Fathers’ Perspectives on Their Relationship With Their Infant in the Context of Breastfeeding

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Abstract
Research has demonstrated beneficial effects on children’s development of both breastfeeding and fathers’ involvement. Evidence has also shown that breastfeeding could influence paternal behaviors. Since there is little data available on paternal representations of breastfeeding and on its effects on paternal involvement, the aim of the present study is to bridge that gap by examining fathers’ perceptions of their relationship with their infant in the context of breastfeeding. Semistructured interviews were carried out with 43 fathers of an infant who had been exclusively breast-fed for a minimum of 6 months. These were transcribed and analyzed using thematic analysis. The fathers identified some impacts of breastfeeding on the father–infant relationship. Feeding their infant themselves appeared to be a determining moment in this relationship. These results highlight the relevance of supporting early father–infant bonding in the breastfeeding context.

Keywords
father–child relationship, qualitative, breastfeeding, gender and family, mother–child relationship

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For a man, the birth of a child is, without question, a profoundly life-altering event. In fact, men are becoming fathers in a context in which mothers are strongly encouraged to breastfeed their infant exclusively for the first 6 months of life and ideally to the age of 2 years (Health Canada & Canadian Institute of Child Health, 2000; Health Canada, Canadian Paediatric Society, Dietitians of Canada, & Breastfeeding Committee for Canada, 2012; World Health Organization & UNICEF, 2005, 2009). Thus, the breastfeeding experience is likely to occupy a significant place in a young family’s life. This article examines fathers’ perspectives on their relationship with their infant in the context of breastfeeding.

The importance of fathers’ involvement with their children has been recognized since the late 1980s (Lamb, 1986, 2010). Research has shown that the quality of fathers’ involvement can have lasting effects on children’s development, including their cognitive and psychosocial adaptation (Nugent, 1991; Radin, 1994; Ramchandani et al., 2013). More specifically, fathers’ involvement improves social and relational functioning in childhood and adulthood, decreases behavioral problems in childhood and adolescence, and sustains better educational outcomes (Aldous & Mulligan, 2002; Coley & Schindler, 2008; Gryczkowski, Jordan, & Mercer, 2010; Mezulis, Hyde, & Clark, 2004; Sarkadi, Kristiansson, Oberklaid, & Bremberg, 2008). Fathers’ involvement contributes to language, cognitive, and emotional development (Bronte-Tinkew, Carrano, Horowitz, & Kinukawa, 2008; G. L. Brown, Mangelsdorf, & Neff, 2012; Cabrera, Shannon, & Tamis-LeMonda, 2007; LaBounty, Wellman, Olson, Lagattuta, & Liu, 2008; Rowe, Pan, & Coker, 2004).

Paternal involvement models (e.g., Bouchard, Lee, Asgary, & Pelletier, 2007; de Montigny, Lacharité, & Devault, 2012) identify several factors that affect fathers’ involvement with their children, including the characteristics of fathers, of the family, of the environment, and of the perinatal experience. Among the characteristics of fathers, their perceptions of their own parental efficacy (de Montigny et al., 2012; Jacobs & Kelley, 2006), their parenting skills at the time of their child’s birth (Meteyer & Perry-Jenkins, 2010), and their expectations and personal beliefs before birth (Cook, Jones, Dick, & Singh, 2005; Perry & Langley, 2013) all influence their involvement, such that the more fathers believe their role is important, want to be involved, and feel competent, the more they will tend to become engaged with their child. Conversely, when fathers are stressed, depressed, or anxious (Belsky & Vondra, 1989; de Montigny et al., 2012; Melrose, 2010; Roggman, Boyce, Cook, & Cook, 2002), less educated (Roggman et al., 2002; Susin & Giugliani, 2008), and less well-off financially (de Montigny et al., 2012; Simons, Whitbeck, Rand, & Melby, 1990), they tend to be less engaged.
With respect to family characteristics, both the mother’s support of the father (Simons et al., 1990; Tremblay et al., 2015) and the quality of the conjugal relationship (Lee, 2007; Marsiglio, 1995; Padilla, Ward, & Limb, 2013; Ryan, Kalil, & Ziol-Guest, 2008; Snarey, 1993) play a significant role. The same applies to the coparenting style, with a significantly higher paternal involvement in terms of quality and quantity, when the parents adopt a cooperative style of parenting (Waller, 2012). Men are more involved with their children and more motivated if their spouse believes a father’s presence is important and has confidence in their parenting skills (Bouchard et al., 2007; Perry & Langley, 2013; Simons et al., 1990). The father’s involvement is also greater when the mother is employed (Crouter, Perry-Jenkins, Huston, & McHale, 1987; Snarey, 1993), and especially when she is working full-time (Jacobs & Kelley, 2006; Meteyer & Perry-Jenkins, 2010). Meteyer and Perry-Jenkins (2010) found that when parents of a 1-year-old child worked different shifts, fathers were more equitably involved. In terms of the social environment, support from the family of origin and friends (Capponi, 2013; Gameiro, Moura-Ramos, Canavarro, & Soares, 2011; Lamb, 1986; Tremblay et al., 2015), from the workplace (Cohen, Lange, & Slusser, 2002; Haas, 1990; Sahip & Molzan Turan, 2007), and from health professionals (Fägerskiöld, 2006; Levine, 1993; Massoudi, Wickberg, & Hwang, 2011; Melrose, 2010; Palm & Palkovitz, 1988; Tiitinen & Ruusuvuori, 2012) also fostered fathers’ involvement. Finally, fathers who reside with their children participate in their children’s lives to a greater extent than fathers who live apart from them (Castillo, Welch, & Sarver, 2011; Jones & Mosher, 2013; Perry & Langley, 2013).

While numerous studies have identified the factors contributing to fathers’ involvement with their children, few have explored the effects of the events surrounding birth. The work of Brandão and Figueiredo (2012) is a noteworthy exception. They demonstrated that the umbilical cord–cutting experience increases the fathers’ later involvement, with fathers who cut the umbilical cord showing an improvement in emotional involvement with their infants 1 month after childbirth. Yet a father’s active and early involvement in the hours following birth is known to be associated with his availability and participation in the care and education of the child at the age of 2 years (Lamb et al., 1988). Children whose fathers are uninvolved when they are 3 months old are at higher risk for behavior problems at the age of 1 year (Ramchandani et al., 2013). Conversely, fathers who report doing a variety of activities with their 10-month-old babies are more involved over time with their children as they become older (Roggman et al., 2002). Among the events surrounding birth, breastfeeding appears to be a situation with potential to color fathers’ experience of their relationship with their child.
Since the early 1990s, studies have highlighted the fact that, for men, breastfeeding does not result only in benefits. In some studies, American and English men reported feelings of discomfort, rejection, and exclusion from the mother–infant dyad (Bar-Yam & Darby, 1997; Brown & Davies, 2014; Gamble & Morse, 1993; Jordan & Wall, 1990). Some of these fathers said they experienced breastfeeding as a barrier to access to their infant (Jordan & Wall, 1990; Littman, Medendorp, & Goldfarb, 1994). In a Canadian study, fathers noted that breastfeeding had delayed their involvement with their newborn (Gamble & Morse, 1993). Even though these fathers were able to find ways to develop a relationship with their children, they reported some differences in the type of relationship each parent had with the children. A European study has since revealed that, among breastfeeding couples, fathers delegate the responsibility for infant care to the mothers (Molinari & Speltini, 1998). In Australia, fathers of babies presenting low birth weight were also surveyed for their perspectives on breastfeeding and it emerged that, even though their positive influence on initiating and sustaining breastfeeding was established, they described their experience with ambivalence and spoke about their struggle to find their place and their role in feeding their infant (Sweet & Darbyshire, 2009). In 2003, a Canadian study reported that fathers from favorable socioeconomic environments cited breastfeeding as an obstacle to paternal involvement (Devault & Gaudet, 2003). Another Canadian study in 2004 revealed that, for first-time fathers, the experience of starting breastfeeding was tinged by ambivalence, apprehensions, and difficulties (de Montigny & Lacharité, 2004). These fathers reported feeling ineffective and jealous, and having more limited contacts with their infant. These reactions distance fathers from their children and inhibit the positive impacts associated with their involvement. The desire to encourage the father’s involvement is in fact sometimes a contributing factor in a mother’s decision to introduce the bottle (Earle, 2000) and to wean early (de Montigny, Girard, Lacharite, Dubeau, & Devault, 2013).

This review of the literature indicates that breastfeeding could influence paternal behaviors and could either deter or facilitate paternal involvement. Since it is essential, for children’s well-being, to promote breastfeeding, it would appear equally important to understand this experience from the father’s perspective in order to define some guidelines for supporting fathers.

Currently, the majority of research on fathers in relation to breastfeeding have focused on their role and the importance of their support in the initial decision and the duration of breastfeeding (Arora, McJunkin, Wehrer, & Kuhn, 2000; da Silva et al., 2012; Earle, 2002; Maycock et al., 2013; Odom, Li, Scanlon, Perrine, & Grummer-Strawn, 2013; Scott & Binns, 1999; Scott, Binns, & Aroni, 1997; Sharma & Petosa, 1997) or on their values, attitudes,
and opinions about breastfeeding (Freed, Fraley, & Schanler, 1992; Molinari & Speltini, 1998; Pollock, Bustamante-Forest, & Giarratano, 2002; Speltini & Molinari, 1998). For instance, da Silva et al. (2012) found an association between fathers’ low education level and weaning in the infant’s first month of life. Those authors also reported that when the father was not very supportive of breastfeeding, the mother tended to wean the infant within the first 3 months.

Some studies provide glimpses of fathers’ desire to be recognized as important in the breastfeeding experience (Brown & Davies, 2014; Sherriff & Hall, 2011; Storr, 2003) and the difficulties perceived by fathers in the initiation of breastfeeding (de Montigny & Lacharité, 2004). However, few have actually explored fathers’ views on their specific role in breastfeeding (McIntyre, Hiller, & Turnbull, 2001; Rempel & Rempel, 2011; Storr, 2003). When fathers speak about their role, they see themselves as both an active member of a team whose objective is to provide their child with the benefits of breastfeeding and as a resource to encourage and help the mother during breastfeeding, while sharing with her the other family tasks. Those fathers also underscored the importance for them of promoting positive relations with their infant in a context where opportunities for contact with the infant can appear to be limited (Rempel & Rempel, 2011). As it is for this latter study, authors usually addressed incidentally the question of the effects of breastfeeding on the relationship fathers construct with their infant, and these effects, as seen from the perspective of the fathers, do not appear ever to have been examined.

In summary, evidence has shown that fathers’ involvement is influenced by a group of factors related to the characteristics of fathers, of the family, of the environment, and of perinatal events, including breastfeeding. This study examines fathers’ representations of their relationship with their infant in the context of breastfeeding. This knowledge is essential to provide better support for fathers’ early involvement with their infant.

**Method**

**Participants**

Participants were a subsample recruited from the Fathers and Infant Feeding study, a cross-sectional study examining fathers’ representations of their involvement with their infant in different feeding contexts. The inclusion criteria for the original study were that the men be the biological fathers of their infant, cohabiting with the mother, fluent in French, and older than 18 years, and that the infant was healthy, full-term, and weighed more than 2,500
grams at birth. The different subsamples of the original study consisted of (a) fathers whose child had been exclusively breast-fed for a minimum of 6 months, (b) fathers whose child was breast-fed less than 3 months, and (c) fathers whose child was not breast-fed. In this qualitative descriptive study, we wanted to explore the experiences of fathers in the specific context of breastfeeding; we therefore analyzed the 43 interviews from the first sub-sample (fathers whose child had been exclusively breast-fed for a minimum of 6 months). At the time of the interviews, 85% of the infants ($N = 36$) were still being breast-fed, which was on average 7.86 months ($SD = 1.63$) after birth. Of these 43 fathers, 84% was Caucasian and 16% was of African origin ($N = 7$). They ranged from 24 to 47 years of age ($M = 33.08$, $SD = 6.20$). Twenty-six were fathers of a first child and 17, of a second child. Thirty-nine fathers (92%) had more than 10 years of education, of whom 61% had university degrees ($n = 26$). Their spouses ranged in age from 23 to 41 years ($M = 31.29$, $SD = 5.06$). The length of the couple’s relationship ranged from 3 to 18 years ($M = 7.4$, $SD = 3.4$). The fathers came from three different geographic areas (urban, semiurban, and rural) of Quebec, a francophone province in Canada. Family income was less than Can$40 000 for 35% of the fathers ($N = 15$), while 50% had a family income greater than Can$80000.

**Data Collection**

Fathers’ qualitative experience of their involvement in breastfeeding was explored using a semistructured “Fathering in the context of breastfeeding” interview guide. This 1-hour interview guide covers topics such as the infant feeding decision, the initial experience of breastfeeding after birth and over subsequent months, and the father’s experience of his relationship with his infant and spouse in the context of breastfeeding, including obstacles or facilitating conditions as well as resources and support used by fathers (e.g., What goes on during a breastfeeding session when you are at home [verify whether he plays a role]? How do you feel when you see your baby being breast-fed? What role does breastfeeding play in your relationship with your baby [involvement in daily life, in play, care, etc.]?).

**Procedure**

Ethical approval was obtained from the Université du Québec en Outaouais Research Ethics Committee and the participating hospitals’ research committees. Fathers were recruited by key informants in the birthing units of the participating hospitals. Of the 170 fathers who completed questionnaires in the original study, 113 agreed then to be interviewed at a later date. From these, 43
had a child who had been exclusively breast-fed for a minimum of 6 months. Although the principle of theoretical saturation prevents identifying a predetermined number of participants, the saturation is frequently obtained around 15 to 20 interviews, when using principles similar to those proposed by Francis et al. (2010). However, the theoretical saturation principle should take into account the particular context of each study (Bowen, 2008). In this study, 30 to 40 interviews were conducted with participants in each of the subsamples before reaching theoretical saturation. Preliminary data analysis showed that the subsample size of 43 participants was more than adequate to cover all of the issues and different participants’ characteristics. At that point, the participants’ responses became redundant and the lack of new information was also identified by the interviewer. Participants were offered an incentive to take part in the interview (Can$20). Participants were contacted by telephone to arrange an interview date at a time convenient for them. Interviews were carried out by an experienced male research assistant in the fathers’ homes when the mothers were not present. Written informed consent was obtained before the start of the interview, and confidentiality, anonymity, and the right to withdraw at any time were assured. Interviews were digitally audio-recorded then transcribed verbatim. Transcripts were checked against the digital recording.

Analysis

Data analysis of the main Fathers and Infant Feeding study, as well as the subsample used for this study, was carried out using the procedure described by Miles and Huberman (2003). The first step involved identifying recurrent themes in the fathers’ statements based on 10 interviews (the audio-taped interviews were transcribed verbatim). The coding process was carried out by the main author (FD) and three coauthors (DL-B, KSA, and CL) who examined these preliminarily identified themes to ensure they were representative of the experience of all the fathers of the study. From this process, a grid was created for coding all the interview transcripts. An independent researcher coded 20% of the transcripts (JMM). The disagreements were generally solved by consensus discussion among the authors. Where consensus could not be achieved, an independent team member was asked to arbitrate. The themes reflected the fathers’ subjective experience of their relationship with their child in a breastfeeding context and allowed us to discern differences in experience, favorable conditions, and obstacles. Direct quotes have been selected to illustrate the experiences reported by the fathers. Translation from French to English was done by a professional translator and only minor edits have been made to enhance the readability of the quotes. To ensure confidentiality, the participants’ names have been changed.
Results

The primary objective of this study was to examine fathers’ perspectives on their relationship with their infant in a breastfeeding context. From analysis of the interviews, we identified several observations, which we grouped under two themes. The first theme, “impact of breastfeeding on the father–infant relationship,” encompassed four subthemes: (a) a necessarily unequal bond with the infant, characterized by the father’s perception that the nature of his bond with his infant is different from the more intimate relationship that exists between the mother and the infant, and also that there is a certain distance between father and infant; (b) envious feelings toward the mother–infant relationship, characterized by feelings of envy regarding the intensity of the relationship forged between mother and infant; (c) adaptation to the unequal situation, characterized by the observation that breastfeeding periods are limited in time and that the father can interact with the infant in different ways; and (d) the value attributed to early father–infant bonding, characterized by the father’s expressed beliefs about the importance of his bond with his infant and his observations regarding the reciprocity of this bond. The second theme, “feeding one’s infant: a determining moment in the father–infant relationship,” encompassed three subthemes: (a) eagerness to bottle-feed the infant, characterized by ambivalence between appreciating the value of breastfeeding and the desire to create, through feeding, a relationship with the infant that is equal to the infant’s relationship with the mother; (b) the positive experience of feeding one’s infant, characterized by a number of feelings experienced by fathers when they become actors in their infant’s feeding, whether by bottle feeding or introducing solid foods; and (c) the bottle as a symbol of the infant’s developing autonomy, characterized by statements that emphasized the end of one stage and the beginning of a new one in which the father’s involvement can take more diverse forms (see Table 1).

Impact of Breastfeeding on the Father–Infant Relationship

The fathers interviewed in this study generally asserted that breastfeeding had not had any serious negative consequences on their relationship with their infant; some even emphasized the positive effects related to the simplicity, availability, and protection from illnesses afforded by this form of feeding. They were nevertheless sensitive to several issues associated with the father–infant relationship in the breastfeeding context.

A Necessarily Unequal Bond With the Infant. Even though the majority of the fathers in our sample considered breastfeeding not to be an obstacle to
Table 1. Themes and Subthemes Emerging From the Fathers’ Interviews.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Subthemes</th>
<th>Subtheme characteristics</th>
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<tbody>
<tr>
<td>Impact of breastfeeding on the father–infant relationship</td>
<td>A necessarily unequal bond with the infant</td>
<td>Father’s perception that the nature of the father–infant bond is different (the mother–infant bond being more intimate and there being a certain distancing between father and infant). Conviction that the inequality is necessary because of the benefits of breastfeeding.</td>
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<tr>
<td></td>
<td>Envious feelings toward the mother–infant relationship</td>
<td>Feelings of envy toward the intensity of the relationship forged between mother and infant.</td>
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<td>Adaptation to the unequal situation</td>
<td>Desire for more contact with the infant (physical proximity, intimate moments).</td>
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<td></td>
<td>The value attributed to early father–infant bonding</td>
<td>Observation that feeding is only one way of contributing to the infant’s development (other possibilities for fathers’ interaction) Observation that the situation is transitory.</td>
</tr>
<tr>
<td>Feeding one’s infant: a determining moment in the father–infant relationship</td>
<td>Eagerness to bottle-feed the infant</td>
<td>Ambivalent feelings (appreciation of breastfeeding vs. desire to create, through feeding, a relationship with the infant that is equal to the mother–infant relationship).</td>
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<td>The positive experience of feeding one’s infant</td>
<td>Positive feelings experienced when fathers become actors in their infant’s feeding, whether by bottle feeding or introducing solid foods. Transformation of the father–infant bond once the father becomes involved in feeding the infant.</td>
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<td>The bottle as a symbol of the infant’s developing autonomy</td>
<td>Statements that highlight the end of one stage and the beginning of a new one in which the father’s involvement can take more diverse forms.</td>
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creating a relationship with their infant, they nevertheless often expressed regrets about the fact that it still modified the nature of their bond with their infant. In effect, they noted a certain distance between them and their infant and fewer moments of proximity, especially as compared with the mother, who enjoyed a privileged relationship:

I think that because she [infant] spends a lot of intimate time with her mother, I’m missing out on something. But I wouldn’t want to give her bottles. (Logan, first child)

I was pretty useless. If she hadn’t breastfed, then things would have been different. The relationship would also have been different. I prefer the relationship with the breast. (Gary, first child)

For sure, if she hadn’t been breastfed, I probably would have been more present when I was there, between four and six months. (Pat, first child)

Although many fathers noted a certain inequality in terms of time spent with their infant and the depth of the bond thus created, none of them expressed any desire to stop or reduce breastfeeding to end this situation. A strong commitment to breastfeeding, along with an appreciation of its benefits, appeared to be the factors that enabled them to accept having to wait before being able to create a bond with their infant that would be as significant as that of their spouse. Indeed, the fathers appeared somewhat resigned to this relational inequality and to the very strong close relationship between the mother and their infant. The following extract illustrates this acceptance of the situation by the fathers, who occasionally referred to it as a “sacrifice”:

It’s a sacrifice because you don’t have a choice. . . . Maybe not a sacrifice but. . . . Your child is going to spend more time with your spouse, so for sure you’ll have somewhat less of his time. But that’s what it means to be a parent, it’s about sacrifices, and it’s about the bond with the infant. (Kevin, second child)

Finally, it should be noted that some fathers nevertheless perceived breastfeeding as an obstacle that slowed down or delayed the creation of a bond with their infant:

It imposed a certain distance, in the sense that . . . as a man . . . you don’t have the closeness that the mother has in these moments. (Christopher, second child)

Maybe I would have had more time with her [baby] because, if she had been bottle fed from birth, I would have been more involved. (Oliver, first child)
However, even these fathers were not prepared to question the decision to breastfeed. The usual trajectory seen in the fathers interviewed was thus one of noting the inequality in terms of the mother’s privileged bond with the infant, followed rapidly by acceptance of this situation as being inevitable and transitory.

Envy of the Mother–Infant Relationship. The fathers often experienced a certain form of envy regarding the intense relationship developed between mother and infant, but they made it clear they were not jealous:

I’m not at all opposed to the baby’s being breastfed. Because, myself, I’m 100% for it, but I’m just saying . . . maybe the contact between father and child . . . to give the baby something to drink. Because, you know, you look into your child’s eyes and your child looks into your eyes during the feeding, you know, maybe that, a little bit, is what I would have liked to do. . . . But I’ve never been jealous of anything at all. (Franck, first child)

Well, there’s a certain envy, when you might say, “Me, too, I’d like to experience something like that with my son.” The envy doesn’t go away . . . but this envy could never become jealousy. But there will continue to be a stab of envy. As you watch, you feel that. . . . She has a privileged relationship with this human being whom you adore, too. (Joshua, first child)

Nevertheless, some fathers admitted envying the mother to the point of being happy when she went out and left them with the possibility of having more time, privileged contact, and moments alone with their infant:

I was really happy when she went off and left me alone. I wanted a little time and I was maybe a little jealous because she was the only one who had the baby to herself, for breastfeeding. I couldn’t do anything except provide moral support, but that had nothing to do with my child. I was happy to stay all alone with him . . . and to have time alone with my son. . . . I wanted to experience that myself. (Mark, first child)

I had her all to myself and I was selfish, and it was my time with my daughter. Her mother had had enough and now it was my turn. (Jason, first child)

Adaptation to the Unequal Situation. Most of the time, fathers were comfortable with the context created by breastfeeding and said they were prepared to wait for their children to be older and more autonomous before developing a stronger relationship with them:
For me, breastfeeding is one of the best things for children and I think it’s important for there to be a sacred bond between mother and infant, and as I’ve said, after that you can develop a relationship later, in any case. I think it’s worth doing. (William, second child)

Some fathers, turning the situation to their advantage, used breastfeeding to build a relationship with their infant differently, by using the quiet breastfeeding time, for example, to communicate with their child:

It allowed me to be close, and it was one of the rare times when she was quiet. When she was at the breast I could stroke her back and play with her hair. (Jason, first child)

While several fathers deplored the fact that feeding the infant was an essential task that was temporarily not available to them, at least as many others came to the realization that feeding was, in fact, just one of several ways of contributing to the infant’s development:

There are ways of getting closer to your child. . . . By amusing them. . . . Their mother feeds them, I make them laugh. . . . It was easy for me to have a special contact with him. (Alex, second child)

I’m still able to change diapers, I’m still able to take the baby between feedings. So that, it wasn’t really an obstacle for me. . . . If there is one person who looks after feeding her . . . even if that person does it right up to the time she starts walking, if she sees me on the side, and everywhere else in her life, I don’t think that changes anything for her. . . . I’m not sure she really cares a lot about who is meeting her need, so long as the need is met. (Ethan, second child)

Likewise, fathers observed that the total time taken up by breastfeeding was, in the end, not a lot, in a whole day offering unlimited possibilities for interacting with the infant:

He wasn’t nursing eight hours every day, there, you know. . . . He would drink, he would finish drinking. . . . Then after that, for sure, I took him. (Edgar, first child)

He drinks about five times a day. Five times 15 minutes, that’s not a lot of time. If you want to take the rest of the time, you take it! (Noah, second child)

His mother took maybe a half-hour, 40 minutes to feed him. Then . . . it was my turn to carry him around, cuddle him, play with him. Which meant I had the fun role, there, in the end. (Alex, second child)
Generally, then, faced with the temporary situation of exclusive breastfeeding, fathers most often adapted and developed new ways of being in relationship with their infant.

The Value Attributed to Early Father–Infant Bonding. A key point that emerged from the fathers’ interviews was that they attributed a great deal of importance to developing an early bond with their infant. This was apparent, among other things, when they described how happy they were to see that their infant recognized them, in spite of the differences in time spent with each parent. The following extracts illustrate how important this recognition was to the fathers:

I know that my son. . . . We have a strong bond between us, because every time he sees me, he smiles. (Franck, first child)

I know it’s true the babies spend more time with their mother than with me, but I know they recognize me when I come home. . . . That is, you can see it in a baby’s eyes. (Malek, first children, twins)

The fathers were focused on the bond they were creating with their infant and its intensity. This was also noted in their observations about the infant’s relationship with the mother, their desire to experience the same thing, and their reflections on developing their own relationship with their infant. The following are just a few examples:

In terms of my love and attachment to him, I don’t think it makes any difference . . . that he’s more often with his mother. . . . It’s more . . . unconditional and internal, and . . . I think that, as soon as he was born . . . there was a deep attachment. . . . Even if I’m less involved in his care, in the sense that . . . I’m not the one breastfeeding him, . . . that doesn’t make any difference in how attached I feel to him, and I’m sure it works both ways. (Jacob, second child)

I didn’t create a relationship; there was already a relationship. I’m the father. I’m not creating anything. It’s my instinct, my love, that’s what it is. . . . So, I never tried to create anything. It was already there. (Khaled, second child)

Feeding One’s Infant: A Determining Moment in the Father–Infant Relationship

At the time of the interviews, while most of the infants were still being breastfed, almost all were also receiving alternative feedings; some were given mother’s milk or a commercial formula by bottle, while others were old
enough to have been weaned and introduced to solid foods. Bottle feeding and the introduction of solid food presented a context in which fathers had to reflect on their own role in their infant’s feeding.

Eagerness to Bottle-Feed the Infant. The fathers we interviewed were all in favor of breastfeeding, although there were noticeable differences in the intensity of their commitment, with some insisting on breastfeeding no matter what, and others ready to give it up if any difficulties arose. Despite this, there was a diffuse feeling expressed by a significant number of fathers during the interviews: an eagerness to be able to feed their infant themselves using a bottle. These fathers strongly associated the act of feeding their infant with the creation of a bond between them. Some felt obliged to reiterate their “loyalty” to breastfeeding, and others admitted, without shame, that they were impatient for the day when the infant could be bottle-fed or would start eating solid food:

I’m very happy because I can get a little closer to my daughter by feeding her, but I was also in favor of breastfeeding. (Edward, first child)

Most of the time, fathers saw the transition to the bottle as an opportunity to get closer to their infant through feeding and to know the satisfaction of feeding their infant themselves, but also to feel useful, to be on the same footing as the mother, or to lighten her load. The fathers’ motivations are apparent in the following extracts:

During breastfeeding, as a father, you’re a spectator. Whereas . . . when it comes to bottle feeding, well. . . . You’re participating at that level. (Edgar, first child)

From the moment when he starts to eat solid foods, finally, when the father can look after those needs as well as the mother. That’s when a certain equality is created between the father and the mother. . . . When you can feed him, you understand what it is, the satisfaction that . . . the mother has been providing to your child for the past five months. (Joshua, first child)

Fathers thus expressed eagerness to move along to the next stage, when breastfeeding would no longer be the central focus in their infant’s life. Even so, they experienced this feeling with a certain ambivalence, since they considered that breastfeeding was the best feeding method.

The Positive Experience of Feeding One’s Infant. For the fathers whose infants had started bottle feeding, this stage introduced important changes to the family structure—among other things, having to do with their involvement
with their infant and the bond between them, still in construction. The emotions experienced by fathers when bottle feeding were indicative of the importance they attributed to the act of feeding their infant. Bottle feeding, besides eliciting positive emotions, was an exceptional time of father–infant bonding:

It was one of the most beautiful moments of my life. . . . After the birth. . . . It’s a matter of accomplishment, too. . . . The baby is able to adapt to being fed by someone else. So, for him, too, it’s an accomplishment, basically, being able to distinguish between . . . the breast and the bottle, but for his own needs. . . . It was one of the most beautiful moments of . . . relationship with him. (Alex, second child)

The bottle feeding father then feels he is important to his infant and appreciates seeing the infant’s satisfaction with his own eyes:

And, when I show him the bottle, in the evening, he comes running to me on all fours . . . [Laughing]. He runs after me, to come and get it. (Alex, second child)

Successful bottle feeding can also produce a sense of pride, as attested by the same father, who described how he felt the first time he fed his infant with a bottle:

Well, proud, proud that he took it . . . Prouder of him than of myself. . . . A feeling of pride, of accomplishment, for him. (Alex, second child)

Bottle feeding is also a way for the father to feel valued and competent:

The first times I bottle fed him, I was able, but my spouse wasn’t. It didn’t work. . . . I was kind of proud that I was the only one who could bottle feed him. In fact, I was the one who showed my mother-in-law how to bottle feed him! So bottle feeding was a good thing for me. (Gary, first child)

The privilege of intimate relationship, usually reserved for the mother during breastfeeding, becomes accessible to the father, who derives a great deal of satisfaction from it:

It was intimate and his mother wasn’t there. I was there to feed him at night. (Toby, first child)

The value attributed to the nourishing function is very much present in the fathers’ discourse. For example, one father explained that the act of feeding
his son, when solid foods were introduced, helped remind him that he was a father:

Sometimes we forget we’re the father [Laughing]. But it’s from these events that. . . . We understand very well what it means to be a father. (Amir, first child)

The Bottle as a Symbol of the Infant’s Developing Autonomy. The fathers reported being eager for the infant to develop autonomy, and the end of breastfeeding is often the first step on the road to independence and separation from the mother:

It’s the first time that . . . he forgot about his mother’s breast for a little while. . . . He’s learning to take his meals . . . I would really like that, he’s not yet at the right age, but I would really like him to begin discovering his world. (Hamdi, first child)

For some fathers, the bottle can represent not only the beginning of the infant’s autonomy and separation from the mother but also the start of a period in which the father assumes an increasingly important and fulfilling role. The following extract clearly shows the role assumed by the father in the transition to another form of feeding:

It seemed as though I couldn’t be involved in his nutritional development. In the beginning, that’s what I told myself. But I also told myself that it would only be for a short period of his life and that, afterward, I could start feeding him. He’s eating mostly solid foods, so now I’m very involved. (Mark, first child)

The child’s greater autonomy also means more opportunities for the father to communicate, play, and interact with him, as well as more equality in the parents’ sharing of child care tasks and roles.

Discussion

This study provides information on fathers’ representations of their relationship with their infant in the context of breastfeeding. The fathers in this study participated in the decision to breastfeed, the majority of them were very committed to breastfeeding, and this method of feeding had been maintained for at least 6 months. The findings suggest that fathers identified some impacts of breastfeeding on the father–infant relationship. Likewise, feeding their infant themselves appeared to be a determining moment for them in
their relationship with their infant. In this section, we discuss these two categories of findings.

**The Impact of Breastfeeding on the Father–Infant Relationship**

The results indicate that all the fathers in this study felt it was important to establish an early bond so that they could have a special relationship with their child. Even though most of the fathers did not consider breastfeeding to be an obstacle to establishing that bond, many pointed out that the bond created between father and infant is not equivalent to that formed between mother and infant. A certain number of fathers developed feelings of envy toward the proximity experienced between mother and infant, a phenomenon that has been noted since the 1990s in the work of several authors (Bar-Yam & Darby, 1997; Jordan & Wall, 1990), but almost none of the fathers said they were jealous of this proximity. Contrary to the results obtained in a previous Canadian study (de Montigny, Devault, Miron, Lacharité, Goudreau, & Brin, 2007), the fathers in this study did not report postponing their involvement until the infant was weaned. However, some were more active than others in developing strategies to compensate for this inequality by being involved in a variety of ways, such as providing physical care and carrying or massaging the infant.

**Feeding One’s Infant: A Determining Moment in the Father–Infant Relationship**

The experience of feeding their infant themselves, whether by bottle or introducing solids, was identified as a key event eliciting paternal involvement. These findings are consistent with statements from fathers in couples who had chosen together to feed their infant with a commercial formula from birth (de Montigny, Lacharité, et al., 2013). These authors found that fathers even reported choosing bottle feeding as a way of bolstering their involvement. Earle (2000) also noted that a key incentive in mothers’ decision not to breastfeed was their desire for the father to be involved with the child. However, fathers of breast-fed infants scored just as high on paternal involvement as did fathers of bottle-fed infants 11 months after birth (de Montigny, Lacharité, Baker & Gervais, 2010). Despite this scientific evidence, the fact remains that, in the paternal imagination, the bottle is a symbol both of a father’s closer proximity to the infant and of the infant’s emancipation (de Montigny, Lacharité, et al., 2013).

These results highlight the relevance of supporting early father–infant bonding in the breastfeeding context, in parallel with the mother–infant bond, to create a more egalitarian relationship between the parents. Health
professionals can play a role in this respect. Increasing fathers’ sense of parental efficacy, by recognizing their strengths, and asking them about their experience and feelings, such as ambivalence, envy, or jealousy, enables them to normalize their experience and helps strengthen their involvement with their child (de Montigny, Girard, et al., 2013; Parfitt & Ayers, 2012). It then becomes possible to explore with both fathers and mothers how the former can find their own place, either by carrying the infant, massaging him, looking after his care, and so on, thereby reinforcing the fact that feeding is not the only way to create a special bond. These issues could also benefit from being addressed during prenatal classes, where fathers are increasingly present and attentive. A Swedish study highlighted the importance of paying attention to the specific needs of fathers in order to improve the impact of prenatal care and classes and found that one of those needs was to have access to peer support groups (Widarsson, Kerstis, Sundquist, Engström, & Sarkadi, 2012). This type of groups could give fathers the opportunity to address the question of their relationship with their infant in the context of breastfeeding.

Study Limitations

The present study has several limitations. First, this study was based on a convenience sample that was exclusively francophone, and participants were mostly Caucasian. Results may not be applicable to other ethnic groups. It is also possible that the fathers who chose to participate might have had a different breastfeeding experience from those who chose not to participate. It would therefore be important that the study be replicated with a more diverse sample. The use of in-depth interviews provided a detailed insight into fathers’ experiences. However, asking participants to rely on their memories and using a retrospective approach may represent a significant limitation. The interview guide was built using the critical incident technique (Flanagan, 1954) to minimize accounts of imagined or idealized situations. With this technique, researchers rely less on direct observation to collect information and more on participants’ retrospective accounts, usually during a face-to-face or telephone interview (Bradbury-Jones & Tranter, 2008). Although the approach thus only accesses the incident as recalled by participants, the technique allows researchers to observe the event through participants’ eyes while eliminating abstract or generic descriptions of situations. The purpose of using the critical incident technique is not to seek objectivity, but rather to understand the various psychosocial constructs that affect participants’ subjective experience (Butterfield, Borgen, Amundson, & Maglio, 2005). As only fathers were interviewed, it would have been interesting to include in the
study interviews with the mothers, which could have offered a different point of view. Finally, the chosen sample for this article did not include fathers whose infant was breast-fed for less than 3 months or not breast-fed. Other articles will be presenting the data analysis of the interviews carried out with fathers exposed to different feeding practices.

**Conclusion**

Early paternal involvement not only contributes directly and indirectly to children’s physical, cognitive, linguistic, emotional, and social development but also has long-term repercussions, particularly on their scholastic achievement (McBride, Schoppe-Sullivan, & Ho, 2005), their psychological well-being (Allgood, Beckert, & Peterson, 2012; Bulanda & Majumdar, 2009), and their behaviors (Sarkadi et al., 2008). Even though many fathers begin their relationship with their child in a breastfeeding context, few recent studies have examined fathers’ representations of this experience. While some fathers reported being involved with their child since the pregnancy, for others, bottle feeding is a turning point that can symbolize the beginning of greater involvement in their child’s life. This study underscores the importance of pursuing further research to better understand the family dynamic that is set up in the breastfeeding context, in order to better support fathers in establishing a relationship with their child.

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