

# Breastfeeding as family teamwork

Family Initiative Research  
into Practice Briefing

**September 2016**



The Family Initiative exists to mobilise researchers and innovators to advance new knowledge and create higher impact child and family programmes.

The Family Initiative is a charity.

**[familyinitiative.org.uk](http://familyinitiative.org.uk)**

**[duncan@familyinitiative.org.uk](mailto:duncan@familyinitiative.org.uk)**



# familyinitiative

This briefing was compiled by Jennifer Abbass-Dick (Canada), Tran Huu Bich (Vietnam), Duncan Fisher (UK, Family Initiative), John Rempel (Canada) and Lynn Rempel (Canada). Reviews of all new research on breastfeeding and family influence can be found on Family Initiative's website.

## [familyincluded.com/category/breastfeeding](https://familyincluded.com/category/breastfeeding)

---

**Jennifer Abbass-Dick** is an Assistant Professor in Nursing at the University of Ontario Institute of Technology, Canada. Her research involves designing and evaluating coparenting breastfeeding interventions.

[jennifer.abbasdick@uoit.ca](mailto:jennifer.abbasdick@uoit.ca)

---

**Tran Huu Bich** is an Associate Professor in Epidemiology at Hanoi School of Public Health in Vietnam. His research is focused on understanding and promoting the role of fathers in child nutrition and development.

[thb@hsph.edu.vn](mailto:thb@hsph.edu.vn)

---

**Lynn Rempel** is an Associate Professor in Nursing at Brock University, Canada. She and John Rempel have studied the role of fathers as members of the breastfeeding and parenting team in Canada, Botswana and Vietnam.

[lrempe@brocku.ca](mailto:lrempe@brocku.ca)

**John Rempel** is a Psychology Professor at St. Jerome's University at the University of Waterloo, Canada. His research is focused on understanding a variety of interpersonal processes in couple and parent-child relationships.

[jrempe@uwaterloo.ca](mailto:jrempe@uwaterloo.ca)

---

**Duncan Fisher** has worked for 20 years in UK promoting family inclusive maternal healthcare, with a particular focus on fathers, and is now returning to international work having given it up to care for his young children.

[duncan@familyinitiative.org.uk](mailto:duncan@familyinitiative.org.uk)

# Supporting breastfeeding is a family endeavour (everywhere)

Support from family is critical for the success of breastfeeding: if fathers and family members are supportive of breastfeeding, the mother is more likely to initiate breastfeeding and to breastfeed for longer. Family influence is particularly salient where decision-making is more of a cooperative effort, such as in many developing countries.<sup>1</sup>

Many studies have shown that women often rate the influence of the father above all others, including professionals and other family members.<sup>2</sup>

Two systematic reviews of research mostly from developing countries have demonstrated the influence of grandmothers.<sup>3&4</sup>

- ▶ Teenage mothers are more influenced by family, particularly their mothers, than by their peers and professionals.<sup>5</sup>
- ▶ Fathers can influence grandmothers in favour of breastfeeding where there are different views within the family, for example in Vietnam.<sup>6</sup>

The way that families influence breastfeeding is very diverse, depending on the make-up of the family, local culture and location (e.g. urban/rural). In some cultures families are more supportive of breastfeeding than in others – for example, more so in Lebanon than in Ghana or Nigeria.<sup>7</sup> Also it is changing fast as families become more globally interconnected via the Internet.

Abbass-Dick and Dennis (in press) have defined five domains of breastfeeding as teamwork in the Breastfeeding Coparenting Framework:<sup>11</sup>

### **1. Set breastfeeding goals together**

If a family group agrees the goals, then success in achieving them is much more likely.

### **2. Share responsibility**

Mothers should not be considered to be solely responsible for the care of a baby, including feeding. Family members, particularly fathers, are more likely to step up to take responsibility when they understand how important their own part is in securing the health and welfare of their child.

### **3. Support each other**


There are numerous ways that family members can support breastfeeding, particularly when the mother is encountering problems, such as when the baby is learning to latch on and the mother is exhausted. Support can be emotional, showing appreciation for the breastfeeding and what it does for the baby. It can involve simply sitting together and enjoying the time. It can be practical, ensuring the environment is quiet and comfortable for breastfeeding. Family members can help share tasks around the house that the mother might feel she is neglecting. We say “support each other” because there is much mothers can also do to support another key component of family teamwork, namely the involvement of others in caring for the baby.

### **4. Fathers and others get involved in caring for the baby**

A baby needs a lot more than just feeding and, above all, they need to bond with other family members. Burping, putting to bed, bathing, changing diapers and playing are all things that babies need. When a carer meets a baby’s needs in a warm and loving way, the baby will bond with them. Human parenting has always been collaborative in this way, from the first day of a baby’s life. As one father put it to us, “Spending time with your child is a gift.”

### **5. Communicate well and solve problems together**

This is particularly important when there are struggles and/or when the mother is very tired – when the early cessation of breastfeeding is most likely to happen.



---

*“ Whatever its form, family influence  
exists for every mother.*

---

## Fathers and families want more information (and rarely get it)

There are a host of studies that find fathers and family members commonly do not get information about pregnancy, childbirth and baby care from maternal and newborn health services, even when they accompany the mother to health facilities. This applies to breastfeeding support.<sup>8 9</sup> A recent study showed that Pakistani fathers are supportive of breastfeeding but none reported being given any information. Most felt left out.<sup>10</sup>

Even if fathers are not actively demanding it, the offer of information to them changes the dynamic and challenges any culture that holds women alone responsible for childcare.

## Breastfeeding as “teamwork”

Our own testing and research has led us to the idea of family “teamwork” as the most effective way to support breastfeeding. This approach is demonstrated in a website for parents in Canada: [www.BreastfeedingInfoForParents.ca](http://www.BreastfeedingInfoForParents.ca). This site presents three versions: for couples, for mothers without the father present and for indigenous families. The same principles apply across all of these family forms, although with fathers there is the additional consideration of his particular parental relationship to the baby.

The key to effective breastfeeding support is responsiveness to the mother's needs and respect for her autonomy

Several studies have shown that sometimes breastfeeding is actually *less* when other family members are *more* involved in caring for the baby.

---

*“ It is not family support per se that improves breastfeeding – it is the right kind of support, support that is responsive to the mother’s needs and respects her autonomy.*

---

This happens if:

- ▶ the couple relationship is poor;<sup>12</sup>
- ▶ the father is not well informed (found in a Japanese study);<sup>13</sup>
- ▶ the father or grandmother is highly involved in parenting but not present a lot to provide emotional support (a UK study).<sup>14</sup>

In contrast, a study from Sweden has shown that increased use of paternity leave by fathers is associated with greater breastfeeding.<sup>15</sup> We believe that the high level of support for both mothers and fathers and for breastfeeding in Sweden explains why more father involvement in this country results in more breastfeeding.

In our own research, Rempel and Rempel analysed different kinds of support that fathers might give to breastfeeding: (1) being well informed, (2) providing practical support, (3) appreciating the mother, (4) being present when breastfeeding is happening and (5) being responsive to what is needed (and to know when help is not needed). We found that when knowledgeable fathers are present and responsive, breastfeeding continued for longer, but that the opposite was more likely to happen when they were less present and less responsive.<sup>16</sup>

So it is not family support *per se* that improves breastfeeding – it is the right kind of support, support that is responsive to the mother's needs and respects her autonomy.

---

*“ The more the father feels emotionally bonded to the baby,  
the more likely he is to support breastfeeding.*

---

## The importance of father-baby bonding for breastfeeding

In the programmes we have developed we have included support for the father-baby bond as part of the programme. Our principle is that the more the father feels emotionally bonded to the baby, the more likely he is to support breastfeeding. Is there a risk that fathers, in wanting to bond with the baby, could limit breastfeeding so that they can get in on the action of feeding?

A minority of fathers do feel they are missing out when the mother breastfeeds. A very recent study from Canada explored this.<sup>17</sup> The majority of the fathers, however, saw that there are many ways to bond with the baby other than breastfeeding, which does not go on all day. The researchers in the Canadian study advocate that a father’s instinct to love and protect their child should be appealed to by explaining the importance of breastfeeding for the baby and the high influence of his support for it.

## How to support fathers and family members – examples from around the world

We cannot say definitively what approaches work best: this field of research is active but still in its infancy. But we can see a variety of methods from all over the world that are yielding positive results.

A key consideration in every situation is practical viability. Engaging families must be easy and low cost. Much of the design of good support services at the local level will be around considerations of sustainability.

**Good information** is a universal feature of successful breastfeeding teamwork programmes. We believe information should focus on two things: breastfeeding as family teamwork and the importance of the bonds between babies and other family members, fathers in particular.

**Antenatal education and postnatal support** are a key component of most of the programmes in existence today. The antenatal period is an opportunity to engage with families. Often this is combined with information postnatally.

A 2013 randomised controlled trial in Australia of a 2-hour education session antenatally followed by weekly information postnatally resulted in an 8.5% increase in the breastfeeding rate at 6 weeks.<sup>18</sup> The same team is now testing a similar arrangement but involving a digital “MilkMan” app postnally ([www.pifistudy.net.au/milkman](http://www.pifistudy.net.au/milkman)), and comparing the impact of the antenatal session alone, the app alone and the two together.<sup>19</sup>

A coparenting breastfeeding intervention in Canada provided to both parents in the postnatal period increased breastfeeding duration, fathers breastfeeding self-efficacy and the amount of breastfeeding help fathers provided to the mothers in the first 6 weeks.<sup>20</sup>

**Home visits**, during which other family members are specifically engaged, form part of our approach in Vietnam.

**Seeing the parents together.** We believe that it is important sometimes for both parents to hear things together and to see the other hearing it. This supports better decision-making at home.

**Community connections**, we believe, are important. Fathers are more likely to be nurturing if they believe the community is behind them. Social events are one way of challenging local culture if it does not give fathers permission to be nurturing. We do not need to precipitate a revolution in local culture: it is a matter awakening good local tradition and practice, building small changes until suddenly the tipping point is reached, and a particular practice, in our case, men supporting breastfeeding, becomes the norm. We are helped by a proliferation of images of nurturing fatherhood on social media, which are reaching more and more of the world.

## In a comprehensive family approach to breastfeeding in Vietnam:

- ▶ early initiation of breastfeeding after birth doubled from 40% to 81%
- ▶ exclusive breastfeeding at 4 months also doubled, from 11% to 21%
- ▶ exclusive breastfeeding at 6 months quadrupled from 4% to 16%

In Vietnam, Bich and colleagues organised an intervention that included all the above methods. Early initiation of breastfeeding after birth doubled from 40% to 81%. Exclusive breastfeeding at 4 months also doubled, from 11% to 21%. Exclusive breastfeeding at 6 months quadrupled from 4% to 16%.<sup>21</sup> Fathers were also more likely to report active involvement in supporting mothers to practice exclusive breastfeeding during the antenatal and postnatal periods.<sup>23</sup>

This work in Vietnam continues today with support from Grand Challenges Canada in the *Saving Brains* programme. Bich, Rempel, Rempel and Hoa are promoting the concept of fathers and mothers as a parenting team, using the analogy of a two-person badminton team (common in Vietnam), wherein both people need to have flexible skill sets, ongoing awareness and communication, a readiness to step in when needed, and a willingness otherwise to step back and trust the partner to do their part. Fathers are also encouraged to develop a stronger relationship and become more involved with their infants from the moment of birth. Not only have breastfeeding rates increased, but also the relationship between the parents has improved and fathers have engaged more with their babies.



# Our recommendations for what next: setting a new agenda

A 2012 literature review, mostly from low-income countries, by Alive and Thrive concluded, “Experience in the field suggests that failure to include fathers in infant and young child feeding may limit efficacy and effectiveness.”<sup>24</sup>

Engaging families in breastfeeding is a highly effective tool for increasing breastfeeding, one of the best opportunities to do so in the world today. Yet the vast majority of breastfeeding literature and practice does not address this. Even UNICEF’s 10 Steps make no reference to the enormous influence of families and the need to engage with them.<sup>25</sup>

We propose three actions to set a new agenda:

- 1** A global event that brings together all the pioneers of family teamwork in breastfeeding, in order to explore what works and to form a permanent network and a resource of value to every breastfeeding programme in the world.
- 2** The launch of a campaign that actively promotes the need to support family teamwork in breastfeeding and raises awareness decisively.
- 3** A project to review UNICEF’s 10 Steps in the light of the evidence of the influence of families and the need to support family teamwork.

# References

- 1 Alive & Thrive (2012), Literature review: fathers support infant and young child feeding: their contributions to better outcomes ([aliveandthrive.org/wp-content/uploads/2014/11/Literature-Review-Dads.pdf](http://aliveandthrive.org/wp-content/uploads/2014/11/Literature-Review-Dads.pdf))
- 2 Abbass-Dick JM (2013), Evaluating the effectiveness of a coparenting breastfeeding support intervention (COSI) on exclusive breastfeeding rates at twelve weeks postpartum, Doctoral dissertation, University of Toronto ([tspace.library.utoronto.ca/handle/1807/70043](http://tspace.library.utoronto.ca/handle/1807/70043))
- 3 Aubeil J (2012), The role and influence of grandmothers on child nutrition: culturally designated advisors and caregivers, *Maternal Child Nutrition* 8 ([www.ncbi.nlm.nih.gov/pubmed/21951995](http://www.ncbi.nlm.nih.gov/pubmed/21951995))
- 4 Negin J, Coffman J, Vizintin P & Raynes-Greenow C (2016), The influence of grandmothers on breastfeeding rates: a systematic review, *BMC Pregnancy and Childbirth* ([www.ncbi.nlm.nih.gov/pubmed/27121708](http://www.ncbi.nlm.nih.gov/pubmed/27121708))
- 5 Moran VH, Edwards J, Dykes F & Downe S (2007), A systematic review of the nature of support for breast-feeding adolescent mothers, *Midwifery* 23 ([www.sciencedirect.com/science/article/pii/S0266613806000726](http://www.sciencedirect.com/science/article/pii/S0266613806000726))
- 6 Đào Thị Diem My et al. 2012, unpublished qualitative study; available from the authors of this briefing
- 7 Balogun OO, Dagvadorj A, Anigo KM, Ota E & Sasaki S (2015), **Factors influencing breastfeeding exclusivity during the first 6 months of life in developing countries: a quantitative and qualitative systematic review**, *Maternal and Child Nutrition* 11 ([onlinelibrary.wiley.com/doi/10.1111/mcn.12180](http://onlinelibrary.wiley.com/doi/10.1111/mcn.12180)) abstract)
- 8 Goodman JH (2005), Becoming an involved father of an infant, *Journal of Obstetric, Gynecologic & Neonatal Nursing* 34 ([onlinelibrary.wiley.com/doi/10.1177/0884217505274581](http://onlinelibrary.wiley.com/doi/10.1177/0884217505274581)) abstract)
- 9 Ingram J & Johnson D (2004), A feasibility study of an intervention to enhance family support for breast feeding in a deprived area in Bristol, UK, *Midwifery* 20 ([www.ncbi.nlm.nih.gov/pubmed/15571885](http://www.ncbi.nlm.nih.gov/pubmed/15571885))
- 10 Mithani Y, Premani ZS, Kurji Z & Rashid S (2015), Exploring fathers' role in breastfeeding practices in the urban and semiurban settings of Karachi, Pakistan, *The Journal of Perinatal Education* 24 ([www.ingentaconnect.com/content/springer/jpe/2015/00000024/00000004/art00007](http://www.ingentaconnect.com/content/springer/jpe/2015/00000024/00000004/art00007))
- 11 Abbass-Dick JM & Dennis CL (in press), Breastfeeding coparenting framework: a new framework to improve breastfeeding duration and exclusivity, *Family and Community Health*
- 12 Sullivan ML, Leathers SJ & Kelley MA (2004), Family characteristics associated with duration of breastfeeding during early infancy among primiparas, *Journal of Human Lactation* 20 ([jhl.sagepub.com/content/20/2/196](http://jhl.sagepub.com/content/20/2/196).short)
- 13 Ito J, Fujiwara T & Barr RG (2013), Is paternal infant care associated with breastfeeding? A population-based study in Japan, *Journal of Human Lactation* 29 ([jhl.sagepub.com/content/29/4/491](http://jhl.sagepub.com/content/29/4/491).short)
- 14 Emmott EH & Mace R (2015), Practical support from fathers and grandmothers is associated with lower levels of breastfeeding in the UK Millennium Cohort Study, *PLOS One* ([journals.plos.org/plosone/article?id=10.1371/journal.pone.0133547](http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0133547))
- 15 Flacking R, Dykes F & Ewald U (2010), The influence of fathers' socioeconomic status and paternity leave on breastfeeding duration: a population based cohort study, *Scandinavian Journal of Public Health* ([sjp.sagepub.com/content/early/2010/02/10/1403494810362002](http://sjp.sagepub.com/content/early/2010/02/10/1403494810362002).abstract)
- 16 Rempel LA, Rempel JK & Moore KCJ (2016), Relationships between types of father breastfeeding support and breastfeeding outcomes, *Maternal & Child Nutrition* ([onlinelibrary.wiley.com/doi/10.1111/mcn.12337](http://onlinelibrary.wiley.com/doi/10.1111/mcn.12337)) abstract)
- 17 de Montigny F, Larivière-Bastien D, Gervais C, St-Arneault K, Dubeau D & Devault A (2016), Fathers' perspectives on their relationship with their infant in the context of breastfeeding, *Journal of Family Issues* ([jfi.sagepub.com/content/early/2016/05/24/0192513X16650922](http://jfi.sagepub.com/content/early/2016/05/24/0192513X16650922))
- 18 Maycock BR, Binns CW, Dhaliwal S, Tohotoa J, Hauck Y, Burns S & Howat P (2013), Education and support for fathers improves breastfeeding rates: a randomized controlled trial, *Journal of Human Lactation* 29 ([www.ncbi.nlm.nih.gov/pubmed/23603573](http://www.ncbi.nlm.nih.gov/pubmed/23603573))
- 19 Maycock BR et al. (2015), A study to prolong breastfeeding duration: design and rationale of the Parent Infant Feeding Initiative (PIFI) randomised controlled trial, *BMC Pregnancy and Childbirth* ([www.biomedcentral.com/1471-2393/15/159](http://www.biomedcentral.com/1471-2393/15/159))
- 20 Abbass-Dick J, Stern SB, Nelson LE, Watson W & Dennis CL (2014), Coparenting breastfeeding support and exclusive breastfeeding: a randomized controlled trial, *Pediatrics* 135 ([pediatrics.aappublications.org/content/early/2014/11/25/peds.2014-1416](http://pediatrics.aappublications.org/content/early/2014/11/25/peds.2014-1416))
- 21 Bich TH, Hoa DTP & Målqvist M (2014), Fathers as supporters for improved exclusive breastfeeding in Viet Nam, *Journal of Maternal Child Health* 18 ([link.springer.com/article/10.1007/s10995-013-1384-9](http://link.springer.com/article/10.1007/s10995-013-1384-9))
- 22 Bich TH, Hoa DTP, Ha NT, Vui LT, Nghia DT & Målqvist M (2015), Fathers' involvement and its effect on early breastfeeding practices in Viet Nam, *Maternal & Child Nutrition* 12 ([onlinelibrary.wiley.com/doi/10.1111/mcn.12207](http://onlinelibrary.wiley.com/doi/10.1111/mcn.12207)) abstract)
- 23 Bich TH & Cuong MN (2016), Changes in knowledge, attitude and involvement of fathers in supporting exclusive breastfeeding: a community-based intervention study in a rural area of Vietnam, *International Journal of Public Health* ([www.ncbi.nlm.nih.gov/pubmed/27586035](http://www.ncbi.nlm.nih.gov/pubmed/27586035))
- 24 Alive & Thrive (2012), Literature review: fathers support infant and young child feeding: their contributions to better outcomes ([aliveandthrive.org/wp-content/uploads/2014/11/Literature-Review-Dads.pdf](http://aliveandthrive.org/wp-content/uploads/2014/11/Literature-Review-Dads.pdf))
- 25 The Canadian version of the 10 Steps has added one reference to families, adding family to the recommendation to provide information antenatally to mothers.