An interventional study on health education to promote fathers’ involvement in breastfeeding in Viet Nam

Presented at Granada- Spain (Sept. 2013)
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INTRODUCTION

• Proper BF practices have been negatively influenced by many factors including factors at household level.
• Fathers and family members can be trained to be efficient support groups for breastfeeding.
• Fathers’ factors including emotional and physical can effectively support breastfeeding.
• The role of the mother in child health and BF is well-known and widely studied.
• Few interventions have targeted fathers
• Limited information about the involvement of men/father in supporting EBF.
HYPOTHESES

After one-year period of educational intervention

• fathers in the intervention group will have
  − more knowledge about benefits of BF,
  − more positive attitude towards good BF and
  − more effective involvement in supporting mothers to breastfeed young babies.

• community under intervention will have a higher proportion of women practicing
  − early BF initiation,
  − exclusive BF at 4 and 6 months than women in the control community.
1. **Study design**: A quasi-experimental, pretest-posttest, non-equivalent control group design (prospective cohort type)

2. **Study site**: Two non-adjacent districts in Hai Duong province
   - **Intervention**: 7 communes and townships in Chí Linh district (CHILILAB)
   - **Control**: 7 Comparable communes and township (Pop. size, SES, health care) of Thanh Ha district (usual MCH care services)

*With a husband’s help, your child breastfeeds more.*
3. **Study subjects:**

- Resident fathers and pregnant wives whose pregnancies were from 7 to 30 weeks by August 1st 2010.

- *Exclusion:* (a) the women wrongly identified as pregnant or loss of pregnancy or (b) unable to answer questions or if (c) divorced/separated/migrated out of the study area.

4. **Sampling:**

- *Baseline:* Complete sample of 251 (intervention) and 241 (control) eligible couples.

- *Endline:* 226 fathers, 239 mothers in the intervention and 216 fathers, 230 mothers in the control completed study.
INTERVENTION PROGRAM

Duration: One year (9/2010 – 12/2011)

Approach:
• life cycle (pregnancy, birth, after birth)
• community-based and
• integrated within the existing local health care system.

Intervention package:
• Mass media communication
• Group and individual counseling
With a husband’s help, your child breastfeeds more.
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Why should husbands help their wives breastfeed?

1. Only breastmilk...
   - contains more than 100 ingredients not found in formula.
   - is full of antibodies that protect babies from illnesses (such as respiratory infections, diarrhea), and help develop their immune systems.
   - is full of DHA, ARA and nutrients, enough to help babies develop their height, weight and intellect in the first 6 months of life.
2. Breastmilk is the best milk for babies 0-6 months old.
   - Breastmilk is easy to digest.
   - Breastmilk is always fresh, clean, and ready to be served.
   - Breastmilk contains enough nutrients to meet a baby’s nutritional needs.
3. Only a husband can give his wife the support she needs to breastfeed.

Husband helps & supports breastfeeding

- Wife is healthy and relaxed
- Wife produces more breastmilk for child
- Breastmilk helps develop child’s physical and mental health

How can husbands support breastfeeding?

- Accompany your wife to pregnancy check-ups and on birth-giving day.
- Take your wife to regular pregnancy check-ups. Follow instructions from your health center on monthly prenatal care.
- When it’s time for your wife to give birth, accompany her to the health center or hospital.
- Attend consultation meetings and learn how to help in case your wife has difficulty breastfeeding (such as a blocked milk duct, a cracked nipple, or your baby refuses to breastfeed).
- Take care of your wife.
   - Always have enough food and water. Make sure she gets enough rest. Don’t let her do any heavy work.
   - When mother and baby come home, prepare a clean and quiet room or space with a comfortable temperature.
   - Try your best not to stress her or make her worry.
- Encourage your wife to breastfeed right after giving birth.
   - It’s best to breastfeed within 1 hour after birth.
   - Don’t replace mother’s first milk (called colostrum) with sweetened water or formula colostrum.
   - After birth, mother’s colostrum might seem insufficient, but even that small amount is enough to meet a newborn’s nutritional needs. A drop of colostrum is full of antibodies, making it more precious than any formula.

- Encourage your wife to breastfeed regularly.
   - Patiently encourage your wife to breastfeed regularly, at least 8 times every 24 hours.
   - The more your child breastfeeds, the more breastmilk your wife can produce.
- Help out during breastfeeding.
   - Prepare a seat with back support or a spacious bed for your wife to sit or lie down comfortably while breastfeeding.
   - Help her to breastfeed with the correct technique.
   - Bring her some water or a light snack.
- Help with house chores, such as:
  - Going to the market
  - Looking after the older children
  - Cooking
  - Managing the family shop
  - Doing laundry
  - Etc...
  - So your wife has enough energy to focus on taking care of your baby, without losing any breastmilk.
- Feed your child only breastmilk in the first 6 months.
  - Avoid feeding your baby formula in the first 6 months. If you do, your baby will get used to feeding on formula from a bottle. Your baby will then refuse to breastfeed, which will cause your wife to produce less milk, and eventually, no milk.
- Convince your parents and other members of the household to support feeding your child only breastmilk in the first 6 months.
With a husband’s help, your child breastfeeds more.

There are some things only a husband can do to help his wife breastfeed.

Only breast milk... contains more than 70% of the nutrients that are unique to breast milk and helps develop the brain and body for the first 6 months of life.

Visit your local health center and find out how husbands can support breastfeeding.

How can husbands support breastfeeding?

- Accompany your wife to pregnancy check-ups and on birth-giving day.
- Take your wife to regular pregnancy check-ups.
- Follow instructions from your health center on monthly prenatal care.
- When it's time for your wife to give birth, accompany her to the health center or hospital.
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- If your baby is breastfed regularly, at least 8 times every 24 hours.
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- Help out during breastfeeding.
- Prepare a seat with back support or a spacious bed for your wife to sit or lie down comfortably while breastfeeding.
- Help her to breastfeed with the correct technique.
- Bring her some water or a light snack.

- Help with house chores, such as:
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  - Cooking
  - Managing the family shop
  - Doing laundry
  - etc.
- So your wife has enough energy to focus on taking care of your baby without losing any breast milk.

- Feed your child only breast milk in the first 6 months.
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Convince your parents and other members of the household to support feeding your child only breast milk in the first 6 months.
With a husband’s help, your child breastfeeds more.

Group counseling at commune health center

FATHERS’ CONTEST “Who love their wives and children more?”

Intervention activities
With a husband’s help, your child breastfeeds more.

<table>
<thead>
<tr>
<th>Program Indicator</th>
<th>Subject</th>
<th>Data collection points</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Knowledge (K) about breast milk, EBF (22 item score)</td>
<td>Father</td>
<td>• Baseline and when the children ages were from 2.5 - 4 months</td>
</tr>
<tr>
<td>• Attitude (A) toward EBF and supporting activities (10 items)</td>
<td>Father</td>
<td>• Baseline and when the children ages were from 2.5 - 4 months</td>
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<tr>
<td>• Involvement (P) in supporting EBF (during pregnancy, at delivery, postpartum)</td>
<td>Father</td>
<td>• Endline: When the children were from 2.5 - 4 months</td>
</tr>
<tr>
<td>• Early initiation of BF (WHO/UNICEF)</td>
<td>Mother</td>
<td>• Endline: After birth</td>
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<tr>
<td>• Breastfeeding and diet at 4th month (24-hour, last week and since birth recalls)</td>
<td>Mother</td>
<td>• Endline: At 4 months of age</td>
</tr>
<tr>
<td>• Breastfeeding and diet at 6th month (24-hour, last week and since birth recalls)</td>
<td>Mother</td>
<td>• Endline: At 6 months of age</td>
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</tbody>
</table>
RESULTS

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Table 3: General characteristics of study subjects at the baseline and children in the study

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Intervention (N=239)</th>
<th>Control (N=230)</th>
<th>P -value</th>
</tr>
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<tbody>
<tr>
<td>Residency</td>
<td></td>
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<tr>
<td>Rural</td>
<td>62.2%</td>
<td>86.7%</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Maternal occupation</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Farmer</td>
<td>31.4%</td>
<td>17.4%</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Child birth order</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First</td>
<td>59.8%</td>
<td>50.0%</td>
<td>&lt;0.05</td>
</tr>
</tbody>
</table>

HH’s type, HH’s economics, economic role of the fathers, paternal occupation, parental ages and educations, child gender, birth weight, deliver type were not significantly different between intervention and control.
RESULTS

• Father’s Knowledge, Attitude and Practice

  • Score of father’s knowledge and attitude was significantly higher in the intervention group controlling for pretest score, birth order and father’s education (ANCOVA, p <0.001).

  • Fathers in the intervention group reported more active involvement in supporting EBF during antenatal, at the delivery and postpartum periods (multivariate logistic regression analyses).
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Figure 5: 4-month EBF by two methods of recall between intervention and control

- 4-month EB (24-hour recall)
  - Control: 29.0%
  - Intervention: 23.0%

- 4-month EB (Since birth recall)**
  - Control: 20.6%
  - Intervention: 11.3%

* p<0.05; ** p<0.01; *** p<0.001
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Figure 6: 6-month EBF by two methods of recall between intervention and control

- **Control**
  - 6-month EB (24-hour recall): 16.0%
  - 6-month EB (since birth recall): 3.9%

- **Intervention**
  - 6-month EB (24-hour recall): 6.7%
  - 6-month EB (since birth recall): 0.9%

*:* p<0.05; **: p<0.01; ***: p<0.001
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Table 5. Multivariate logistic regressions* displaying odds ratios for EIBF, 4-month and 6-month EBF (n = 467) from two methods of recall

<table>
<thead>
<tr>
<th>BF outcome</th>
<th>Recall method</th>
<th>AOR (95 % CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early IBF</td>
<td>After birth</td>
<td>15.54 (8.34 – 28.98)</td>
</tr>
<tr>
<td>4-month EBF</td>
<td>24-hour</td>
<td>1.50 (0.95 – 2.37)</td>
</tr>
<tr>
<td></td>
<td>Since birth</td>
<td>2.36 (1.35 – 4.14)</td>
</tr>
<tr>
<td>6-month EBF</td>
<td>24-hour</td>
<td>4.54 (2.05 – 10.03)</td>
</tr>
<tr>
<td></td>
<td>Since birth</td>
<td>6.29 (1.35 – 29.29)</td>
</tr>
</tbody>
</table>

*adjusted for residency, maternal education, and occupation, child gender, birth weight, birth order and type of delivery
CONCLUSIONS

1. The intervention was associated with improvements in fathers’ BF knowledge, attitudes and practices in supporting EBF.

2. With active involvement of fathers during pregnancy, at delivery and during postpartum periods, newborns were more likely to be breastfed early and exclusively at 4 and 6 months.
POLICY IMPLICATIONS AND SCALING UP

1. Fathers should be mobilized to participate in programs aimed at improving breastfeeding practices (UNICEF Viet Nam, 2014).

2. Getting fathers involved would be an additional component of the health package to improve child health, development and survival in Viet Nam (GCC’s Saving Brains, 2013).

3. Larger study with stronger design- cluster randomized community control trial would be implemented to improve internal and external validity of the intervention model.

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ACKNOWLEDGEMENT

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Thank you for your kind attention

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