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Research Article

The Knowledge and Opinions About Breastfeeding of Turkish Fathers

Türk Babaların Emzirme Konusundaki Bilgi ve Görüşleri

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ABSTRACT

Objective: The aim of this study was to determine the knowledge and opinions about breastfeeding of Turkish fathers.

Methods: The study was an analytical cross-sectional study conducted between January and June 2019 with 340 fathers at the obstetrics clinic of a Hospital in Aydın, Turkey. A Descriptive Information Form and a Checklist to Identify Knowledge and Opinions of Fathers about Breastfeeding were used in the collection of data. The analysis of the data was carried out with the Kolmogorov-Smirnov test, descriptive statistics, Z and χ^2 values, the Mann Whitney-U test, Kruskal-Wallis test, and Spearman's correlation analysis test ($p<0.05$).

Results: The mean age of the fathers was 31.10±5.87 (min=17, max=54); the mean score for knowledge and opinions about breastfeeding was 22.20±3.33 (min=8, max=34). The highest score the fathers displayed in terms of correct answers to the questions on their knowledge and opinions was 91.8% in "When my wife starts to breastfeed, I do things to make her comfortable such as giving her pillows or a glass of water" and in terms of wrong answers, 73.2% in "Breastfeeding does not affect a mother's work". Accordingly, it was found that the correlation between the knowledge and opinions of fathers mean score and the father's age was noticeably high (r=0.99, p=0.67), but that the same correlation was weak in terms of duration of marriage (r=0.26, p=0.629).

Conclusion: The knowledge and opinions of fathers about breastfeeding score was at a moderate level, and age was found to have an effect on fathers' knowledge and opinions on breastfeeding. Providing knowledge and opinions about breastfeeding of fathers through a 'father-friendly breastfeeding approach' could improve long-term exclusive breastfeeding rates, but more studies, perhaps multicenter and with longer follow-up periods, are needed to confirm this hypothesis.

Keywords: Breastfeeding, Fathers, Midwifery, Nursing

ÖZ

Amaç: Bu çalışmanın amacı Türk babaların emzirme konusundaki bilgi ve görüşlerini belirlemektir.

Yöntem: Analitik Kesitsel tipte olan bu araştırma, Aydın, Türkiye'de bir hastanenin obstetri kliniğinde 340 baba ile yürütüldü. Verilerin toplanmasında Tanıtıcı Bilgi Formu, Babaların Emzirmeye Yönelik Düşüncelerini Belirleyen Kontrol Listesi kullanıldı. Verilerin analizi Kolmogorov-Smirnov testi, tanımlayıcı istatistikler, Z ve $\chi 2$ değerleri, Mann Whitney-U testi, Kruskal-Wallis testi ve Spearman korelasyon analizleri kullanıldı ($p<0,05$).

Bulgular: Babaların yaş ortalaması 31,10±5,87 (min=17, maks=54), emzirmeye yönelik bilgi ve düşünce puanı ortalaması 22,20±3,33 (min=8, maks=34)'dir. Babaların emzirmeye yönelik bilgi ve görüşlere verdikleri doğru cevaplardan aldıkları en yüksek puan; %91,8 ile "eşim emzirmeye başladığında rahatlatmak için ona yastık verme, bir bardak su getirme gibi şeyler yaparım" sorusunda ve yanlış cevaplardan aldıkları en yüksek puan; %73,2 ile "emzirmek annenin çalışmasını etkilemez" sorusunda bulundu. Buna göre babaların emzirmeye yönelik bilgi ve görüş ortalaması ile yaş arasındaki ilişkinin çok yüksek olduğu (r=0,99, p=0,67), ancak evlilik süresi açısından aynı ilişkinin zayıf olduğu (r=0,26, p=0,629) bulundu.

Sonuç: Babaların emzirmeye yönelik bilgi ve görüşleri orta düzeydeydi ve yaşın babaların emzirme hakkındaki bilgi ve görüşleri üzerinde etkisi olduğu görüldü. Babaların 'baba dostu emzirme yaklaşımı' ile emzirme konusundaki bilgi ve görüşlerini artırmak uzun vadeli yalnızca emzirme oranlarını iyileştirebilir, ancak bu hipotezi doğrulamak için daha fazla, belki çok merkezli ve uzun bir takip süresine sahip çalışmalara ihtiyaç vardır.

Anahtar kelimeler: Babalar, Ebelik, Emzirme, Hemşirelik

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INTRODUCTION

The first step a baby takes in starting off on a healthy life is breastfeeding. The World Health Organization (WHO) and the United Nations International Children's Emergency Fund (UNICEF) recommend that every infant should be exclusively breastfed for 6 months after birth, after which supplementary food should be introduced but breastfeeding should two years or beyond (WHO/UNICEF, 2020). Breastfeeding is a widespread practice in Turkey, but rates of exclusive breastfeeding over the six months as from birth are low. While the rate of exclusive breastfeeding in the first two months after birth is 45%, this rate falls to 14% in months 4-6 in Turkey (Hacettepe University Institute of Population Studies, 2019). Despite numerous attempts to enhance breastfeeding, studies still show that exclusive breastfeeding rates remain alarmingly low.

Breastfeeding does not develop as only instinctual behavior, but that familial and societal factors have impacts on attitudes toward the breastfeeding practice practice (Gölbaşı & Koç, 2008; Kong & Lee, 2004). The mother in the breastfeeding process needs encouragement and support to adapt to motherhood. The wife support has important impact on initiation and continuing the process of breastfeeding (Cohen et al., 2002; Crippa et al., 2021; Leng et al., 2019; Nickerson et al., 2012; Pereira et al., 2024). The more fathers know about this process, the more they can help. Because the more a father knows about the benefits and management of breastfeeding, the more likely he is to influence its initiation and continuation. Mothers also have higher breastfeeding self-efficacy and self-confidence when they feel supported by their partners (Crippa et al., 2021). In a study evaluating fathers' attitudes toward breastfeeding, most fathers discussed the baby's nutrition with their wives but that only one-third believed that the decision to breastfeed was one that the two parents must take together (Bennett et al., 2016). Kong and Lee (2004) reported that support of fathers has a significant effect on the mode of infant feeding and that mothers who receive support are more likely to prefer to breastfeed. Fathers' attitudes are an important factor affecting breastfeeding and that a father's support and positive attitude toward the breastfeeding practice has an impact on the decision to breastfeed (Bich & Coung, 2017; Cangöl & Şahin, 2014; Lee et al., 2006; Rempel et al., 2017).

Fathers need to be encouraged to participate in the breastfeeding process together with their wives and that the couple should support each other in this respect (Gözükara, 2014) that fathers' attitudes support breastfeeding (Karande & Perkar, 2012) and fathers have the most influence on the initiation and duration of breastfeeding (Köksal et al., 2022; Lee et al., 2006). In some studies, it has been asserted that supporting the mother is important in terms of her continuing to breastfeed, but it can be seen that the studies are mostly on the importance of breast milk and breastfeeding, reported from the perspective of the mother (Gölbaşı & Koç 2008; Irmak, 2016; İnce et al., 2017). It was thought that it was necessary to support the literature on the role of fathers in the breastfeeding process and their knowledge and opinions about breastfeeding. Therefore, the aim of this study was to investigate the knowledge and opinions about breastfeeding of Turkish Fathers.

Research Questions

Q1: What is the level of knowledge about breastfeeding of Turkish fathers?
Q2: What are the opinions about breastfeeding of Turkish fathers?

METHODS

Design

This study was an analytical cross-sectional type of study.

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Population, Sample Size

The universe of the study comprised the 2108 women who gave birth in mid-2018. In the sampling formula with a known universe; the sample size was determined as 340 by taking the confidence interval=95%, p=0.81, q=0.19, t=1.96. Convenience sampling method was used in the selection of samples randomly in the study.

Data Collection

This study was conducted over the period of January-June 2019 at a Hospital in Turkey.

Data Collection Instruments

A Descriptive Information Form and a Checklist to Identify Opinions of Fathers about Breastfeeding were used in the collection of data. Fathers who could speak and understand Turkish, and whose wives had given birth were included in the study.

The Descriptive Information Form and The Checklist to Identify Opinions of Fathers about Breastfeeding were drawn up by the researcher on the basis of the literature (Gözükara, 2014; Karande & Perkar, 2012; Kong & Lee, 2004). The Descriptive Information Form is made up of 12 questions on the sociodemographic characteristics of the fathers (e.g.; age, education, income level, profession). The Checklist to Identify Opinions of Fathers about Breastfeeding is made up of 38 questions to identify 'the knowledge and opinions of fathers about breastfeeding' (with responses of "I agree", "I am undecided", "I do not agree", "I don't know"). The highest possible score from the statements on the fathers' knowledge about breastfeeding is 17; the highest possible score from the statements on the fathers' opinions is 18. These forms were filled out using the face-to-face interview technique or the self-report method.

Statistical Analysis

The research data was analyzed using the IBM SPSS Statistics 22 package program. The data obtained were explored for normality with the Kolmogorov-Smirnov test; the t-test and ANOVA were used in data displaying normal distribution, the Kruskal-Wallis and Mann Whitney-U tests were used in data not displaying normal distribution while the correlation between qualitative variables was analyzed with the Chi-squared test. The percentage (for categorical variables), arithmetic means, standard deviation (for continuous variables) and Spearman's correlation test were also used in data analysis. Statistically, $p<0,05$ was accepted as significant in the interpretation of the data.

Ethical Approval

The study was conducted in accordance with the Declaration of Helsinki. The research received ethical approval from the Ethics Committee for Non-Interventional Clinical Studies of the Faculty of Health Sciences at a university (No: 92340882-050.04.04, Decision: 2018/63). The permission was also obtained from the management of a hospital in Aydın, Turkey for data collection, and the fathers who were recruited into the sample were asked to provide their consent after they had been informed about the nature of the study.

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RESULTS

Table 1. Descriptive Statistics According to Demographic Characteristics of Fathers (N=340)

Variables		n (%)
Age	17-23	22 (6.5)
	24-37	265 (77.9)
	38-54	53 (15.6)
Age (Mean±SD)	31.10±5.87	
Level of Education	Elementary School	81 (23.8)
	Middle School	90 (26.5)
	High School	112 (32.9)
	University and above	57 (16.8)
Employment Status	No	61 (17.9)
	Yes	279 (82.1)
Civil Status	Married	326 (95.9)
	Single	14 (4.1)
Spouse's Education	Illiterate	15 (4.4)
	Elementary School	84 (24.7)
	Middle School	95 (28.0)
	High School	84 (24.7)
	University and above	62 (18.2)
Spouse's Employment Status	No	247 (72.6)
	Yes	93 (27.4)
Health Insurance Status	No	69 (20.3)
	Yes	271 (79.7)
Family Type	Nuclear	214 (62.9)
	Extended	126 (37.1)
Marriage Duration (Year)	1-1.99	54 (15.9)
	2-9.99	223 (65.6)
	10-27	63 (18.5)
Marriage Duration (Mean±SD)	5.67±4.62	
Family Income Status	Income less than expenditure	148 (43.5)
	Income equal to expenditure	171 (50.3)
	Income greater than expenditure	21 (6.2)

SD: Standard deviation.

The mean age of the participating fathers was 31.10±5.87 (min=17, max=54); 32.9% were high school graduates, 82.5% employed, 95.9% married, 27.9% had a spouse who was a graduate of middle school, the wives of 72.6% were unemployed, 79.7% had social security, 62.9% lived in a nuclear family, 46.8% lived in the district, 50.3% perceived their income to be equal to their expenditure, and the average duration of their marriages was 5.67±4.62 (min=1, max=27) years (Table 1).

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Table 2. Distribution of Fathers' Knowledge and Opinions on Breastfeeding (N=340)

Statements revealing fathers' knowledge about breastfeeding	**Right n (%)**	**Wrong n (%)**	χ^2	**P**
The only nutrient our baby needs is breast milk	238 (70.0)	102 (30.0)	54.40	**0.000**
Breastfeeding causes pain and discomfort in the breast	166 (48.8)	174 (51.2)	0.18	0.664
Breast milk keeps the baby satisfied	279 (82.1)	61 (17.9)	139.77	**0.000**
My wife should breastfeed our baby each time it cries	112 (32.9)	228 (67.1)	39.57	**0.000**
Breastfeeding doesn't tire out the mother	173 (50.9)	167 (49.1)	0.10	0.745
Babies fed with formula are healthy	174 (51.2)	166 (48.8)	0.18	0.664
Breast milk is environment-friendly	258 (83.8)	55 (16.2)	155.58	**0.000**
It's not right to breastfeed right after birth	238 (70.0)	102 (30.0)	54.40	**0.000**
Feeding a baby formula tires out a mother	163 (47.9)	177 (52.1)	0.57	0.448
Babies fed formula sleep irregularly	146 (42.9)	194 (57.1)	6.77	**0.009**
Breast milk costs nothing	253 (74.4)	87 (25.6)	81.04	**0.000**
Colostrum (first milk) is harmful to the baby	237 (69.7)	103 (30.3)	52.81	**0.000**
Breastfeeding strengthens the bond between mother and baby	280(82.4)	60 (17.6)	142.35	**0.000**
Babies fed formula are fat	169 (49.7)	171 (50.3)	0.01	0.914
It's hard to give the baby the amount that will satisfy it with formula	182 (53.5)	158 (46.5)	1.69	0.193
It's hard to know that breast milk is enough	153 (45.0)	187 (55.0)	3.40	0.065
My wife can't breastfeed when she's out shopping. at the supermarket. the bazaar or in the bus	118 (34.7)	222 (65.3)	31.81	**0.000**
I believe that breast milk should be given for at least 6 months without even water	194 (57.1)	146 (42.9)	6.77	**0.009**
Breastfeeding protects against pregnancy	101 (29.7)	239 (70.3)	56.01	**0.000**
Fathers' knowledge about breastfeeding mean scores		10.76±2.37		
Statements revealing fathers' opinions about breastfeeding	**Right n (%)**	**Wrong n (%)**	χ^2	**P**
Breastfeeding makes going to work harder	136 (40.0)	204 (60.0)	16.60	**0.000**
I feel left out during the breastfeeding period	263 (77.4)	77 (22.6)	101.75	**0.000**
Breastfeeding will force us to make changes in our habits	148 (43.5)	192 (56.5)	5.69	**0.017**
I want my wife to breastfeed the baby on time	227 (66.8)	113 (33.2)	38.22	**0.000**
I try to do housework so that my wife can breastfeed our baby	270 (79.4)	70 (20.6)	117.64	**0.000**
Breastfeeding takes up a mother's time	200 (58.8)	140 (42.2)	10.58	**0.001**
Feeding a baby formula is easy	154 (45.3)	186 (54.7)	3.01	0.083
Our family elders decide on how our baby should be breastfed	266 (78.2)	74 (21.8)	108.42	**0.000**
I think our other child will be affected when my wife is breastfeeding	173 (50.9)	167 (49.1)	0.106	0.745
The setting the mother is in is not a barrier to breastfeeding	134 (39.4)	206 (60.6)	15.24	**0.000**
A breastfeeding mother can feel it when her baby's hungry	274 (80.6)	66 (19.4)	127.24	**0.000**
Breastfeeding does not affect a mother's work	91 (26.8)	249 (73.2)	73.42	**0.000**
We need to be very careful about my wife's nutrition while she's breastfeeding	271 (79.7)	69 (20.3)	120.01	**0.000**
Babies that are fed formula are more irritable	102 (30.0)	238 (70.0)	54.40	**0.000**
My wife feels she needs help in breastfeeding	159 (46.8)	181 (53.2)	1.42	0.233
I'm afraid my spouse won't be able to breastfeed	257 (75.6)	83 (24.4)	89.04	**0.000**
If it wasn't so expensive. we would feed our baby formula.	211 (62.1)	129 (37.9)	19.77	**0.000**
I believe my wife's milk will dry up early.	239 (70.3)	101 (29.7)	56.01	**0.000**
When my wife starts to breastfeed. I do things to make her comfortable such as giving her pillows or a glass of water	312 (91.8)	28 (8.2)	237.22	**0.000**
Fathers' opinions about breastfeeding mean score		11.43±2.11		
Fathers' knowledge- opinions about breastfeeding mean score		22.20±3.33		

SD: Standard deviation.

The highest scores the fathers displayed on the correct answers they gave to the questions on their knowledge and opinions were in the items "When my wife starts to breastfeed, I do things to make her comfortable such as giving her pillows or a glass of water" (91.8%) χ^2=237.22, p=0.000), "Breast milk is environment-friendly" (83.8%) (χ^2=155.53, p=0.000), and "Breastfeeding strengthens the bond between mother and baby" (χ^2=142.35, p=0.000) (82.4%). The highest scores they

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displayed on wrong responses were "Breastfeeding does not affect a mother's work" (73.2%) (χ^2=73.42, p=0.000), "Breastfeeding protects against pregnancy" (χ^2=56.01, p=0.000) (70.3%), and "Babies that are fed on formula are more irritable" (χ^2=54.40, p=0.000) (70%). The mean knowledge score of the fathers regarding breastfeeding was 10.76±2.37 (min= 3, max=17), their mean opinions score was 11.43±2.11 (min= 5, max=18), and their knowledge and opinions total mean score was 22.20±3.33 (min= 8, max=34) (Table 2).

Table 3. Comparison of Fathers' Sociodemographic Features and Their Knowledge and Opinions on Breastfeeding Mean Scores

Variables		Mean±SD	Median (25th-75th percentile)	Z/χ^2	P
Education	Elementary School	21.37±3.35	22 (19-24)	5.297	0.057
	Middle School	21.81±3.15	22 (20-24)		
	High School	22.40±2.83	22 (21-24)		
	University and above	23.59±4.02	24 (20-26)		
Employment Status	No	21.31±3.33	21 (19-24)	-1.520	0.128
	Yes	22.39±3.30	20 (20-25)		
Spouse's Education	Illiterate	20.73±2.65	21 (19-22)	14.956	0.029
	Elementary School	21.25±3.27	21.50 (20-23)		
	Middle School	22.65±2.60	22.65 (21-25)		
	High School	21.51±3.30	22 (20-23.75)		
	University and above	24.08±3.72	24 (21.75-26)		
Spouse's Employment Status	No	22.06±3.10	22 (20-24)	-1.146	0.350
	Yes	22.55±3.87	23 (20-25)		
Health Insurance	No	21.60±3.19	22 (20-24)	-1.924	0.035
	Yes	22.35±3.35	22 (20-25)		
Family Type	Nuclear	22.31±3.48	22 (20-24)	-0.593	0.843
	Extended	22±3.05	22 (20-24)		
Place of Residence	Province	23±3.48	23 (21-25)	2.832	0.923
	District	22.06±3.01	22 (20-24)		
	Village	21.50±3.53	21 (19-24)		
Perceived Income Status	Income less than expenditure	21.66±3.22	22 (20-24)	2.893	0.313
	Income equal to expenditure	22.54±3.24	22 (21-25)		
	Income greater than expenditure	23.19±4.28	22 (20-25.50)		

SD: Standard deviation, Z: Mann-Whitney U (Two variables), X^2: Kruskall Wallis (More than two variables).

It was observed that the mean scores of their knowledge and opinions about breastfeeding were similar according to sociodemographic features of fathers (p>0.05) (Table 3).

Table 4. Relationship Between Fathers' Knowledge and Opinions About Breastfeeding Mean Score and Quantitative Variables

Variables	Age	Marriage Duration
Fathers' Knowledge-Opinions about Breastfeeding Mean Score	**r=0.99**	r=0.26
	p=0.67	p=0.629

The correlation between the mean knowledge and opinions scores of fathers about breastfeeding and the quantitative variables of age and duration of marriage was determined by Spearman's correlation test. Accordingly it was found that the correlation between the mean scores of knowledge and opinions of fathers about breastfeeding and their ages was quite high (r=0.99, p=0.67). But the correlation was weak in terms of their duration of marriage (r=0.26, p=0.629) (Table 4).

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DISCUSSION

The knowledge and opinions of fathers about breastfeeding are presented in the study. Being aware of fathers' sociodemographic characteristics and the relationship between these features and breastfeeding is important in describing the extent of knowledge and opinions of fathers about breastfeeding and also in terms of creating potential interventions that can be undertaken by midwives and nurses.

Breastfeeding rates are not at the desired levels in almost all societies. There are many factors affecting this and the lack of knowledge of fathers on this subject is among these factors. It is foreseen that these deficiencies will be eliminated by healthcare professionals and the breastfeeding rates will be increased. The mother and baby will have a healthier and more adequate breastfeeding and breastfeeding experience.

In this study. It was found that as the education level of the fathers. perceived income and living in the province increased. the average opinion and point of knowledge about breastfeeding increased. In addition. It was observed that working fathers and their spouses had higher mean opinion and point of knowledge about breastfeeding than non-working fathers and their spouses. This is an expected but undesirable result. Because it is desirable for all fathers to have a high opinion and knowledge score regarding breastfeeding.

It is thought that the average point of knowledge and opinion of fathers about breastfeeding is at a moderate level. but expected is that all fathers have full knowledge and opinion about breastfeeding. There are similar studies done on this subject (Bich & Cuong, 2017; Crippa et al., 2021; Leng et al., 2019; Pereira et al., 2024).

Although few studies have been conducted (Bich & Cuong, 2017; Cangöl & Şahin, 2014; Crippa et al., 2021; Irmak, 2016; Kenosi et al., 2013; Kong & Lee, 2004; Lee et al., 2006; Mitchell-Box & Braun, 2012; Ou et al., 2018; Özlüses & Çelebioğlu, 2014; Pereira et al., 2024; Rempel et al., 2017; Su & Ouyang, 2016; Tohotoa et al., 2011). The knowledge and opinions of fathers about breastfeeding and consequently their support during the breastfeeding process increase the breastfeeding success of mothers and are effective in breastfeeding behavior and decision. Similarly, de Montigny et al. (2018) concluded in their study that the fathers of breastfed babies have three main roles: being a partner in decision-making. ensuring the functioning of the family and providing emotional support to the mother. In the study of Kenosi et al. (2013) it is pointed out that the knowledge of fathers about breastfeeding is quite low. 80.6% of fathers think that breastfeeding is only the decision of the mother. 48% are unaware that babies fed with breast milk are healthier than babies fed with formula.

The three correct answers that fathers got the highest score from knowledge about breastfeeding are 'breastfeeding is environmentally friendly', 'breastfeeding increases mother-baby attachment' and 'breast milk keeps the baby full' and the three correct answers for which they got the highest scores from opinions about breastfeeding were 'when my wife started breastfeeding. I do things like giving her a pillow to comfort him, bringing a glass of water' and 'breastfeeding mother can sense that her baby is hungry' and 'I try to take responsibility in housework so that my wife can breastfeed our baby' were still considered positive answers. However, it is expected that all knowledge and opinion points of fathers regarding breastfeeding are at the highest level.

Knowledge and experience are expected to increase over the years and as the age of marriage also increases, this is also usual. In this study, the fact that the duration of marriage of the fathers did not affect their knowledge and opinions about breastfeeding was considered as an undesirable negative result, while it was seen that the very high effect of the age of the fathers met the expectation and it was considered to be a normal result. Similarly, in a study by Ng et al. (2019) it was stated that fathers are suitable for educational interventions in improving their knowledge and attitudes about breastfeeding, and in a study by Maycock et al. (2013) it was stated that breastfeeding rates increase when fathers are invited to participate in

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prenatal breastfeeding programs along with their wives. It is thought that it would be beneficial for fathers to increase their knowledge and opinions on breastfeeding through a 'father-friendly breastfeeding approach'. regardless of socio-demographic characteristics.

Limitations

This study has some limitations as, the research should be done in cross-sectional and improbable (random) sampling methods, the study findings were only made with the fathers who applied at the health institution where the study was conducted and during the time period of the study, the results obtained may vary over time and represent only the fathers participating in the research and therefore cannot be generalized to society, research data are limited to the questions in the data collection form and the information provided by the fathers.

CONCLUSION

According to the result of this study, knowledge and opinions of fathers about breastfeeding is at a medium level. It was determined that the knowledge and opinions of the fathers were only related to age among the sociodemographic characteristics, and the more accurate and up-to-date knowledge of the fathers as their age increased.

Health professionals especially midwife and nurses have an important role in supporting breastfeeding process, explaining the role of the father and providing counseling on breastfeeding process. The data to be collected on the knowledge and opinions of fathers about breastfeeding will allow midwives and nurses to review the behaviors of fathers. Being aware of the importance of father's knowledge and opinions on breastfeeding, it would be beneficial to include the fathers in breastfeeding trainings and counseling organized with ‘father-friendly breastfeeding approach’ by midwives and nurses. Further studies are needed related with high evidence value examining the importance of the effects of fathers in the breastfeeding process.

Araştırmanın Etik Yönü/Ethics Comittee Approval: The study was conducted in accordance with the Declaration of Helsinki. The research received ethical approval from the Ethics Committee for Non-Interventional Clinical Studies of the Faculty of Health Sciences at a university (No: 92340882-050.04.04, Decision: 2018/63). The permission was also obtained from the management of a hospital in Aydın, Turkey for data collection, and the fathers who were recruited into the sample were asked to provide their consent after they had been informed about the nature of the study.

Hakem/Peer-Review: The external referees are independent.

Yazar Katkısı/Author Contributions: Study Conception: HUH; Study Design: HUH, DG; Data collection and/or Processing: DG; Statistical Analysis and/or Data Interpretation: HUH, DG; Literature Review: HUH, DG; Manuscript Preparation: HUH, DG; Critical Review: HUH.

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