

# FATHERHOOD AND BREASTFEEDING IN IRELAND

## SLIDE 1 - INTRODUCTION

Hello, my name is Jemimah Bailey and I'm from Trinity College Dublin, Ireland.

I am in the first year of my PHD studies, so what I'm planning to present to you today is the background to the study I am doing – why I think it is important to do.

It has been very interesting listening to the presentations other people have been giving in the past two days, as it provides a real contrast to the culture of parenting in Ireland, where I would say that 'intensive parenting' has not yet hit in the same way that it has in North America and the UK. There are some advantages to that fact – no one in Ireland would think you were a 'wimp' for choosing to have an epidural rather than a natural birth – which came as something of a relief to me, as I've had both of my children in Ireland!

Anecdotally, I would say one of the ways that intensive parenting has reached Ireland is in the increasing level of 'consumer parenting' – the amount 'kit' parents seem to feel obliged to acquire for their babies.

Ireland has the lowest breastfeeding rate in Europe. It has been interesting to breastfeed in a culture where it is not considered the norm, and where to breastfeed is sometimes considered 'extreme' behaviour, in the way that in other countries, women who breastfeed long term are considered extreme.

It was my growing awareness of the differences between parenting culture in Ireland and in other parts of the world, and my position as an English woman rearing my children in Ireland, where I have a foot in two cultures, that led to my interest in looking at these issues in more detail.

When it came to my PHD, I started by looking at the discourse around breastfeeding, and particularly looking at what kinds of factors influence the choices that women make when it comes to feeding their babies. So many strands play a part into that decision, but I was increasingly interested to find out about the role that partners and significant others play, specifically looking at fathers.

I wasn't too surprised to find that most research suggests that the fathers' role is influential in the feeding decision, and it appears from the few interventions that have been reported, that educating and preparing men about breastfeeding leads to higher initiation and longer duration rates.

I also wasn't very surprised to find that virtually no research on fathers' attitudes towards or experiences of infant feeding had been done in Ireland. In fact there is very little research on fathers and fatherhood in Ireland.

This led to my decision to focus on fathers' experiences, not just of feeding, but of their experience of the transition to fatherhood.

## **SLIDE 2 – BACKGROUND TO STUDY**

What I hope to briefly outline for you today is some of the background to my study and what it hopes to achieve.

I will start by looking briefly at the role fathers play in the infant feeding decision, then describe the discourse around infant feeding in Ireland. I will go on to look at the discourses around fathers, masculinities and gender in Ireland. I will finish by outlining the structure of my research project.

My plan is to cover the more descriptive issues as quickly as possible, but if anyone has any questions about any of these areas, please do ask, and I also have a list of references of research I refer to in this document, as well as further reading which I'm happy to give details of if people want to contact me.

## **SLIDE 3 - FATHERS AND INFANT FEEDING**

Internationally, research on fathers and breastfeeding has focused on three main areas:

- Influence of men/partners in relation to infant feeding decision
- Attitudes and knowledge of men in relation to breastfeeding/formula feeding.
- Men's experience of breastfeeding.

There have also been a number of studies looking at the success of **intervention programmes**.

A frequent criticism of research into men and breastfeeding is that attitudes towards breastfeeding are reported by the women partners of men, rather than by the men themselves.

My study will primarily focus on men, by interviewing them directly I hope to uncover their accounts of their expectations and experience of the transition to fatherhood.

## SLIDE 4 – INFLUENCING THE DECISION

The research strongly suggests that men play an important role in influencing the decision whether to breast or formula feed.

- Voss, Finnis and Manners (1993) found that over 70% of fathers reported that they had been involved in the decision.
- Sharma and Petosa (1997) report that 75% of mothers say fathers are important to the breastfeeding decision.
- Bromberg Bar-Yam et al's literature review (1997) shows that fathers are frequently cited by mothers as the main source of support for their decision to breastfeed.
- Giugliania et al (1994) reported that women who said their partners were favourable were more likely to breastfeed and that fathers' attitudes were the most important influencing factor, irrespective of maternal age, ethnicity, education and marital status.
- This concurs with the findings of Littman et al (1994) who found that breastfeeding intention was significantly related to fathers' level of education and his perceived approval of breastfeeding. This study found that a father's strong approval led to 98.1% of mothers breastfeeding, compared to 26.9% of women breastfeeding when their partners were indifferent to feeding choice.
- Scott et al (1997) found that women who reported supportive partners were ten times more likely to initiate breastfeeding than those who perceived their partners as ambivalent or negative.
- Rempel and Rempel (2004) found that men's beliefs about breastfeeding predicted their partners' intentions over and above the woman's own reasons and intentions.
- One study (Scott, Shaker and Reid, 2004) failed to find an association between feeding choice and paternal attitudes, but did find that couples' attitudes were significantly correlated with one another. Maternal attitudes were found to be a significant predictor of feeding choice.

## **SLIDE 5 – MALE KNOWLEDGE AND ATTITUDES**

Some studies have found that men view breastfeeding as having negative outcomes and are unaware of the benefits to their children.

- In addition to being unaware of the benefits of breastfeeding Freed, Frayley and Schanler (1992) found that of fathers who planned to have formula fed children 44% thought that breastfeeding makes breasts ugly, 72% felt it interferes with sex, 87% did not want their partner to breastfeed and 84% did not respect women who breast feed. This study, which looked at fathers with both breast and formula feeding preferences found that both groups believed that breastfeeding in public was unacceptable.
- Shepherd, Power and Carter (2000) examined the correspondence of breastfeeding and formula feeding couples' attitudes towards infant feeding. The study found that fathers of formula fed babies had limited knowledge of the benefits of breastfeeding. Fathers of both formula and breast fed babies were more embarrassed than their partners about breastfeeding in front of family members.
- Another study conducted by Shaker, Scott and Reid, (2004) indicated that parents of formula feed infants had poorer knowledge of breastfeeding – in other words, breastfeeding parents were more knowledgeable about breastfeeding's benefits.
- Other studies show that while some men can be positive about breastfeeding, they lack knowledge about various aspects. Pollock, Bustamante-Forest, Giarratano (2002) found that 81% of men would prefer their babies to be breastfed but that they had incomplete information on whether women need a special diet to breastfeed and what specific benefits breastfeeding has.

My study will explore the knowledge and attitudes of fathers towards infant feeding, as well as other aspects of infant care and domestic responsibilities and roles.

## **SLIDE 6 – EXPERIENCES**

When it comes to the experience of men whose partners are or have breastfed, a common theme emerges of initial pre-birth support and enthusiasm for breastfeeding being dampened by the 'realities'.

Jordan and Wall's (1990) often cited description of the 'darker side' of fathers' experience of breastfeeding highlighted a number of negative aspects for men

whose partners are breastfeeding. Despite the fact that the men in the study were positive about breastfeeding prenatally, once the infant was born and a breastfeeding relationship established, the fathers expressed reservations about it.

Fathers spoke of a lack of opportunity to develop a relationship with their child, that they seemed to ascribe to the exclusivity of the breastfeeding dyad, and feeling inadequately equipped to meet their infants' needs, due to their inability to provide the sustenance and comfort of breastfeeding.

Gamble and Morse (1993) studied 14 middle class Canadian men's experience of breastfeeding. Again, fathers were prenatally committed to breastfeeding as beneficial to their infants, and unaware of any impact on their own lives. The reality of the breastfeeding experience was that fathers felt 'increasingly inadequate and frustrated when faced with caring for their infants in the absence of their spouses' (p360).

To deal with the inconsistencies between their expectations and the reality, the fathers adopted a 'postponing process'. The authors identify four aspects to this process; rationalizing the situation (it won't last forever), reinforcing benefits of breastfeeding (not having to get up at night, observing partners feeding), compensating behaviours (involved in other aspects of care) and catching up (after weaning).

The fathers in this study identified their ambivalence towards breastfeeding, and felt that it had an impact on the quality of the relationship they were able to establish with their infant.

Neither of these frequently cited studies explores the other factors which may act as barriers for fathers in developing a relationship with their infant, even though one of the Jordan and Wall research participants reflected how his daughter went through a stage where she 'preferred' her mother 'probably because *she spent more time with her*' (emphasis added).

<p>My study will explore other factors such as the availability of paternity leave, work patterns, attitudes and beliefs about the fatherhood role were not mentioned in these studies. It will also include the experiences of fathers whose children are formula fed for comparison.</p>
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A more recent, though small scale study (Okon, 2004) found that men talked of breastfeeding as 'good', 'natural' and 'important'. Some discussed difficulties, some were more nonchalant about it. Once again the theme of postponement of the relationship with the infant and effect on the relationship with the mother – for example the impact on sexual activity – were highlighted.

Throughout these studies of fathers and infant feeding a common theme of a lack of information and preparation emerges. Many authors recommend that fathers should be targeted by health professionals and health promoters, and that more education about the benefits and realities of breastfeeding is needed.

## **SLIDE 7 - INTERVENTIONS**

The small number of studies that describe interventions aimed at fathers would seem to suggest that providing information and support to expectant and new fathers results in improved breastfeeding rates.

- Cohen, Lange and Slusser (2002) describe a corporate lactation programme focused on promoting breastfeeding through male employees. The programme included education classes, individual lactation support, breast pumps. Outcomes for babies whose father's participated in programme were an average breastfeeding duration of 8 months, 69% of women were still breastfeeding at six months, which was significantly higher than the either the state or national average. Benefits of breastfeeding for employers were highlighted – less absenteeism as a result of healthier babies.
- Stremmer and Lovera (2004) reported on a programme of peer dads, recruited, trained and hired to give parenting and breastfeeding information to other dads. The study showed that breastfeeding initiation rates increased at clinics employing peer dads.
- Wolfberg, Michels, Shields, O'Campo, Bronner and Bienstock (2004) reported on an educational intervention aimed at fathers, with a two hour infant care and breastfeeding promotion class and a control group on infant care only. Breastfeeding was initiated by 74% of partners of the intervention group and 41% in the control group.

## **PART TWO**

### **SLIDE 8 – IRELAND AND BREASTFEEDING**

Ireland has the lowest rate of breastfeeding in Europe, according figures collected between 1998-2002.

Feeding method at hospital discharge in 2003 (latest NPRS figures available):

Formula	55.06%
<b>Breast</b>	<b>41.43%</b>
Combined	3.37%

(Just for comparison the UK breastfeeding initiation rate in 2005 was 76% (Infant Feeding Survey)).

NPRS note: only national data source currently available on infant feeding. There is a 3-4 year time lag between collection and availability. At present there is no national source of infant feeding data following discharge from maternity hospital/care.

### Breastfeeding duration

National figures not currently collected.

However some small scale surveys undertaken by health boards provide some data, which suggests that at 16 weeks between 6 and 12% of mothers are still breastfeeding.

	NEHB	MWHB	NWHB
Year of study	1995	1996	1998-2000
BF rate at hospital discharge	34.8%	34.2%	44%
BF rate at approx 16 weeks	10.1%	12.7%	6%

(Interim report of the National Committee on Breastfeeding, 2003)

### Hospital discharge time

0-1 days 12.1%

2 days 27 %

**3-5 days 54%**

6-8 days 5.4%

### Maternity leave

As of 1 March 2007, women are entitled to 26 weeks paid maternity leave, and an additional 16 weeks unpaid maternity leave, a total of 42 weeks.

(In 2001 maternity leave was increased from 12 weeks to 18 weeks, with a further 8 weeks unpaid leave.)

## **SLIDE 9 – BREASTFEEDING POLICY IN IRELAND**

1994 First National Breastfeeding Policy.

2001 National breastfeeding co-ordinator appointed

2003 Interim report of the National Committee on Breastfeeding

2005 National Breastfeeding Strategy – five year plan – launched.

- Target 1: Development of infant feeding data collection system
- Target 2: Initiation rate increase 2% per year. Duration rate increase 2% per year.
- Target 3: 100% participation in Baby Friendly Hospital Initiative by end of five year timeframe.
- Target 4: Ten regional co-ordinators in post by October 2006.

## **SLIDE 10 – IRISH RESEARCH ON BREASTFEEDING**

There is very little 'official' research into breastfeeding in Ireland, although there are a number of small scale research projects taking place in various institutions, including:

Rosyln Tarrant: A Study of Socio-Demographic, Attitudinal and Cultural Factors Related to Breast-Feeding in Terms of Initiation and Duration

Barbara Whelan: Addressing Health Inequalities in Childhood: Bridging the Gap in Breastfeeding Initiation and Duration (Knowledge, attitudes and training needs of healthcare professionals)

Genevieve Becker: Acquiring the manual skills for breastfeeding - evaluating strategies for increasing maternal competency. Supervised by Mary Renfrew and Trudie Roberts (Medical Education Unit), part-time. Commenced November 2003.

Most of the research that is being carried out is under the auspices of the health, medicine and nutrition departments.

## **SLIDE 11 – WHAT DO PEOPLE THINK?**

A 1996 study of 16-19 year olds in Co Galway schools found:  
80% believed breastfeeding was best  
78% intended breastfeeding for their own children  
A northern Irish survey of teenagers found that 63% of students felt breastfeeding should be prohibited in public.

A health board survey (Midland Health Board) found that the vast majority of people thought that generally people get embarrassed when they see a mother breastfeeding. However, the majority also felt that women should not stay out of sight when they are breastfeeding.

A Dublin Community Care Area Survey found that 84% of respondents said they would have no problem with a woman breastfeeding nearby.

The North Western Health Board research into 316 pregnant women (1998-1999) reported:

55% of women thought breastfeeding was best for baby

45% of women were planning to breastfeed

14% thought it boosted baby's immunity

13% thought it reduced the chance of baby getting infections

2% thought baby was more content

15% were undecided about feeding method

51% said they made feeding method decision before pregnant

38% thought it disadvantage no one could help with feeding

30% thought it would be awkward to feed in public

16% felt process of breastfeeding was embarrassing

(Growing up in the North West - Profile of Child and Adolescent Health in the North Western Health Board)

## **SLIDE 12 – INTERNET DISCUSSION BOARDS**

One source of opinions about breastfeeding in Ireland is health and parenting websites. These websites are a rich source of the wide variety of attitudes and beliefs held by Irish people and provide a valuable snap shot of the discourse around breastfeeding. I'm currently working on a paper looking at this discourse in more detail.

One such website, [www.irishhealth.com](http://www.irishhealth.com) held a poll on why people felt Ireland had such a low breastfeeding rate.

42% of respondents ascribed the low rate to 'fear/embarrassment', and 24% lack of practical support. 13% felt it was due to 'concern over its effects on the body' – presumably the perception that breastfeeding makes breasts 'sag' or 'ugly'.

Some quotes from the comments made by respondents to the online poll:

## **SLIDES 13 AND 14 – COMMENTS**

"Some mothers want their bodies back for themselves and their man after pregnancy, and so they can also go out for a few drinks. They may not feel that they want to be the only person who can feed the baby."

"I was in a bank queue last year. A lady in front of me had her baby with her who started to cry. She very discreetly breast fed the child. A man and his wife walked by her and noticed that she was feeding. He said loudly... "what you are doing is a disgusting thing to be doing in a bank in front of all these good people!". They walked off tutting. I told her not to mind them."

"Part of it is the long shadow of McQuaid - BF was somehow dirty and a bit sexual, plus all those nun-run hospitals where it "wasn't modren" in the 1960s, which means a whole generation didn't do it and don't know how. Your Ma is usually the best support for BF, but if she doesn't know how, most women won't do it. My wife fed all four, and at least four other women took it up on their second or third child because they saw how easy it is and they could ask her for advice. The Rotunda was appalling - didn't want to let her keep the baby in her bed, constantly offered bottles so she could "get some sleep", and of course none of the ward staff had breastfed. And this was with a policy to promote it. In summary, BF is best passed on from mother to mother, but a whole generation missed out and it will take a long time to get that knowledge back again."

"I know my very repressed ultra-Catholic parents would be disgusted with me not hiding away to do it. I cannot even imagine feeding a baby in front of them. It's a wonder I'm even here at all the way my father reacts to any mention of sex, reproduction or babies. I am so glad I did not inherit the repressed-Catholic genes!!"

"If women want to breast feed, then they should do so in private, it's a personal thing between them and their baby, not a thing that should be done in public."

"I firmly believe the basic reason that more women do not breastfeed their babies is that they do not have enough support from their partners/husbands."

"I breastfed my three children, my first child was a nightmare, I had no support from the hospital, doctor or health nurse, their attitude was if you are having trouble put her on the bottle. My relatives were no better directing me to a different room when it looked like I was going to start feeding (a uncle even said it was disgusting) in fact I had the most support from my grandmother who had breastfed five of her eight children. The young "educated" women I worked with were no better, most thought it again was disgusting, or "why should their husband not have to get up in the night!" I was considered some kind of freak for not opting for the convenience of the bottle. In my opinion convenience is being able to feed your child anywhere anytime without having to worry about sterilising or warming up bottles. And for all those prudes out there who are terrified of seeing a bit of boob....what about all the half naked teenagers and young woman walking about ....I don't hear any complaints about them!"

"It's money! It's to do with the rush to get back to work because of financial pressures caused by both partners having gone out to work. Couples should be strong enough to decide whether they really, honestly, genuinely want to become parents or whether they wish to pursue two careers. It isn't easy to do both and, certainly, children do benefit from having both parents at home. Breast feeding is the first actual sign of the mother's true motivation."

## **SLIDE 15 – BREASTFEEDING DISCOURSE**

Another of the satisfying things about looking at the comments from the discussion boards is how they beautifully illustrate so many of the debates that are raging about not only on infant feeding, but the parenting issues that are highlighted through out this conference.

- Tension between the mothering role and other roles women are expected to fill.
- Ambivalent feelings about women's bodies and what they are for (men? children?) eg Bobel who writes about the paradoxes of La Leche League.

- View of breast as sexual, and of breastfeeding as disgusting
- Male attitudes towards breastfeeding – positive and negative
- Demands of balancing work and family – family OR career
- Moral judgement on women who do and women who don't
- Ambivalence of healthcare workers

## **SLIDE 16 – MEN, FATHERHOOD AND FAMILIES IN IRELAND**

“There has been virtually no empirical research done on fathers in Ireland which explores their actual views and those of the people they live with”

Harry Ferguson and Fergus Hogan, Strengthening Families through fathers: developing policy and practice in relation to vulnerable fathers. 2004.

In terms of social policy, Ferguson and Hogan claim that ‘parenting tends to be synonymous with mothering... this means that fathers are not engaged with about their role, or the parenting – what we call ‘fatherwork’ – they do, or would like to do”.

Historical: Arensberg and Kimball study of traditional Irish rural families, which was published in 1942.

It found a complete separation between father and mother’s tasks. Authority was concentrated in the hands of the father (with some autonomy in household roles for women). Mothers were seen as managing emotion, fathers as ‘distant and severe’. (McKeown, Ferguson and Roney, 1998).

The discourse on fatherhood internationally does not seem to have been reflected in the Irish situation. While else where in the world there have been discussions on:

- Discourse on the nature of father involvement
- Research on fathers’ influences on their children
- Studies on the determinants of father involvement
- Interest in relationship between research and relevant social policies.

In Ireland the focus has been primarily on the ‘vulnerable’ or marginalized fathers.

## **SLIDE 17 – MEN AND FAMILY LIFE IN IRELAND**

(Ferguson, 2001)

## Traditional Irish masculinity:

Traditional masculinity in Ireland was essentially rural, based around the family, marriage and celibacy.

The Irish Constitution (1937) was 'heavily imbued with Catholic social teaching'. Women were given a 'pivotal position' in the constitution as mothers and home-makers.

### **Article 41**

1. 1° The State recognises the Family as the natural primary and fundamental unit group of Society, and as a moral institution possessing inalienable and imprescriptible rights, antecedent and superior to all positive law.  
  
2° The State, therefore, guarantees to protect the Family in its constitution and authority, as the necessary basis of social order and as indispensable to the welfare of the Nation and the State.
2. 1° In particular, **the State recognises that by her life within the home, woman gives to the State a support without which the common good cannot be achieved.**  
  
2° **The State shall, therefore, endeavour to ensure that mothers shall not be obliged by economic necessity to engage in labour to the neglect of their duties in the home.**
3. 1° The State pledges itself to guard with special care the institution of Marriage, on which the Family is founded, and to protect it against attack.

The celibate priest = role model.

Sex was for procreation, not pleasure. Sexual pleasure was a 'transgressive act... which induced shame about the body'.

The good provider = breadwinner role model.

Pattern of Irish men leaving their families to find work and send money home.

The contrast to this were bachelor farmers = who never married as they could not support a family.

Until 1973 there was a 'marriage bar' on women in teaching and the civil service, which legally required women to give up their jobs once married (whether or not they had children).

Homosexuality was illegal until it was decriminalised in 1993.

Divorce was introduced in 1996.

'Church and state combined deliberately to construct masculinity and femininity to assert the difference between the Irish and the former British colonizers' .

## **SLIDE 18 – MODERN IRISH MASCULINITY**

Decline in power of the Catholic Church – eroded partly by the child abuse scandals that came to light in the 1990s.

Economic change – shift from agriculture to institutions of 'fast capitalism'.

**The hard working family man remains the hegemonic masculine role model.**

The popular discourse about fathers (and arguably men) in Ireland is dominated by the issue of fathers rights – custody and access to their children when relationships break down. This fits into the idea that men are the disadvantaged, marginalised in Irish society. It is a notion that is put forward by certain highly vocal individuals (eg John Waters, Irish Times journalist and columnist, who has had a highly public custody battle with his former partner Sinaed O'Connor).

## **SLIDE 19 – GENDER DISCOURSE IN IRELAND**

Gender, sexuality and the family in Ireland (Chapter 9, Tovey and Share)

Three viewpoints:

1. Positive change and progress – cite the election of Mary Robinson and Mary McAleese, prominence of women politicians, appointment of women in previously male dominated spheres (pilots, high court judges etc). Exposure of abuse against women and children, increasing involvement of men in home/child care, huge shift of women into paid workforce.
2. Gender inequality and differentiation remains. Continued discrimination against women, economic disadvantaged, widespread violence against women and children by men, institutional dominance by men, persistence of stereotyped images of masculinity and femininity, failure of society and state to respond to issues such as childcare, abortion, care of the elderly.

3. Men are the disadvantaged in Irish society. Poorer health status and life expectancy, academic performance, high tendency toward suicide and road trauma, perceived marginalisation over legal decisions re custody and access to children.

## **SLIDE 20 – CONTEMPORARY IRISH FATHERS**

The status of fathers in contemporary Ireland.

Married fathers are privileged over non-married fathers in Ireland.

If a father in Ireland is not married to his child's mother, he has no legal rights to the child. The mother is regarded as the sole guardian, unless a statutory declaration is signed by both parents and the father becomes a joint guardian.

Paternity leave is not recognised in employment law in Ireland. In other words, employers are not obliged to grant male employees special paternity leave (either paid or unpaid) following the birth of their child.

Fathers are entitled to take parental leave (unpaid) up to 14 weeks per child, while child is under 8 years of age. Both parents are entitled to this leave.

Under recent legislation (The Maternity Protection Act 2004) fathers are now entitled to take paid time off work to attend two ante-natal classes. There is currently no information on uptake.

## **SLIDE 21 – FATHERS AND BREASTFEEDING**

What do Irish men think about breastfeeding?

Very little is known about the views of Irish men in relation to breastfeeding, just as very little is known about Irish men and their views on anything relating to parenthood.

In the same NWHB study cited earlier 70% of women said their partner had been involved in choice of feeding method.

33% thought breastfeeding preferable

16% thought bottle feeding preferable

47% no specific preference, or choice should be left to the mother.

## SLIDE 22 – THE RESEARCH PROJECT

### Stage One:

Recruit couples through ante-natal classes in maternity hospital. Couples complete questionnaire measuring knowledge and attitudes to various infant care issues, not just feeding.

Goal: to measure knowledge and attitudes of men and women and examine whether couples' share views.

The questionnaire will also have a section asking fathers if they would like to take part in the next stage of the study.

### Stage Two:

Fathers interviewed twice, once prior to birth and once three/four months after baby is born.

Goal: to describe the experience of the transition to fatherhood and explore factors which influence this experience, particularly in relation to infant feeding.

And finally..... I would like to leave you with an image of an Irish man and his breastfeeding partner....



## References

(This list is by no means exhaustive. If you would like further information on other reading, please contact me, at [baileyja@tcd.ie](mailto:baileyja@tcd.ie))

### Fathers' influence on the breastfeeding decision

Bromberg Bar-Yam N and Darby L	Fathers and breastfeeding: a review of the literature	Journal of Human Lactation (JHL)	1997
Giugliani E, Caiaffa WT, Vogelhut J, Witter F, Perman J	Effect of breastfeeding support from different sources on mothers' decisions to breastfeed	JHL	1994
Littman H, VanderBrug Medendorp S, Goldfarb J	The decision to breastfeed: The importance of fathers' approval.	Clinical Paediatrics	1994
Rempel L and Rempel J	Partner influence increasing breastfeeding duration	Journal of Social and Personal Relations	2004
Scott JA, Binns CW, Aroni RA	The influence of reported paternal attitudes on the decision to breastfeed	J of Paediatrics & Child Health	1997
Scott JA, Shaker I, Reid M	Parental attitudes towards breastfeeding: their association with feeding outcome at hospital discharge	Birth	2004
Sharma M, Petosa R	Impact of expectant fathers in breast-feeding decisions	J of the American Dietetic Assoc	1997
Voss S, Finis L and Manners J	Fathers and breastfeeding: a pilot observational study	J of Royal Soc of Health	1993

### Male knowledge and attitudes

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Pollock C, Bustamante- Forest R, Giarratano G	Men of Diverse Cultures: Knowledge and attitudes about breastfeeding	J of Obstetric Gynaecological and Neonatal Nursing (JOGNN)	2002
Shaker Scott and Reid	Infant feeding attitudes of expectant parents: breastfeeding and formula feeding	J of Advanced Nursing	2004
Shepherd C, Power K, Carter H	Examining the correspondence of breastfeeding and bottle-feeding couples' infant feeding attitudes	J of Advanced Nursing	2000

### Male experience of breastfeeding

Gamble and Morse	Fathers of breastfed infants: postponing and types of involvement	JOGNN	1993
Jordan & Wall	Supporting the father when an infant is breastfed	JHL	1990
Okon M	Health promotion: partner's perceptions of breastfeeding	Brit J of Midwifery	2004

### Interventions with men

Cohen R, Lange L and Slusser W	A description of a male-focused breastfeeding promotion corporate lactation program	JHL	2002
Stremler J and Lovera D	Insight from a breastfeeding peer support program for husbands and fathers of Texas WIC participants	JHL	2004
Wolfberg A et al	Dads as breastfeeding advocates	Am J of Ob and Gyn	2004

## **Ireland and breastfeeding (these reports are available online)**

National Perinatal Reporting System (NPRS) (published annually, latest figures relating to 2003 were published in 2006)

[http://www.esri.ie/health\\_information/nprs/](http://www.esri.ie/health_information/nprs/)

Interim Report of the National Committee on Breastfeeding (2003)

[http://www.healthpromotion.ie/breastfeeding/national\\_committee/](http://www.healthpromotion.ie/breastfeeding/national_committee/)

Breastfeeding in Ireland, A Five Year Strategic Action Plan

<http://www.healthpromotion.ie/breastfeeding/>

Growing up in the North West - Profile of  
Child and Adolescent Health in the North Western Health Board

<http://www.nwhb.ie/files/publichealth/publications/viewpublication.asp?publicationID=7>

## **Men, Fatherhood and the Family in Ireland**

Ferguson H and Hogan F, 2004.

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Tovey H and Share P, 2003.

*Gender, sexuality and the family in Ireland, Chapter 9*, in "A Sociology of Ireland", Hilary Tovey and Perry Share, 2<sup>nd</sup> Edition, Gill & Macmillan Ltd.