Father Committed to Early Parenting from the First Father-child Contact Experienced at Birth*

Theme: Promotion and prevention.

Contribution to the discipline: Actively involving the fathers through participatory prenatal education fosters the attitude they will have towards the future upbringing of their child. It is important to carry out prenatal preparation sessions based on the expectations raised by the father and the mother, avoiding the standardization of education, since each individual has particular learning needs. This preparation culminates in an act of connection through skin-to-skin contact between the father and the baby during the moment of birth and with the emergence of a unique bond between the two, which favors parenthood committed to the active upbringing the child. The approach from the nursing discipline makes it possible to turn an obstetric event in which the mother and the child are the protagonists into an inclusive and family and social act for the promotion of healthy ties.

ABSTRACT

Objective: To know how the phenomenon of active paternal upbringing is shown from the father-child contact experience during birth. **Method:** Analysis of secondary information from a qualitative study of a phenomenological nature. Transcripts of interviews and focus groups of all the fathers who participated in a father-child contact protocol for a doctoral thesis. **Results:** The study revealed the global structure of the phenomenon, whose central axis corresponds to "father who advances towards the integral connection with his child and is committed with parenting", and its three comprehensive categories: expectations of being a father and actor in parenting; the experience of being a father at birth time; and the everyday of the upbringing. **Conclusion:** Prenatal preparation and skin-to-skin contact during birth mobilize the father towards commitment and involvement with the upbringing of his child from the beginning.

KEYWORDS (Source: DeCS)

Child rearing; prenatal education; father-child relations; qualitative research; childbirth.

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Padre comprometido con la crianza temprana desde el primer contacto padre-hijo/a vivido en el nacimiento*

RESUMEN

Objetivo: conocer cómo se muestra el fenómeno de la crianza paterna activa a partir de la experiencia de contacto padre-hijo/a, vivida durante el nacimiento. **Método:** análisis de información secundaria de un estudio cualitativo de naturaleza fenomenológica. Transcripciones de entrevistas y grupos focales de todos los padres que participaron de un protocolo de contacto padre-hijo/a para una tesis doctoral. **Resultados:** el estudio reveló la estructura global del fenómeno, cuyo eje central corresponde a "padre que transita hacia la conexión integral con su hijo/a y se compromete con la crianza", y sus tres categorías comprensivas: expectativas de ser padre y actor en la crianza; la vivencia de ser padre en el momento del nacimiento; el día a día de la crianza. **Conclusión:** la preparación antenatal y el contacto piel con piel durante el nacimiento movilizan al padre hacia el compromiso e involucramiento con la crianza de su hijo/a desde el comienzo.

PALABRAS CLAVE (FUENTE: DECS)

Crianza del niño; educación prenatal; relación padre-hijo; investigación cualitativa; nacimiento.

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Pai comprometido em criar seu filho/a desde o primeiro contato pai-filho/a vivenciado com o parto*

RESUMO

Objetivo: conhecer como o fenômeno da educação paterna ativa é demonstrado a partir da experiência de contato pai-filho/a vivida durante o nascimento. **Método:** análise de informações secundárias a partir de um estudo qualitativo de natureza fenomenológica. Transcrições de entrevistas e grupos focais de todos os pais que participaram de um protocolo de contato pai-filho para uma tese de doutorado. **Resultados:** o estudo revelou a estrutura global do fenômeno, cujo eixo central corresponde ao "pai que transita em direção à conexão integral com o filho / a e está comprometido em criar", e suas três categorias abrangentes: expectativas de ser pai e ator na criação; a experiência de ser pai ao nascer; o dia a dia no processo de criação. **Conclusão:** o preparo pré-natal e o contato pele a pele durante o parto mobilizam o pai para o comprometimento e o envolvimento com a criação do filho desde o início.

PALAVRAS-CHAVE (FONTE: DECS)

Educação infantil; educação pré-natal; relações pai-filho; pesquisa qualitativa; parto.

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Introduction

Skin-to-skin contact between a mother and her newborn has been shown to have benefits for both, especially for the bond. The effectiveness of breastfeeding increases in the mother, while in the newborn the cardiorespiratory system stabilizes, along with other positive effects (1).

In a Chilean study, early skin-to-skin contact was shown to have a significant association with decreased maternal depressive symptomatology, which is an important strategy to improve the quality of life of the binomial (2). However, this beneficial practice for the mother and her child can also be beneficial for the father-child relationship. The skin-to-skin contact of the father with his child (hereinafter referred to as SSCFC would produce an increase in paternal oxytocin levels and a decrease in stress levels (3), which is why it is essential to favor this inclusive practice in births.

Although the described practice is not yet culturally accepted, even by women themselves (3), other studies describe differences between mother-child and father-child contacts (4), as well as the benefits for future parenting skills (5), and the strengthening of the father-child bond (6).

As it has been seen in some studies, the assumption that parental contact strengthens the bond between father and child (6) becomes relevant for the nursing scope. An in-depth study of this phenomenon will allow knowing the guidelines for directing possible future interventions in primary care or deliveries. Likewise, understanding the benefits of the SSCFC for future parenting skills (5) will help incorporate the father early in the entire process of pregnancy and childbirth.

According to a meta-synthesis found, the SSCFC facilitates the paternal role when the father becomes aware of the needs of his newborn, from where he marks his parenting skills (7). In Chile, SSCFC is not carried out routinely. Therefore, the objective of this research project is to know how the phenomenon of active parenting is shown from the experience of father-son contact during birth, from the perspective of fathers whose children were born in any institution belonging to the UC-Christus Health Network. The question that guides this study is the following: How do fathers live the experience of raising their child from the contact established between them at the time of birth?

Philosophical theoretical framework

The assumptions made for this investigation are: a) SSCFC experiences are particular and multiple; b) phenomenology reveals the lived experience and the meanings that fathers assign to this experience: c) the conscious experience of the person is revealed through the testimony of who bears the phenomenon under study.

The aforementioned proposes a phenomenological approach as a qualitative methodology to answer the question which is set out. This corresponds to the methodology that focuses on understanding the experience of a particular phenomenon that is hidden from consciousness. As a philosophy, it corresponds to the study of the essences through a description of the experience lived in by the person in everyday life. It does not intend to know the etiology of the essence, but rather seeks to understand it in order to comprehend what such individuals are showing by sharing the story of their experience (8).

Methodology

For this study, an analysis of secondary information generated from a doctoral thesis carried out between 2015 and 2016 (9) was used, which combined two methodologies in two stages of the fathers' experience: action-research, for the prenatal preparation of the fathers, and phenomenological approach, to understand the paternal experience lived from birth. The analysis from the phenomenological perspective was based on three key concepts: essence, intuition, and phenomenological reduction. Essence is the most basic unit for meaning that allows for the personal and subjective description of the phenomenon under study. Intuition corresponds to the interpretation of the phenomenon, from the description made by the participant-carrier. Phenomenological reduction is a process where the researcher must isolate all the personal elements that are related to the phenomenon under study and that could interfere with that interpretation and understanding (8).

The selection of the participants in the original study corresponded to twelve fathers and their pregnant partners, all adults, who were in a third-trimester physiological pregnancy (9).

The pre-delivery focus groups and the individual interviews conducted one month after delivery were previously transcribed

verbatim; their content revealed information on the phenomenon related to parental upbringing and SSCFC. In the focus groups, expectations related to parenting were identified; and, in the interviews, those units of meaning that revealed the phenomenon of upbringing on the day after birth.

The information analysis was carried out according to what Streubert (10) sets out, which consists, first, of the personal description of the phenomenon of interest and the written record of the researcher's own assumptions (*bracketing*); second, in reading and rereading the transcripts for the overview and detail for lifting the essences (units of meaning); third, in understanding the relationship between the units of meaning and the grouping, according to the concordances. This complete process allows developing and presenting a formal structure of the studied phenomenon, together with the richness of a compelling discussion with the relevant and available literature.

Regarding methodological rigor, according to what was stated by Guba and Lincoln in Streubert (10, 11), four criteria were identified that support the work carried out, namely: credibility, dependence, conformability, and transferability. Credibility and the member checking process were ensured in the original study, in accordance with the principle of co-participation and validation for emerging issues and expectations arising from the action-research. Credibility is achieved by connecting emerging essences with information available in related studies and triangulating analysis among the researchers. Regarding dependence, there was a detailed description of each step carried out in the methodology, both in the original study and in the current one. For conformability, the analysis was triangulated among the lead researcher, the guiding researcher, and the reviewer. This was carried out in sessions between the lead and guiding researchers. The lead researcher then sent the analysis separately to the guiding researcher and reviewer for obtaining three points of view. Finally, the three impressions were collected in a closing session, to reach a consensus and a deep understanding on the revealed phenomenon. For conformability, it was necessary to describe step by step each one of the stages carried out, so that it is reproducible for other researchers. Finally, for transferability, the characteristics of the fathers of the original study were recorded in a table (Table 1), so that future researchers may extrapolate the results for similar populations.

Table 1. Characterization of the participants

Participant	Age	Nationality	Education	Forecast	Marital status
Institutionalized public health system					
Gold	31	Chilean	Professional technician	FONASA	Single
Red	23	Chilean	High school	Isapre	Single
Sepia	35	Chilean	Professional technician	FONASA	Single
Brown	39	Chilean	Professional technician	Isapre	Married
Gray	54	Chilean	High school	FONASA	Married
Calypso	27	Chilean	High school	FONASA	Single
Jade	45	Chilean	Professional technician	FONASA	Single
Private health care system					
Messi	30	Argentinean	Higher education	Isapre	Married
Vidal	34	Chilean	Higher education	Isapre	Married
Pinilla	32	Chilean	Higher education	Isapre	Married
Medel	35	Chilean	Higher education	Isapre	Married
Sánchez	29	Chilean	Postgraduate	Isapre	Married

Source: Preparation for the original doctoral thesis, based on Uribe-Torres and Hoga (9).

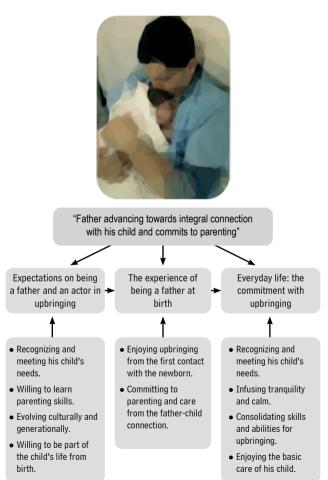
Another important point to highlight is that the ethical considerations, both from the original study and from the current one, were analyzed in light of the principles proposed by Emanuel (12). Likewise, this study was approved by the Scientific Ethical Committee of the Medical School of the Pontifical Catholic University (PUC) of Chile. The original doctoral thesis project was approved by the same Chilean entity and by the Research Ethics Committee of the EEUSP, Brazil, taking into account that the procedures of the original research were developed in accordance with Resolution 466/2012, of the Brazilian National Health Council and with Law 20,120 in Chile.

Results

Comprehensive categories and central phenomenon

The essences revealed from the transcribed stories come together in three main categories: the expectations of being a father and actor in the upbringing, the experience of the SSCFC at birth and in the everyday of paternal upbringing. These make it possible to support and understand the phenomenon of the "father who advances towards the integral connection with his child and is committed with parenting", represented in Figure 1.

Figure 1. Descriptive figure of the revealed phenomenon



Expectations on being father and actor in parenting

The parental expectations considered in this study were identified from the content of the focus groups of the exploratory phase of prenatal preparation (original study). Those most relevant corresponded to: achieving future recognition of their child's needs, developing parenting skills, evolving culturally and generationally with respect to how their fathers were with them, and wanting to be part of their children's lives from birth.

Being able to recognize my child's needs

The expectation of being a good father arises as the subject feels capable and wants to learn to recognize the most basic needs of his children, such as crying, rest, and hunger.

"Recognizing the types of crying, when they are hungry, when they are sleepy [...]. Knowing if they are hungry or we can try to put them to sleep..." (P5).

Developing parenting skills

The fathers' reports, during the exploratory phase, show the need to learn basic technical skills for raising their children, such as changing diapers, drinking, dressing, and calming.

- "... how to hold him and with what force; how to change him, put clothes on, take clothes off. Those are things that nobody teaches you" (P3).
- "... it is very important to see the theme of changing because I have never changed my children's diapers; in some emergency situations, but for me to want to change the baby's diaper, no" (P4).

Evolving culturally and generally: from passive parental upbringing to an active posture

In their reports, some fathers report that the older generations showed no involvement of the father as an active figure in the upbringing. Likewise, they highlight that all the tasks were carried out by the mother, while the role of provider and authority figure corresponded to the father. However, a need for some change is seen in a father's report. Already with older children, he wants to be involved from the beginning, for the first time, in the upbringing of the child that is about to be born and regrets not having been able to do it with his other children.

Source: Own elaboration

It is a family matter too, as all this evolves. My grandfather and my father acted in a certain way, more distant than my dad and I were. Also my dad and I were more distant than I am going to be with my daughter, possibly. In the past, women were born to have children and to raise. The man was an authority figure for the child and with a provider's role (P5).

Willing to be part of the child's life from the moment of birth

It was found that the fathers seek to be more than an accompanying entity; they seek to be part of their children's life and to get involved from birth; they hope to establish a bond that develops throughout an active upbringing and that is perpetuated in time and in life with their children.

"... but it also means being part of day one (birth) in my son's upbringing, and that he can feel confident that he will have a present and active father in his upbringing and growth throughout his life" (P1).

"I don't want to be left out, but rather insert myself into her life from the beginning" (P5).

The experience of being a father at birth

The experience of birth, being and feeling a father, was collected from the reports obtained through in-depth individual interviews, carried at out one month of the child's life. The testimonies reveal multiple sensations, some related to the moment itself, others that project feelings towards the future, such as the desire to raise from a first contact.

Enjoying parenting from the first contact with the newborn

The phenomenon is shown as a unique connection between the father and the child, generated from the first skin-to-skin contact established between the two. The father enjoys this moment as an actor, not as a spectator.

"I see that the connection that I have with my daughter is exquisite [...] right now I am enjoying my daughter from the moment she was born. In this situation I was more than a spectator, my daughter enjoyed this from the start" (PA).

Committing to parenting and care from the father-child connection

Some fathers express the experience of birth as a "connection" that calls them to commitment and responsibility with their child, through which they give them the security, tranquility, and protection they need.

"I saw him and I felt the responsibility, I felt that the child needs me, and I need the child too. I felt a kind of connection with the child" (PC).

I told her that, while I was there with her, she would lack nothing, nothing was going to happen, so that she feels being protected with me, for her to tell me everything. You dream a lot, to be the ideal father, for the child not to lack anything, to trust, to tell me everything, that I am 100 percent available for the child, that was what I was trying to tell him (at birth) (PG).

"It has to do with a containment that you give her, and that transmits tranquility to the child, not fear" (PE).

The connection experienced during birth allows the father to project himself into the future of parenting with a special role, to want to see his child grow and feel proud of this condition.

"Tenderness, love, I started dreaming immediately; when growing up, first day at school, first dance, all the little things that you do not see when they tell you, but when you start to live them it is different, it feels more direct, in first person" (PG).

"Many things... I was afraid of being fragile, the joy that she was my daughter and having her for the first time, the pride of being a father, the pride that she has already been born. I wanted to see her growing" (PB).

Everyday life: The commitment with upbringing

The reports reveal the feelings that are related to everyday life, after birth, both in the bond and with the upbringing. Essences arise where fathers are confident in recognizing and attending to the needs of their children, consolidating basic technical skills for their care.

Recognizing and meeting their child's needs

By reporting their postpartum experience, the fathers manage to raise awareness on a topic related to knowing how to be a father, knowing how to recognize and meet the needs of their child. They manage to read their needs, which leaves them satisfied with their own achievements.

My baby may cry, but I don't even have to be patient, since for me it is part of the process of understanding that the baby wants something. I hold my baby now, I try to understand her, I think I now have a connection thanks to which I know what will happen after she drinks milk, when she is sleepy. I understand all these processes, I can read what the baby is saying (PA).

"I already identify when it is something they really need and when it is not. The way of crying is different when the child is really hungry or cold [...] you get to know the child more everyday" (PG).

Infusing tranquility and calm: benefit for the father-child relationship

The testimonies reveal that the fathers feel complicity with their child so that they become the person who manages to transmit tranquility and calm to their baby. A father reports feeling that such tranquility generates a mutual benefit; there is a "synchronous tranquility" between the two.

The baby is said to be more attached to me. When I am with her I have no problems, my daughter behaves "super" (very well), she does not bother at all, but my partner tells me that when I am not there, the baby cries a lot; when I am present she does not cry, do you notice the change? (PA).

When she's in the room, I've realized that I calm him. Now, the last days, at night, I walk him, make him sleep for a little while and put him to bed closer to me. He is restless and I approach him, I breathe closer to him and he remains calm, he begins to fall asleep, he calms down with me, that remains the same (PD).

"As he is calm, he makes me calm, I think he feels that. When I hold him I am calm" (PC).

Based on the baby's need for tranquility, the fathers reveal in their reports that they have been developing strategies to calm their children, depending on each identified need.

"At that moment she began to cry, and no one could calm her down. I hold her and she became calm; I also wanted to stand up because if I sat down she would get restless, so I stood up, I started rocking her and she calmed down" (PB).

"I like to hold her in many ways because I find it much more relaxing for her. It's incredible: when you hold her, you immediately feel when she's not comfortable, when she feels restless or when she's not well" (PF).

"Now, I hold her, I walk her a little, I whisper something to her and she calms down. I believe that a part of her must return to that moment of warmth, comfort, and union (birth)" (PE).

Consolidating parenting skills and abilities for parenting

Another of the essences revealed from the fathers' reports includes the achievement of competences, skills, and abilities for upbringing their children. These highlight the feeling of confidence, of not being afraid.

"I hold my baby with confidence, calmly, I have no problem to turn the baby here and there, so I think that was very positive for me" (PA).

"Now I am a master in changing diapers, I no longer have any problem. I have been practicing the diaper change, learning technical things [...] I've even dressed him up. At the beginning it was more complicated for me, but now I already found the technique to be able to put his clothes on, it was necessary to gain confidence" (PD).

"I feel very confident; in fact, I think I can make him sleep easily, or if he needs a diaper change, I also do it" (PC).

They attribute achieving these skills to having had the first skin-to-skin contact with their children at birth. Although for some it was not easy at first, they feel that this instance allowed them to be prepared to face new situations of caring for their children.

"When you become attached, you have to face immediate physical contact; then, when you have to hold her for the second time, there is no longer that barrier of never having held her" (PE).

"With the security that this gave me to be able to hold him because I had never held a baby, and with you it already gave me a little more security, I felt more empowered" (PD).

Enjoying their child's basic care

In their reports, the fathers are at ease, enjoying themselves, happy to physically take care of their children. They do not see it as an obligation, so feeling motivated generates satisfaction.

"Changing him, bathing him, taking off the dirt, preparing a bag to go out. You have to be there participating and doing everything that can be done. I do it with pleasure, with great pleasure" (PD).

"Yes, even though I'm deadly sleepy, I enjoy dressing her, bathing her, even though she cries a lot for that too" (PG).

Discussion

In this study, the reports showed that the fathers who have received participatory prenatal preparation are involved in raising their child from the beginning. They spontaneously express expectations of being good fathers and caregivers, capable of recognizing the needs of their unborn children. According to other authors, thanks to the special prenatal preparation sessions for fathers, they would be able to feel more confident when facing their distinct roles from birth (10).

In the original study (9, 13), no father reported feeling left out during prenatal preparation. This is due to the fact that, in the exploratory and educational sessions, the themes to be developed were jointly defined. However, in other studies, despite having received antenatal preparation, the fathers felt excluded by participating in some sessions aimed only at the mothers. Therefore, they suggested that they would have liked to be taught basic parenting skills (14).

In the reports, the fathers expressed that they sought to reconvert past cultural and generational experiences, moving from passive parenting to active parenting. They maintained that, in the past, the father was the provider, while the mother was the one in charge of the upbringing. By receiving antenatal training, they were able to make this perception of upbringing visible, and now they seek to become actively involved in it and change history. Other authors reinforce this idea: the fathers who received antenatal training had the opportunity to reflect on the influence of the cultural, social, and historical environment as a barrier to parenting (15).

In the stories of this study, the fathers reported not being afraid to face the first father-child contact. However, other studies show that, because they feel that upbringing has always been a maternal function, fathers fear parenthood, feeling excluded from

such work. Sponsler *et al.* point out that one of the main strategies to cross this fear barrier is prenatal parental preparation and physical contact during birth (16). In their turn, Nyqvist *et al.* expose that it is difficult to establish SSCFC spontaneously and without parental antenatal preparation, since they attribute it to the privileges of the mother (17).

For the fathers in this study, parenting began from the moment of birth, from the first SSCFC. The reports show the emergence of the bond that connected and committed them to their children; the need to take care of them, to see them grow and to be fathers; the necessary security and confidence to raise them. These essences were revealed thanks to the phenomenological approach used to analyze the interviews (8). Other authors reassert this idea, with the reinforcement of the bond, the deep connection, and the feeling of security and confidence that they transmit in order to raise (15, 18).

Later on, in the everyday of upbringing, the fathers reported that the prenatal expectations were met. They were able to recognize and attend to the basic needs of their children; they developed self-confidence and basic parenting skills, such as changing diapers, walking, dressing, and holding their newborns. All thanks to having been involved from the first moment (birth) in the upbringing of their children. This aspect is reinforced by a meta-synthesis whose approach is that the fathers feel more secure and closer to upbringing from the first contact at birth to the first year of life, progressively. Changing diapers or bathing allows them to feel more secure in caring for their children (19). In turn, other authors suggest that the earlier the father gets involved, the greater his commitment to raising the child will be (20).

Conclusion

Inclusive paternal preparation results in a father committed to parenting from before the birth. With this benefit, the fathers can understand and express their weaknesses and strengths, and this allows the intervention to be guided based on these difficulties. Starting with the SSCFC at birth provides technical and affective tools that empower the father in this role. The early father-child bond established has a positive effect on the family, as well as on the relationship with the partner. However, it is necessary to continue exploring how this type of intervention contributes to establishing healthy couple and family relationships that protect children.

Conflict of interests: None declared.

References

- 1. Moore E, Bergman N, Anderson G, Medley N. Early skin-to-skin contact for mothers and their healthy newborn infants (review). Summary of findings for the main comparison. Cochrane Database Syst Rev [Internet]. 2016;5(11). Disponible en: https://www.ncbi.nlm.nih.gov/pubmed/27885658
- Dois CA, Lucchini RC, Villarroel DL, Uribe TC. Efecto del contacto piel con piel sobre la presencia de síntomas depresivos postparto en mujeres de bajo riesgo obstétrico. Rev Chil Pediatr [Internet]. 2013;84(3):285-92. Disponible en: https://scielo.conicyt.cl/pdf/rcp/v84n3/art06.pdf
- 3. Smith ER, Bergelson I, Constantian S, Valsangkar B, Chan GJ. Barriers and enablers of health system adoption of kangaroo mother care: A systematic review of caregiver perspectives. BMC Pediatr [Internet]. 2017;17(1):1-17. DOI: http:// doi.org/10.1186/s12887-016-0769-5
- 4. Velandia M, Uvnäs-Moberg K, Nissen E. Sex differences in newborn interaction with mother or father during skinto-skin contact after Caesarean section. Acta Paediatr Int J Paediatr [Internet]. 2012;101(4):360-7. DOI: https://doi. org/10.1111/j.1651-2227.2011.02523.x
- 5. Blomqvist YT, Rubertsson C, Kylberg E, Jöreskog K, Nyqvist KH. Kangaroo mother care helps fathers of preterm infants gain confidence in the paternal role. J Adv Nurs [Internet]. 2012;68(9):1988-96. DOI: https://doi.org/10.1111/j.1365-2648.2011.05886.x
- 6. Velandia M, Matthisen AS, Uvnäs-Moberg K, Nissen E. Onset of vocal interaction between parents and newborns in skin-to-skin contact immediately after elective cesarean section. Birth [Internet]. 2010;37(3):192-201. DOI: https://doi. org/10.1111/j.1523-536X.2010.00406.x
- 7. Anderzén-Carlsson A, Lamy ZC, Tingvall M, Eriksson M. Parental experiences of providing skin-to-skin care to their newborn infant. Part 2: A qualitative meta-synthesis. Int J Qual Stud Health Well-being [Internet]. 2014;9. DOI: https:// doi.org/10.3402/qhw.v9.24907
- 8. Carpenter D. Phenomenology as method. In: Streubert H, Carpenter D, editors. Qualitative Research in Nursing: Advancing the Humanistic Imperative. Philadelphia: Wolters Kluwer Health/Lippincott Williams & W; 2011. p. 72-96.
- Uribe-Torres C, Hoga L. Investigación acción: intervención educativa para la promoción del contacto precoz padre-hijo en el contexto del nacimiento. Sao Paulo: Editorial; 2016.
- 10. Streubert H. Designing data generation and management strategies. In: Streubert H, Carpenter D, editores. Qualitative research in nursing: Advancing the humanistic imperative. 5.a ed. Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins; 2011. p. 33-55.
- 11. Palacios B, Sánchez M, Gutiérrez A. Evaluar la calidad en la investigación cualitativa. Guías o checklists. En: Facultad de Ciencias Sociales, Jurídicas y de la Comunicación (Ed), Actas del II Congreso Nacional sobre Metodología de la Investigación en Comunicación y del Simposio Internacional sobre Política Científica en Comunicación [Internet]. Segovia, España; 2013. p. 581-96. Disponible en: http://www.revistalatinacs.org/068/cuadernos/Segovia_actas.pdf
- 12. Emanuel E. ¿Qué hace que la investigación clínica sea ética? Siete requisitos éticos. En: Lolas E, Quezada A, editores. Pautas éticas de investigación en sujetos humanos. Ciudad: Nuevas Perspectivas; 2003.
- 13. Muñoz-Serrano M, Uribe-Torres C, Hoga L. Fathers prepared for and committed to their role as companions during the birth process. Aquichan [Internet]. 2018;18(4):415-25. DOI: https://doi.org/10.5294/aqui.2018.18.4.4
- 14. Entsieh AA, Hallström IK. First-time parents' prenatal needs for early parenthood preparation: A systematic review and meta-synthesis of qualitative literature. Midwifery [Internet]. 2016;39:1-11. DOI: http://dx.doi.org/10.1016/j. midw.2016.04.006
- 15. Erlandsson K, Häggström-Nordin E. Prenatal parental education from the perspective of fathers with experience as primary caregiver immediately following birth: A phenomenographic study. J Perinat Educ [Internet]. 2010;19(1):19-28. DOI: https://doi.org/10.1624/105812410X481537
- $16. \ Sponsler W, Weatherspoon C, Weatherspoon D, Campbell D. Fear of Fatherhood. Int J Childbirth Educ [Internet]. \ 2015; 30(1): 33-100. \\$ 37 5p. Disponible en: https://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=1061&context=sn_pubs

- 17. Nyqvist KH, Rosenblad A, Volgsten H, Funkquist EL, Mattsson E. Early skin-to-skin contact between healthy late preterm infants and their parents: An observational cohort study. PeerJ [Internet]. 2017;2017(10):1-18. DOI: https://doi.org/10.7717/peerj.3949
- 18. Chen EM, Gau ML, Liu CY, Lee TY. Effects of father-neonate skin-to-skin contact on attachment: A randomized controlled trial. Nurs Res Pract [Internet]. 2017;2017:1-8. DOI: http://dx.doi.org/10.1155/2017/8612024
- 19. Shorey S, Ang L. Experiences, needs, and perceptions of paternal involvement during the first year after their infants' birth: A meta-synthesis. PLoS One [Internet]. 2019;14(1):1-22. DOI: http://dx.doi.org/10.1371/journal.pone.0210388
- 20. Castillo-Carre A, Espinoza-Venegas M, Luengo-Machuca L. Compromiso paterno y la relación con sus conductas promotoras de salud. Rev Salud Pública [Internet]. 2018;20(5):541-7. DOI: https://doi.org/10.15446/rsap.V20n5.72033