore, investigations were not carried out with health professionals, managers, supporters, which prevents the possibility of generalization of findings from a professional perspective.

The findings indicate the referral of new strategies and the strengthening of existing ones as a way to overcome unfavorable indicators of the health of children, men, their partners and/or partners and family in a global way. In addition, it is recommended that such interventions be expanded in order to contemplate spaces of male belonging, as well as other services, in addition to health services, such as school spaces, university spaces, neighborhood movements, non-governmental organizations, legal, social assistance, labor and other orders.

Conclusion

The health intervention research aimed at promoting active and responsible parenthood proved to be effective in evidencing the motivation, sensitivity, engagement and integration of male health professionals and members of civil society regarding advances in breastfeeding. Men explained meanings and positive meanings related to the exercise of paternal care, revealing the male motivation to support breastfeeding of newborns.

The data disclosure-exposure strategy has led to the expansion of the strengthening of the paternal exercise in the relationship with breastfeeding, the family and the parent-child bond.

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