

FATHERS' CONFIDENCE MATTERS: PATERNAL SELF-EFFICACY IS ASSOCIATED WITH MATERNAL BREASTFEEDING SELF-EFFICACY IN YOGYAKARTA, INDONESIA

Viana Dwi Saputri¹, Giyawati Yulilania Okinarum ², Puspito Panggih Rahayu³, Putra Wanda⁴

¹Program Sarjana Kebidanan, Fakultas Ilmu Kesehatan, Universitas Respati Yogyakarta

²Program Profesi Bidan, Fakultas Ilmu Kesehatan, Universitas Respati Yogyakarta

³Program Sarjana Kebidanan, Fakultas Ilmu Kesehatan, Universitas Respati Yogyakarta

⁴Program Sarjana Informatika Fakultas Sains dan Teknologi Universitas Respati Yogyakarta

Corresponding author : vianadwisaputri77@gmail.com

ABSTRACT

Maternal breastfeeding self-efficacy is a key psychological determinant of successful breastfeeding. Fathers play an essential role in providing emotional and practical support, yet evidence regarding the relationship between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy remains limited in Indonesia, particularly in Yogyakarta City. To examine the association between paternal self-efficacy and maternal breastfeeding self-efficacy among breastfeeding parents in Yogyakarta City. A quantitative cross-sectional study was conducted among 52 breastfeeding mother-father pairs with infants aged 0-6 months in Yogyakarta City. Participants were recruited using purposive sampling. Maternal breastfeeding self-efficacy was measured using the Breastfeeding Self-Efficacy Scale-Short Form (BSES-SF), while paternal breastfeeding self-efficacy was assessed using the Paternal Breastfeeding Self-Efficacy Scale-Short Form (Paternal BSES-SF). Data were analyzed using descriptive statistics and Spearman's rank correlation test. Most mothers (92.3%) and fathers (86.5%) were within the productive age group. The majority of mothers were primiparous (76.9%), over half were unemployed (53.8%), and all fathers were employed. A statistically significant positive correlation was identified between paternal self-efficacy and maternal breastfeeding self-efficacy (Spearman's $r = 0.340$, $p = 0.014$), indicating a moderate positive association. Fathers with higher confidence in supporting breastfeeding tended to have partners with greater breastfeeding confidence. Paternal breastfeeding self-efficacy is positively associated with maternal breastfeeding self-efficacy. Strengthening fathers' confidence through father-inclusive breastfeeding education during pregnancy may help strengthen maternal breastfeeding confidence and support breastfeeding promotion strategies.

Keywords : Breastfeeding, Fathers, Maternal Self-Efficacy, Paternal Self-Efficacy, Exclusive Breastfeeding

1. INTRODUCTION

Breastfeeding is widely recognized as one of the most effective interventions for improving maternal and child health (Okinarum & Murdhiono, 2022; WHO, 2025). Exclusive breastfeeding during the first six months of life reduces infant morbidity and mortality, strengthens immune function, promotes optimal growth and neurodevelopment, and provides long-term health benefits for both mothers and infants (Bartick et al., 2024; Okinarum, 2021; WHO, 2025). Despite these well-established benefits, achieving optimal exclusive breastfeeding coverage remains a global public health challenge. In Indonesia, although breastfeeding initiation is common, many mothers discontinue exclusive breastfeeding before the recommended six months, indicating that factors beyond knowledge alone influence breastfeeding success.(Paramashanti et al., 2023; Ayu et al., 2024).

Successful breastfeeding is determined not only by biological readiness but also by psychological factors. Among these, breastfeeding self-efficacy has consistently been identified as one of the strongest predictors of breastfeeding initiation, exclusivity, and duration (Dennis et al., 2018; Okinarum, 2025; Sezer et al., 2025). Maternal breastfeeding self-efficacy reflects a mother's confidence in her ability to successfully breastfeed her infant, enabling her to overcome common breastfeeding challenges. Mothers with higher breastfeeding self-efficacy are more likely to initiate breastfeeding, continue exclusive breastfeeding, and persist despite physical or emotional difficulties. (Irianti et al., 2023; Doriza et al., 2024; Y. Fan et al., 2025; Vitória et al., 2025; Susanti et al., 2022).

Recent evidence suggests that breastfeeding should not be viewed solely as a maternal responsibility but as

a family-centered process in which fathers play a critical role. Fathers provide emotional encouragement, practical assistance, and positive reinforcement that help mothers cope with breastfeeding-related stress. Consequently, paternal breastfeeding self-efficacy the father's confidence in his ability to support breastfeeding has emerged as an important determinant of maternal confidence and breastfeeding outcomes. Fathers with higher self-efficacy are more likely to actively participate in infant care, encourage breastfeeding, and provide effective emotional support throughout lactation. (Fan, Y et al., 2025; Krawczyk et al., 2024; Jacobsen et al., 2025; Hergholi et al., 2026; Zeng et al., 2024). Although previous studies conducted in several countries have demonstrated positive associations between paternal and maternal breastfeeding self-efficacy, evidence from Indonesia remains limited, particularly in primary care settings (Asih, 2022). Existing Indonesian studies have predominantly focused on maternal breastfeeding self-efficacy or paternal support separately, while little is known about the interrelationship between fathers' confidence and mothers' breastfeeding confidence. Furthermore, no published study has specifically examined this association among breastfeeding families in Yogyakarta City, where exclusive breastfeeding coverage remains below the national target.(Fan, Y et al., 2025; Krikirat et al., 2023; Qin et al., 2024).

Understanding how paternal self-efficacy influences maternal breastfeeding self-efficacy is essential for developing family-centered breastfeeding interventions.(Fan,Y et al., 2025) Evidence from this study may support the integration of fathers into prenatal and postnatal breastfeeding education programs, enabling health professionals to strengthen both

parents' confidence in breastfeeding.(Xie et al., 2026; Sianturi et al., 2023) Therefore, this study aimed to examine the association between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy among breastfeeding parents in Yogyakarta City.

2. METHODS

Study design

This study employed a quantitative cross-sectional design to examine the association between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy among breastfeeding couples in Yogyakarta City, Indonesia. Data were collected between June and July 2026 using a self-administered online questionnaire.

Participants and settings

The study was conducted in Yogyakarta City, Special Region of Yogyakarta, Indonesia. The target population comprised breastfeeding mothers with infants aged 0–6 months and their husbands. Participants were recruited using purposive sampling based on the following inclusion criteria: 1) breastfeeding mothers with infants aged 0–6 months; 2) mothers living with their husbands; 3) fathers who were willing to participate; and 4) both parents able to read and understand Indonesian. Participants were excluded if: 1) either parent declined participation; 2) questionnaires were incomplete; and 3) mothers or infants had severe medical conditions preventing breastfeeding. A total of 52 mother-father pairs (104 participants) completed the study and were included in the final analysis.

Variables and instruments

The primary independent variable was paternal breastfeeding self-efficacy, while the dependent variable was maternal breastfeeding self-efficacy. Maternal breastfeeding self-efficacy was measured using the Breastfeeding Self-Efficacy Scale-Short Form (BSES-SF)

developed by Dennis. The instrument consists of 14 items scored on a five-point Likert scale ranging from 1 ("not at all confident") to 5 ("always confident"), with higher scores indicating greater breastfeeding confidence. Paternal breastfeeding self-efficacy was assessed using the Paternal Breastfeeding Self-Efficacy Scale-Short Form (Paternal BSES-SF), which measures fathers' confidence in supporting breastfeeding. Responses were recorded using the same five-point Likert scale. The Indonesian versions of both instruments have demonstrated acceptable psychometric properties. The BSES-SF has a Cronbach's alpha coefficient of 0.917, whereas the Paternal BSES-SF has reported reliability coefficients ranging from 0.91 to 0.92.

Data collections

Eligible participants were identified through health facilities in Yogyakarta City and invited to participate in the study. After providing informed consent, mothers and fathers independently completed an online questionnaire using Google Forms. To minimize response bias, each participant completed the questionnaire individually without discussing responses with their partner. Completed questionnaires were reviewed for completeness before statistical analysis.

Statistical analysis

Data were analyzed using IBM SPSS Statistics version 27. Descriptive statistics were used to summarize respondents' socio-demographic characteristics, including age, education, occupation, and parity. The normality of continuous variables was assessed using the Shapiro-Wilk test. As the data were not normally distributed, the association between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy was analyzed using Spearman's rank

correlation coefficient. Statistical significance was established at $p < 0.05$, and correlation strength was interpreted according to Cohen's classification.

Ethical clearance

Ethical approval was obtained from the Health Research Ethics Committee of Universitas Respati Indonesia with approval number (436/SK.Ka.LPPM/UNR/VI/2026) prior to data collection. All participants received written information regarding the study objectives and procedures before providing informed consent. Participation was voluntary, confidentiality was maintained throughout the study, and participants had the right to withdraw at any time without consequences.

3. RESULTS

A total of 52 mother-father pairs participated in this study. The majority of mothers (92.3%) were aged 20–35 years, while most fathers (86.5%) were also within the productive age group. More than half of the mothers had completed senior high school (51.9%), whereas 59.6% of fathers had attained the same educational level. Approximately half of the mothers were unemployed or housewives (53.8%), while all fathers were employed. Most participating mothers were primiparous (76.9%). These findings indicate that the study population predominantly consisted of young first-time parents with relatively similar educational backgrounds.

Table 1. Sociodemographic characteristics of respondents (n=52)

The results of the Chi Square test on the lecturer characteristics variables can be seen in the table below:

Characteristics	Categories	Frequency (f)	Percentage (%)
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Mother's age	<20 y.o	3	5,8 %
	20-35 y.o	48	92,3 %
	>35 y.o	1	1,9 %
Father's Age	20-36 y.o	45	86,5 %
	>35 y.o	7	13,5 %
	Primary education	2	3,8 %
Mother's Education	Secondary education (junior)	3	5,8 %
	Secondary education (senior)	27	51,9 %
	Higher education	20	38,5 %
	Primary education	1	1,9 %
	Secondary education (junior)	4	7,7 %
Father's Education	Secondary education (senior)	31	59,6 %
	Higher education	16	30,8 %
	Employed	24	46,2 %
Mother's occupation	Non-employed	28	53,8 %
	Employed	52	100 %
Father's occupation	Employed	52	100 %
	Primigravida	40	76,9 %
Parity	Multigravida	12	23,1 %

Based on the Table 2, among the 52 participating couples, 45 fathers (86.5%) demonstrated high paternal breastfeeding self-efficacy, whereas seven fathers (13.5%) reported low self-efficacy. Similarly, maternal breastfeeding self-efficacy was categorized as high in 45 mothers (86.5%) and low in seven mothers (13.5%). Crosstabulation showed that mothers with high

breastfeeding self-efficacy were more frequently paired with fathers who also demonstrated high breastfeeding self-efficacy.

Spearman's rank correlation analysis demonstrated a statistically significant positive association between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy ($r = 0.340$, $p = 0.014$). The correlation coefficient indicated a moderate positive relationship, suggesting that higher paternal confidence in supporting breastfeeding was associated with higher maternal confidence in breastfeeding.

Table 2. Frequency Distribution of Respondents Based on Paternal Self-Efficacy with Maternal Self-Efficacy (n=52).

Variable	Maternal Self Efficacy		Total	P value	r
	Low n (%)	High n (%)			
Paternal Self Efficacy					
Low	3 (5,7)	4 (7,6)	7 (13,4)	0,014*	0,340
High	4 (7,6)	41 (78,8)	45 (86,5)		

*) significance based on Spearman rank test

4. DISCUSSION

The present study demonstrated a statistically significant positive association between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy among breastfeeding families in Yogyakarta

City. Fathers who reported greater confidence in supporting breastfeeding tended to have partners with higher confidence in their ability to breastfeed. Although the strength of the correlation was moderate ($r = 0.340$), the findings suggest that fathers' psychological readiness may contribute meaningfully to maternal breastfeeding confidence.(Fan,Y et al., 2025; Pratiwi et al., 2025).

The observed association may be explained through the concept of self-efficacy, which emphasizes that confidence influences an individual's ability to initiate, maintain, and persist in health-related behaviors. During breastfeeding, mothers frequently encounter physical discomfort, uncertainty regarding milk supply, and emotional stress. Fathers with greater confidence in supporting breastfeeding are more likely to provide encouragement, practical assistance, and reassurance, thereby strengthening maternal confidence to continue breastfeeding despite these challenges. (Sabilla et al., 2025).

The present findings are consistent with previous studies conducted in Turkey, Japan, and South Africa, which reported positive associations between paternal and maternal breastfeeding self-efficacy. Similar to those studies, fathers' confidence appeared to play an important psychological role in supporting breastfeeding continuation. The current findings also reinforce evidence from Indonesian studies indicating that paternal involvement contributes positively to exclusive breastfeeding outcomes.(Budiati et al., 2022; Umasekar et al., 2026; MCGovern. L et al., 2023; MCGovern. L. M et al., 2024; Fan. D , 2026).

An important finding of this study is that most participating mothers were primiparous. First-time mothers generally have limited breastfeeding experience and may therefore

experience greater uncertainty during the early postpartum period. Under these circumstances, fathers become an important source of emotional reassurance. The predominance of fathers with relatively high breastfeeding self-efficacy observed in this study may partially explain the generally high level of maternal breastfeeding confidence among participating mothers. (McGovern, L et al., 2022).

The findings have important implications for maternal and child health services. Breastfeeding education should extend beyond mothers and actively involve fathers throughout pregnancy and the postpartum period. Integrating fathers into antenatal classes, breastfeeding counseling, and family-centered lactation education may strengthen paternal self-efficacy, which in turn could enhance maternal confidence and improve breastfeeding outcomes. This approach aligns with the growing emphasis on family-centered maternity care, in which breastfeeding is regarded as a shared parental responsibility rather than solely a maternal task. (Fan, Y et al., 2025; Yuliani et al., 2025; Hidayat et al., 2023). One strength of this study is that it simultaneously assessed paternal and maternal breastfeeding self-efficacy within the same family unit, allowing direct examination of the relationship between fathers' and mothers' confidence. Furthermore, validated instruments were used to assess both constructs, enhancing the reliability of the findings. Several limitations should be acknowledged. First, the cross-sectional design precludes causal inference between paternal and maternal breastfeeding self-efficacy. Second, the relatively small sample size and purposive sampling may limit the generalizability of the findings. Third, data were collected using self-reported questionnaires, which may be subject to

recall and social desirability bias. Future longitudinal studies involving larger and more diverse populations are needed to clarify the causal pathways between paternal and maternal breastfeeding self-efficacy.

5. CONCLUSION

This study demonstrated a significant positive association between paternal breastfeeding self-efficacy and maternal breastfeeding self-efficacy among breastfeeding families in Yogyakarta City. Fathers who reported greater confidence in supporting breastfeeding tended to have partners with higher confidence in their ability to breastfeed. These findings suggest that paternal psychological readiness is closely associated with maternal breastfeeding confidence and should be recognized as an important component of successful breastfeeding support. The findings highlight the importance of adopting family-centered breastfeeding interventions that actively engage fathers throughout pregnancy and the postpartum period. Strengthening paternal breastfeeding self-efficacy through father-inclusive breastfeeding education and counseling may enhance maternal confidence and support optimal breastfeeding practices. Future longitudinal and intervention studies involving larger populations are recommended to further explore the causal relationship between paternal and maternal breastfeeding self-efficacy.

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