

**The construction of paternity at the birth of a full-term healthy child****A construção da paternidade ao nascimento do filho a termo e saudável****La construcción de la paternidad en el nacimiento del hijo a término y sano****Received: 18/09/2020****Approved: 07/05/2021****Published: 21/08/2021****Suzanne da Silva Santos<sup>1</sup>  
Rita de Cássia Melão Morais<sup>2</sup>****Aline Oliveira Silveira<sup>3</sup>****Camila Camargo Medeiros<sup>4</sup>****Mariana André Honorato Franzoi<sup>5</sup>**

This is a descriptive study with a qualitative approach, carried out in the first quarter of 2019, in rooming-in of a public hospital. It aimed to describe the perception of men who experienced the birth of a full-term healthy child, about the process of construction of the paternity. Data collection took place through semi-structured interviews, with subsequent thematic analysis. Eighteen fathers participated, most of whom were between 20 and 40 years old, married or in civil union, with complete or incomplete high school education, monthly income equivalent to one to three minimum wages. Four thematic units were developed: *Planning to have a child*; *Feelings brought by paternity*; *Fatherhood brings maturity and new responsibilities*; and *The care of the father to the binomial*. Men showed desire to plan, be present and actively participate in the pregnancy, delivery and care for the newborn; there was also decentralization of maternal care and the active inclusion of fathers in their child's care. Fatherhood generated positive feelings, but also anxiety and anguish regarding the new responsibilities of a father, such as educational and financial.

**Descriptors:** Paternity; Father-child relations; Fathers; Postpartum period.

Este é um estudo descritivo com abordagem qualitativa, realizado no primeiro trimestre de 2019, no alojamento conjunto de um hospital público e teve como objetivo descrever a percepção de homens que vivenciaram o nascimento do filho a termo e saudável sobre o processo de construção da paternidade. A coleta de dados se deu pela entrevista semiestruturada, com posterior análise temática. Participaram 18 pais, dos quais a maioria tinha entre 20 a 40 anos, era casada ou em união estável, ensino médio completo ou incompleto, com renda mensal entre um a três salários mínimos. Quatro unidades temáticas foram elaboradas: *Planejando ter um filho*; *Sentimentos aflorados com a paternidade*; *A paternidade acarreta maturidade e novas responsabilidades*; e *O cuidado do pai ao binômio*. Os homens demonstraram o desejo de planejar, estar presentes e participar ativamente da gestação, do parto e dos cuidados com o recém-nascido; também verificou-se descentralização dos cuidados maternos e a inserção ativa dos pais nos cuidados do seu filho. A paternidade gerou sentimentos positivos, mas também ansiedade e angústias com relação às novas responsabilidades de pai, como educacional e financeira.

**Descritores:** Paternidade; Relações pai-filho; Pai; Período pós-parto.

Este es un estudio descriptivo con enfoque cualitativo, realizado en el primer trimestre de 2019, en el alojamiento compartido de un hospital público y que tuvo como objetivo describir la percepción de hombres que vivieron el nacimiento de su hijo a término y sano sobre el proceso de construcción de la paternidad. Los datos se recogieron mediante entrevistas semiestructuradas, con un posterior análisis temático. Participaron 18 padres, la mayoría de ellos con edades comprendidas entre los 20 y los 40 años, casados o en pareja de hecho, con educación secundaria completa o incompleta, con ingresos mensuales entre uno y tres salarios mínimos. Se elaboraron cuatro unidades temáticas: *Planificando tener un hijo*; *Sentimientos tocados por la paternidad*; *La paternidad trae consigo madurez y nuevas responsabilidades*; y *el cuidado del padre por el binomio*. Los hombres mostraron el deseo de planificar, estar presentes y participar activamente en el embarazo, el parto y el cuidado del recién nacido; también se observó la descentralización del cuidado materno y la inserción activa de los padres en el cuidado de su hijo. La paternidad generó sentimientos positivos, pero también ansiedad y angustia respecto a las nuevas responsabilidades como padre, como las educativas y financieras

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1. Nurse. Brasília, DF, Brazil. ORCID: 0000-0002-5343-6129 E-mail: suzanne.unb@gmail.com

2. Nurse. Specialist in Obstetric Nursing. Master and PhD in Nursing. Professor at the Universidade de Brasília (UNB), Brasília, DF, Brazil. ORCID: 0000-0001-8526-0642 E-mail: ritamelao@unb.br

3. Nurse. Master and PhD in Nursing. Professor at UNB, Brasília, DF, Brazil. ORCID: 0000-0003-4470-7529 E-mail: alinesilveira@unb.br

4. Nurse. Master's student in Nursing at UNB. Brasília, DF, Brazil. ORCID: 0000-0002-4930-3817 E-mail: camilacmedeiros@live.com

5. Nurse. Specialist in Nursing in Pediatrics and Neonatology. Master and PhD in Nursing. Professor at UNB, Brasília, DF, Brazil. ORCID: 0000-0002-6877-4753 E-mail: marifranzoiunb@gmail.com

## INTRODUCTION

**T**he birth of a child brings with it aspects to be analyzed, especially with regard to the change in the parents' lives, in which there are roles already attributed to male and female gender in relation to the care and upbringing of children. The pre-established family roles in society have undergone changes, so that the mother is no longer exclusively dedicated to domestic activities, as well as the father does not only participate in the financial provision of the house, but is able to take part in the care of the children. This new configuration reveals a convergent and conflicting relationship between the traditional and modern models of fatherhood, with the difference between men and women being identifiable in the pregnancy-puerperal period<sup>1-3</sup>.

The construction of fatherhood for men is dynamic and watered daily by inter and intra family relationships and also with themselves, amidst conflicts of actions and good or bad feelings. This period gives men an adult identity, in which the guiding axis is that of a provider, returning to the traditional model, with conflicts arising from the desire to affectively bond with taking care of children, in order to reach a new father model<sup>1-2,4</sup>.

This new configuration of the father-child relationship no longer promotes the feeling of family exclusion to men, even though it differs from the mother-child relationship. The greater male participation in the domestic environment brings as a consequence a greater involvement of men in the handling of infant care, which reduces anxieties in the parenting process, which is daily and continuous, in addition to giving the woman greater security in relation to care of the child<sup>1,5</sup>.

For men to be able to build parenting and achieve greater parent-child bonding, it is necessary for men and women to reflect and reframe the imposed social responsibilities. The insertion of men in the contexts of care and immersion in affective experiences requires greater attention from public policies aimed at fatherhood, benefiting not only men who configure themselves in this new role, but also children, who benefit from their father's affection, consequently, reflecting favorably on the baby's development<sup>2</sup>.

Parenthood is the grouping of several aspects related to the individual psychic reality of men who suffer changes during pregnancy and postpartum through the exchanges established between the father and the child<sup>6</sup>. Three lines can refer to parenthood: kinship ties, to which values of the social group inserted are passed on; psychic changes during the parenting process; and the practice of this process, that is, parental care; considering that these three lines need to be intertwined for family functionality<sup>6</sup>.

The birth of a child provides the transition to parenthood in a man's life, which is a phase of abundant transformations, new feelings, learning and resignifications. An opportune time for the nursing team to promote strategies that enable parents to feel more confident, clear about their doubts, concerns and able to take care of their children.

The nurse, when identifying the care needs of parents, from prenatal to postpartum, can provide information, as well as provide a dialogic space, so that they can expose and analyze the concerns presented, aiming to strengthen the feeling of self-confidence in the new assignment to be performed, which is the role of father. Thus, this study aimed to describe the perception of men who experienced the birth of a full-term and healthy child about the process of construction of paternity.

## METHODS

This is a descriptive study with a qualitative approach that allows for a closer approximation with the daily life and experiences lived by the participants<sup>7</sup>. The place was a Joint Accommodation of a Maternity Hospital in a public hospital in Brasília-DF.

As inclusion criteria: male parents of full term and healthy newborns, with more than 48 hours of life, in contact and interaction with the newborn. The exclusion criteria were: parents

under the age of 18 and those with communication difficulties (self-reported and observed speech and hearing).

The guiding question was: How do men experience the transition process from parenthood to the birth of a healthy, full-term child? And the concept of parenting used for this investigation was based on the description by Houzel<sup>6</sup>.

Two instruments were used for data collection: a participant characterization form and a semi-structured interview script that addressed the following questions: the feeling of knowing about the partner's pregnancy; the change in concepts from the birth of the child, questions about what it means to be a father; on how the participation of parents in the care of the newborn took place and the feelings that arose in face of such interactions, what the parents valued in the parent-child relationship and the consideration of the importance of the paternal presence in the rooming-in.

The place of data collection took place in a waiting room, in the hospital rooming-in, providing an environment with no movement of passersby, ensuring privacy of the participants. The interviews were recorded on a digital device and transcribed, in full, right after they were carried out, by the researcher himself.

To preserve anonymity, the letter F was used to represent the participating fathers. Data collection took place in February and March 2019. Each interview lasted an average of ten minutes and there was no refusal by the invited fathers, however, one interview was excluded, as the participant was not sure about the paternity of the child.

The number of interviews ceased due to theoretical saturation, as there were no new elements in the interviewees' speeches and the inclusion of new information is no longer relevant, as it does not change the understanding of the studied object<sup>8</sup>.

Data analysis was thematic according to the precepts of Minayo<sup>7</sup>, which consists of the pre-analysis of the material collected from the floating reading, taking exhaustive contact with it, identifying the units of meaning related to the study proposal.

To maintain the methodological rigor of the study, the list of consolidated criteria for reporting qualitative research – Consolidated criteria for reporting qualitative research (COREQ)<sup>9</sup> was used as a support tool.

The project was approved by the Ethics Committee on Research with Human Beings, of the institution, under opinion No. 3.123.218 and CAAE No. 05284818.9.0000.0030. Respondents signed the Informed Consent Term and the Authorization Term for the Use of Voice Sound for the research, both in duplicate, in accordance with Resolution No. 466/2012, of the National Health Council.

## RESULTS

### *Profiles of participant fathers*

Eighteen parents of newborns participated. Table 1 presents the characterization in relation to age group, marital status, education and monthly income. Most were between 20 and 40 years old, married or in a stable union, complete or incomplete high school, with a monthly income between one and three minimum wages (minimum wage = R\$1,100.00) (Table 1).

Of the 18 participants, nine reported having other children. Almost all (17) reported living with their partner/wife and other children, and one father declared that he was single and that he lived alone. All parents reported having a job. All parents reported accompanying the pregnant women between three and six prenatal consultations and 11 parents attended the birth.

**Table 1.** Characterization of parents of full term/healthy newborns. Brasilia, DF, 2020.

Variables		No.	%
Age group	18 — 20 years	2	11.1
	20 — 30 years	8	44.4
	30 — 40 years	7	38.9
	40 — 50 years	1	5.6
Marital status	Married	8	44.4
	Civil union	9	50.0
	Single	1	5.6
Educational level	IES	2	11.1
	CES	1	5.6
	IHS	6	33.3
	CHS	7	38.9
	IHE	-	-
	CHE	2	11.1
Family income	Até 1 SM	1	5.6
	More than 1 to 2 MW	7	38.9
	More than 2 to 3 MW	6	33.3
	More than 3 to 4 MW	3	16.6
	More than 4 to 5 MW	1	5.6

IESI: Incomplete Elementary School; CES: Complete Elementary School; IHS: Incomplete High School; CHS: Complete High School; IHE: Incomplete Higher Education; CHE: Complete High School; MW: Minimum Wage

The thematic analysis of the interviews allowed the identification of thematic units that represent the perception of men about the process of construction of paternity in the context of healthy and full-term birth, namely: *Planning to have a child*; *Feelings brought by paternity*; *Fatherhood brings maturity and new responsibilities*; and *The care of the father to the binomial*.

### **Planning to have a child**

This thematic unit addresses issues about the planning and preparation of the couple to have a child. As well as the desire and waiting for your birth.

When the father was asked about the baby's planning/expectation, reports emerged of agreement between the couple to have the child, as well as the search for information:

*We planned it right! So it was something we planned, we started talking about it: what's up, love, are we really going to have the baby? We decided [...] we did everything right, we had a gender reveal party, we had a baby shower, and everything right.* (F14)

*We were very educated in this issue of presence, company... that I would be there during the entire pregnancy, in childbirth.* (F5)

On the other hand, there are reports of surprise when receiving the news of the pregnancy for not having planned the pregnancy with the partner:

*It wasn't planned, we were taken by surprise.* (F11)

There is the surprise of father F11 at the confirmation of pregnancy due to not planning the pregnancy.

### **Feelings brought by paternity**

This theme refers to issues related to feelings and sensations with the discovery of pregnancy, being present with the newborn in the hospital rooming-in, being a father, as well as the importance of paternal presence in the child's life, strengthening family bonds. The discovery of paternity generates several feelings, as referred to in the following statements:

*I was very happy [...] then I was very anxious, I was really touched.* (F3)

*Ah, first we have an impact, right?! But it was the best thing God ever gave us.* (F9)

On the other hand, one father reported feeling of rejection when he had the news of paternity:

*There was a rejection, by both parties [...] neither of us was prepared and we were also not willing, we didn't accept it.* (F16)

Another participant reported feeling confused when he knew he would be a father again:

*I was a little confused. Like this? another child.* (F11)

The study reveals that of the 18 participants, more than half had the opportunity to attend the birth, related to this amount, after birth, the concrete presence of the child is considered a carrier of several sensations for the fathers, such as joy, love or sensation of being protective, strengthening what they felt when they knew they would be parents and modifying negative conceptions that they might still carry in their imaginations:

*Really I saw how much I could love more than I imagined. When he's in my arms I see that it's all worth it, the distance, the difficulties [...] so this is something that makes me feel good, I don't even know how to say it, but it makes me very happy. (F12)*

*It feels good, the protective feeling. The purity in this love from father to child, it's a different love, I think it's something that doesn't end, it's a love that doesn't end. (F17)*

After the birth of the child, parents identify a greater capacity to love, and apply compensation for difficulties, with a feeling of well-being and joy. This process configures legitimacy to paternity, which until then, during pregnancy, was something abstract:

*Now [after birth] I feel like a father, I can't explain [...] it gives me happiness, it gives me a very good deal. (F5)*

On the other hand, one father reported that he has not yet assimilated paternity:

*I still can't believe it [...] I can't believe I'm a father, because my parents died I was 5 years old, so [...] soon I had a baby. (F7)*

Parents also reported on the importance of paternal presence, stating that it is an influencing factor in the creation of the bond between father and child:

*You have to be there, taking care of them, because in 10 years it will be a story, either I was there or I wasn't. Then I thought it was important. (F7)*

*I think the presence of a father for the child is very important, because I know what it is to grow up without a father, I had many opportunities to get involved in bad things. (F17)*

*Very important, because it creates a bond, not only of respect, but also from father to child, and it turns out that this way, it's something that gives this opening for when she grows up in the future, she feels more comfortable to tell her anything. (F18)*

A father expressed a desire to be more present during his wife's pregnancy:

*I would have liked to be there more for it [the pregnancy], I confess that at times I was a little lazy, but like that, I was there at the time of delivery [...] I was there with the mother [...] holding her [...].(F5)*

During pregnancy, the father reported dissatisfaction with his participation during the pregnancy period, stating that he could have demanded more efforts with his partner. Despite having expressed dissatisfaction with their participation in the pregnancy, an active movement of the father in search of information and monitoring of the pregnancy is perceived:

*[...] that's what we would have liked to have done in the birth plan, for example, when the baby is born, I hold the baby. (F5)*

Another father reported presence throughout the pregnancy:

*I see that it's like a continuity of mine [...] I was very close, during pregnancy I was present in everything, prenatal care, and also since before it started to develop inside the belly, I was always talking to her in her belly, talking to her in there. (F12)*

One respondent states that the veracity of being a father, for him, comes from the physical presence with the child since the beginning of pregnancy:

*Following her since the beginning of life, I know that in the future I can tell her that I was a real father. (F1)*

The birth of the child also provides a closer relationship with the wife/partner, as mentioned by a father:

*I think so, the issue of uniting the relationship with my wife, I think that something has definitely changed for the better. (F12)*

The birth of the child not only adds new learnings in the care of the newborn, but also provides a new feeling, which is the love for a child:

*In addition to learning how to handle these things, it's complicated [...] for me this thing of love, father and child, is new. (F7)*

### **Fatherhood brings maturity and new responsibilities**

This thematic unit addressed the changes in the lives of parents after the discovery of pregnancy and the birth of their child. Among these changes, the following stand out: the maturation and the new responsibilities acquired, as well as the financial responsibility, added to the concern with the child's education.

After discovering the pregnancy, the fathers reported changes in several aspects and areas of their lives, one of them being the influence on their maturation:

*[...] now I have more desire to do everything, to live better [...] and manage my family, which is what I didn't do. It is necessary, at least for a man, for him to become a better person, to stop being selfish, to see that he is not alone in the world anymore, there is someone else dependent on him. (F1)*

*For me it was very easy [fatherhood]. I thought that having a child was picking him up and going out, going to parties I would go to before, everything would be normal, but it isn't. This interferes a lot if you think about going to the club with a kid, it doesn't work. We change our thinking a lot, it gets more mature every day. (F2)*

*When we are a father or a mother, our choices are no longer exactly ours. (F5)*

*It totally changes our thinking, from before having nothing, being free and now having a commitment that we can't do without. (F13)*

With the arrival of the new family member, in addition to bringing personal maturity to the father, this event also entails financial responsibility:

*[...] I'm the father I have to work, be there [...] what I do is no longer for me, my professional choices were all reviewed, thinking, I need [...] my life is now different [...] my life is no longer exactly mine [...] because of my anxiety [...] I need to be professionally and financially stable. (F5)*

In addition to financial responsibility, another concern reported by parents was related to their children's education:

*You are always worried, whether you like it or not, in addition to the money issue, there is also the issue of education [...] there is the issue of the responsibility to provide education, this is the priority of everything [...] if I don't give them education, which is not only part of school education, in the case of college, of the college itself, but part of the family, the house, values, concepts, ethics, all of this is the obligation of parents to teach. (F18)*

### ***The care of the father to the binomial***

This topic of analysis portrays the action of parents in the care of the binomial, newborn and postpartum women in rooming-in, as well as their presence in the hospital.

The father's presence with the binomial in the rooming-in is a very rich opportunity to interact with the newborn and to support the mother in the first care of the child. When parents were asked who performed the care of newborns in the RI, some situations were pointed out in light of the experiences:

*[...] I helped her a lot there when we were there in the room [immediate postpartum], I changed him [newborn] [...] I only changed him, I helped him to take the breast, because he got very agitated. These things like [...] knowing that something so small, so helpless, we can help. (F2)*

Also, some parents reported not participating in newborn care:

*It was the nurses who worked, so I left for home, and I came back, only the nurses were helping. (F10)*

*[...] I just didn't bathe the baby because they didn't let me [nursing staff]. (F2)*

On the other hand, there were reports that previous experiences in caring for other children or nephews favored the time of caring for the newborn:

*I participate, I was there for the heel prick, I took off her clothes to take a bath, I changed her. Because her mother is scared and I have to change her. Because she is afraid of hurting the child. Then, as I already had experience with a nephew, I already know more or less how to do it. (F7)*

*Bath, diaper, cleaning, I do everything, with my first daughter was also the same thing. I did everything [...] it is normal for me, I've taken care of my other daughter, there's not much difference. The issue now is that the diaper comes again. (F18)*

Still two fathers bring the reflection that the care of the newborn should be divided equally between parents:

*I think the father has the same responsibility as the mother, since we didn't carry the baby for nine months, but from birth we can help, basically do everything, clean, just not breastfeed, but the rest we can, I think and believe that I'm doing my part. (F15)*

*[...] she has advantages, because she's the mother and she breastfeeds, so I'm already a bit like that [...] but I also want to stay and get it [...] we're trying to share in the best possible way, she breastfeeds, and I hold him, even because she is still a little weak, I always try to get the baby to burp, change diapers [...] I'm always there, doing it, being together. (F5)*

One father mentioned a desire to protect his child, as a care for the newborn:

*[...] so much so that he's kind of like this at night to sleep, and my wife would say: sleep, let me take care of him here, and then I'll call you. I didn't sleep, I wanted to be watching, protecting. (F17)*

## DISCUSSION

Planning to have a child is an agreement between the couple so that both have their wishes met, and making the decision together promotes a better partnership between the couple for a man's participation in the pregnancy period, as well as the search for education being a confirmatory element of planning to elapse the gestational period.

The invisibility of men to have physical contact with the child during pregnancy is highlighted, being one of the factors that make the experience of feelings about the baby and the paternal feeling not to emerge immediately, but the planning and participation during the gestational period are like processes of new parenting practices<sup>10,11</sup>. Fatherhood is a challenge for men and depending on the planning to have a child, feelings about pregnancy confirmation can vary in positive and negative<sup>4</sup>.

It was found that the father, when aware of the pregnancy, initially receives the news as an impact that generates emotions, causing anxiety, which later turns into joy and a gift in the family's life. The news of the pregnancy can lead to multiple reactions, but it is relevant to highlight the report of emotional involvement of men, in which they currently allow themselves to feel positive feelings about fatherhood, thus generating the beginning of the father-child bond, which will be strengthened with the birth<sup>12</sup>.

In this study, the presence of a feeling of rejection to paternity is highlighted, in the experience of younger parents, in this sense, age can interfere in the assimilation of the announcement of paternity. The age group factor is considered to influence feelings regarding the discovery of pregnancy, as adolescence is a period of life in which it is considered that there is no preparation for fatherhood, as it is a time of transition between childhood and adulthood<sup>13</sup>.

There is also the feeling of confusion of a participant when he learned that he would be a father again. The man, despite the emotional involvement with the news of fatherhood, the traditional father model stands out due to concerns related to the number of children and, also, to the financial provision<sup>14</sup>.

The birth of a child, despite being a carrier of happiness and good feelings, also configures the man's truthfulness in being a father. The realization of paternity comes from the materialization of the baby, the birth of the child is a rite of passage for men, making the man go from the role of parent to the role of father. The birth of a new child or the first child brings irreversible changes to man's life and the experimentation of new feelings and new sensations<sup>6</sup>.

In some situations, the birth of a child does not necessarily confirm the transition to the father role for all men. The absence of paternal reference and experiences of effective paternal care can be obstacles to the transition to fatherhood. Paternal absence makes it difficult for men to picture how to be a father, as most men carry this transgenerational paternal reference that they had, which helps them in the model of the father they want to be or not, which also helps in recognizing themselves as father<sup>15</sup>.

The father's presence is seen as an influencing factor in the father-child bond, and also as future relationships and experiences, which may exist, with the children. Involvement, active participation in the care of babies is an extremely important factor for the development of intimacy with the children and for the consolidation of bonds<sup>5</sup>. This desire for bonding is part of the breaking of the traditional father model, configuring new attitudes of the man facing paternity, adopting the new father model<sup>10</sup>.

Fathers feel the need to be present for their children even before birth, with attitudes that attest to this presence: the company during prenatal care and talking to the baby during pregnancy. Men express a desire to have greater participation during pregnancy, but recognize gender differences. Faced with this, to compensate, he tries to devote more time to his partner, accompanying her in exams and prenatal consultations<sup>14,16</sup>, compensating with participatory actions during pregnancy<sup>4</sup>.

Still, a father states that, to be a true father, it is necessary to be there, to be present from the beginning of the child's life. Monitoring children from the beginning of life is essential for linking and consolidating the parenting process<sup>11</sup>.

Fatherhood has the power to influence the man's relationship with his partner, having as a positive consequence, a greater union of the couple. The participation of men during pregnancy provides greater complicity between the couple at this stage, as they feel part of this process<sup>14-15</sup>. However, there are studies<sup>11,16</sup> that claim that after birth, men have the feeling of estrangement from the woman.

Child care is not yet inherent to men, who after birth has to reconcile novelties both in the practice of care, and in the relationship of feeling, where the love of father and child is considered a novelty. The inability to care for the baby can raise concerns in the father about the new responsibility<sup>3</sup>. The contemporary model of fatherhood breaks the traditional model by allowing men to have emotional participation in relation to the child, which enables the creation of a bond<sup>6</sup>, realizing, then, that a child not only needs financial provisions, but also paternal affection<sup>15</sup>.

Child development is exclusively dependent on parenting practices, which directly influence the acquisition of cognitive and socio-emotional skills in children, as well as contributing positively or negatively to the individual's formation depending on the actions, involvement and family relationships<sup>17</sup>.

After discovering the pregnancy, the man perceives the news as influencing significant changes in his own life, which are recognized as drivers of maturity and responsibilities, through which he will also have to give up choices, and will live with a new member in his family that will require care. The news of pregnancy makes the man move to the experimentation of parenting, assuming the role of father, causing irremediable changes, which have as consequences personal maturity<sup>6</sup>.

Paternity entails demands in the care of children, which are still seen by men as an obligation: financial provision to exercise the role of father, preceded by anxiety for not being able to contemplate this ideal. The father also assumes that future choices, to be made, come from the child's presence, and no longer from his own desire. The financial provision is still something that causes concern to men after the news of the pregnancy and permeates throughout the child's upbringing, gaining a central aspect in the parents' lives<sup>15</sup>. On the other hand, parents no longer see the exercise of paternity as an obligation or duty to be fulfilled, but rather to exercise the function by right<sup>14</sup>.

One of the father's concerns refers to the responsibility for the child's education. For the father, providing adequate, quality education is related to financial condition and access. The transfer of ethical and moral values to the child is also conceived as a duty and integrates the paternal functions. In addition to the role of provider, paternity gives men the responsibility to ensure their children's education<sup>6</sup>. For some men, the role of educator is part of their characterization as a father<sup>15</sup>.

Active participation in the care provided to the newborn and the puerperal woman, in rooming-in, inserts the father in the parenting process, but one father reports not having exercised even more due to the interference of the nursing team itself, which also provides care during the hospitalization in rooming-in, thus inhibiting the father's participation. The care of the newborn child, performed by the father, is a novelty, as there is a greater demand for training for mothers, with women being previously taught about the care of babies. However, it is possible to affirm that the care provided to the children by the fathers is an essential characteristic for the transition to the contemporary model of fatherhood<sup>18</sup>.

The postpartum and puerperium period is the moment when the man realizes his paternity process due to the presence of the child. Being able to exercise it now, some factors, such as interference of the mother or the nursing team in not sharing the performance of some



newborn care with the father, can interfere in the exercise of fatherhood in the postpartum period, which can be a negative factor in the creation of bonds between the binomial<sup>14,19</sup>.

In this sense, the nursing team has the function of recognizing the man in the gestational and postpartum period, also as an active agent at that time, to support strategies that serve all family members, thus having the responsibility to offer the father the opportunity to learn about the care of the newborn, thus favoring the transition from the traditional model to the contemporary model of fatherhood<sup>4,19</sup>.

However, some health services are not yet organized to meet the demands of the male public as a father. Some nursing professionals have also not kept up with these changes, through which men have become an active participant in their child's care, requiring greater investment in continuing education for the nursing staff to improve management and prepare recent parents for the baby care<sup>12,19</sup>.

Parents reported that the opportunity to previously care for other children, whether with their own previous children or a close relative, contributed to the active performance of care for the newborns, giving them greater confidence and security in handling and, thus, supporting the wife in the routine care of the newborn, because she is afraid to handle them. The routine care demanded by the child is characterized as part of the parenting practice<sup>6</sup>. Paternal inclusion in the daily activities of caring for the newborn is one of the skills necessary to exercise fatherhood, the reliability given to men to perform this role, grants them the validation of the same as one of the main caregivers<sup>18</sup>. Thus, the nursing team can encourage and encourage this practice of care by parents for their babies.

Parents report that the care given to the newborn should be shared with the partner, but they cite as an advantage the woman's exclusivity in relation to carrying the baby for nine months and being able to breastfeed, which is a factor that allows the mother to stay longer with the baby. The father has the ability to interact with the baby that complements the maternal actions, however, the woman centralizes and directs all her time and energy in maternal tasks, thus becoming the main caregiver, and she is also an influencer in the continuity that the fathers will have to take care of the children or not, thus returning the parental roles to the traditional model<sup>6</sup>, where women have the main role in caring for the children and the man as provider<sup>2</sup>.

Yet another form of care for the newborn, mentioned by a father, was protection. However, in some situations there was maternal interference that centralizes the care of the newborn. This interference may have a cultural relationship, as women are included in the tasks of caring for their children from childhood, unlike men, which explains the difficult insertion of the father in this care, however, when showing interest in participating in the activities, there is the breaking of patterns approaching the new father model<sup>18</sup>.

## CONCLUSION

The parenting process modifies the man's identity, which generates conflicts and anguish. In this transition, men demonstrate the desire to plan, be present and actively participate in the pregnancy, delivery and care of the newborn child, allowing themselves to express and describe positive feelings towards the child, something that the contemporary model of father allows.

However, for this new version of fatherhood to occur and be strengthened, it is necessary to open spaces for these changes to be discussed by them and, also, to provide spaces for welcoming and inserting this man in the care of their babies, as a greater participation of the father in bonding with the child brings benefits for the child's cognitive and socio-emotional development and the development of the relationship between men and women in this challenging transition of the family life cycle.

Experiencing the birth of a child in the hospital context is a barrier to the construction of paternity, given the limits imposed on the participation and recognition of the man/father in the process of pregnancy, delivery and birth. The practices are still centered on biological

processes and with a strong gender influence, with little scope for the needs of the parents/family in constitution.

Nursing, as an enhancer of care, must provide an environment that facilitates paternity, so that they can fully and autonomously exercise bonding, affectivity and child care. Furthermore, it is considered important to open spaces for dialogue with these parents, so that they can express their feelings and needs, understanding this as a path for nursing interventions that promote positive fatherhood.

The study had limitations because it was carried out only in the hospital context, in addition to the fact that the period of contact between the father and the newborn was a little over 48 hours of life. However, it is believed that understanding that the new father model configures men's concern with the practice of parenting, it is recommended, for future research, the application of studies in contexts other than the hospital and with a longer period of contact with the father with newborn.

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#### CONTRIBUTIONS

**Aline Oliveira Silveira, Camila Camargo Medeiros** and **Mariana André Honorato Franzoi** contributed to the review. **Rita de Cássia Melão Morais** collaborated in the design, collection and analysis of data, writing and revision. **Suzanne da Silva Santos** participated in the design, collection and analysis of data and writing.

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