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Traditional methods used by mothers with babies aged 6 months and over to increase breast milk between 0-6 months

6 ay ve üzeri bebeği olan annelerin 0-6 ay arasında anne sütünü arttırmaya yönelik kullandıkları geleneksel yöntemler

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ABSTRACT

Aim: This study was conducted to determine the traditional practices used by mothers with 0-6 months old babies to increase breastfeeding and breast milk.

Method: The descriptive study was conducted with 250 participants registered in the Family Health Center in Bucak District of Burdur Province. The data were collected with the Individual Diagnosis Form and the traditional methods used by mothers with babies aged 6 months and over to increase breast milk between 0-6 months.

Results: The participants of 52.8% resorted to traditional practices for breast milk and breastfeeding. Before the first breastfeeding, 10.8% of the participants dripped formula, 7.6% sugar water, and 5.6% zamzam water to their babies. The three most common traditional practices to increase breast milk are drinking plenty of fluids and puerperal syrup, eating plenty of food, and eating popcorn. It was determined that there was a statistically significant relationship between the type of delivery of the mothers and the use of traditional methods to increase breast milk ($p<0.05$).

Conclusion: As a result, mothers attach importance to the use of traditional methods to increase their milk supply. Knowing the traditional practices to increase the breast milk of mothers during the breastfeeding process will benefit the development of health services of midwives who support mothers in this process.

Keywords: breast milk; breastfeeding; culture; postpartum period; traditional medicine

ÖZ

***Amaç*:** Bu araştırma 0-6 aylık bebeği olan annelerin emzirme ve anne sütünü artırmaya yönelik kullandıkları geleneksel uygulamaları saptamak amacıyla yapılmıştır.

Yöntem: Tanımlayıcı tipte olan araştırma, Burdur İli Bucak İlçesine bağlı bulunan Aile Sağlığı Merkezine kayıtlı 250 katılımcı ile yürütülmüştür. Veriler, Bireysel Tanılama Formu ve 6 ay ve üzeri bebeği olan annelerin 0-6 ay arasında anne sütünü arttırmaya yönelik kullandığı geleneksel yöntemler formu ile toplanmıştır.

Bulgular: Katılımcıların %52.8'i anne sütü ve emzirmeye yönelik geleneksel uygulamalara başvurmuştur. İlk emzirmeden önce katılımcıların %10.8' i bebeğine mama, %7.6'sı şekerli su, %5.6'sı zemzem suyu damlatmıştır. Anne sütünü arttırmak için en sık yapılan üç geleneksel uygulama ise bol sıvı ve lohusa şerbeti içmek, bol yemek yeme ve patlamış mısır yemedir. Annelerin doğum şekli ile anne sütünü artırmak için geleneksel yöntem kullanma durumları arasında istatistiksel olarak anlamlı bir ilişki olduğu belirlenmiştir ($p<0.05$).

Sonuçlar: Sonuç olarak anneler sütlerini arttırmak için geleneksel yöntem kullanımını önemsemektedirler. Emzirme sürecinde annelerin anne sütünü arttırmaya yönelik geleneksel uygulamaların bilinmesi, bu süreçte annelere destek veren ebelerin sağlık hizmetlerinin geliştirilmesine fayda sağlayacaktır.

Anahtar kelimeler: anne sütü; emzirme; geleneksel tıp; kültür; postpartum dönem

Introduction

Breast milk is the most suitable and essential source of nutrition for babies. However, most women do not breastfeed or stop breastfeeding immediately after giving birth, mostly due to a lack of support. In newborns born by cesarean section, there is often a delay after birth or no skin-to-skin contact; therefore, early breastfeeding cannot be achieved (Hulman et al., 2024). The American Academy of Pediatrics (2021) recommends exclusive breastfeeding for the first 6 months of life and continued breastfeeding for 24 months or more (American Academy of Pediatrics, 2021). However, only 26% of infants in the United States are exclusively breastfed by 6 months of age and 35% are partially breastfed by 12 months of age (United States, 2022). When breast milk and breastfeeding data are examined in line with TNSA 2018 data in our country, 41% of children under 6 months in Türkiye were exclusively breastfed. The proportion of children who are exclusively breastfed is rapidly decreasing; It decreases from 59% among children aged 0-1 months, to 45% among children aged 2-3 months, and to 14% among children aged 4-5 months. Contrary to the recommendation that children younger than 6 months should be breastfed, 23% of children receive other non-breast milk and 12% of children receive supplementary foods in addition to breast milk (TNSA, 2018).

Inadequate perception of milk by mothers is the main reason for stopping breastfeeding early. Some breastfeeding mothers may use galactagogues (i.e., foods, beverages, herbal supplements, and pharmaceuticals) to try to increase milk supply. However, milk production requires frequent and effective discharge of milk. Evidence on the safety and efficacy of galactagogues is limited (Ryan et al., 2023). In order for the mother to have plenty of milk, it is actually

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enough for her to drink plenty of water in addition to her daily food and to breastfeed frequently (Aşılar & Bekar, 2018). In studies conducted in many other countries as well as in our country, it is seen that mothers who think that their milk is insufficient tend to consume more of some foods and beverages (galaktogog) in order to increase their milk in order to breastfeed their babies more (Erkaya et al., 2015; Ersanlı & Aydın, 2023; Sarı et al., 2023; Tanrıverdi et al., 2014; Yaman & Balcı, 2019). Breastfeeding mothers who are concerned about their milk may use food, beverages, herbal supplements, or pharmaceuticals (e.g., galactagogues) to increase milk production (Brodribb, 2018). In studies conducted with women, it has been determined that the traditional methods they use to increase breast milk are fenugreek, garlic, date, asparagus, milk thistle, goat psoriasis, ginger and fennel (Irmak et al., 2019; Paritakul et al., 2016; Bazzano et al., 2017). Some herbal methods have been used to promote, maintain or increase breast milk. Due to the lack of data on the effectiveness and safety of these methods, there has been an increase in the use of traditional methods (McBride et al., 2022).

Feeding babies only with breast milk in the first six months is still not at the desired level. Mothers resort to various traditional practices with the thought that their milk is not enough and their babies are not satisfied (Gökduman & Akdolun, 2010). Knowing the traditional beliefs and practices that will increase breast milk during the postpartum breastfeeding process is extremely important in terms of determining the priorities in the health services to be provided to individuals and families during this period. This study was conducted to determine the traditional practices used by mothers with 0-6 months old babies to increase breastfeeding and breast milk.

Methods

Design of the study

A descriptive design was used in this study.

Population and sample

The data of the study were collected by directing a face-to-face questionnaire to mothers with babies aged 6 months or more, who applied to a total of five family health centers in Bucak District of Burdur between January 1 and February 1, 2024. The population of the study consists of women with children aged 6 months or more. The population of the study consisted of a total of 341 mothers with infants aged 0-6 months affiliated to the family health centers where the study was conducted. The sample size of the study was determined using the finite population sample size calculation method. The sample of the study was determined as at least 181 mothers by calculating the sample with known population (95% confidence interval and 5% probability of error). The sample group consisted of 250 mothers representing 76.4% of the population who volunteered to participate in the study.

Criteria for inclusion in the study: volunteering to participate in research; having a child 6 months or older (excluding premature newborns, infants with physiological problems such as sucking difficulties and cleft palate); have breastfed or are breastfeeding; be literate.

Criteria for exclusion from the study: not volunteering to participate in research; not having children; not breastfeeding; ılliteracy; mothers with health or psychological problems affecting breastfeeding.

Data collection tools

The data were collected by the researcher himself by face-to-face interview method in a way that did not disrupt the daily routines of the women. The time to fill out the questionnaire took about 10-15 minutes. In the collection of research data, the Individual Diagnosis Form prepared by the researchers by reviewing the literature and the traditional methods used by mothers with babies aged 6 months and over to increase breast milk between 0-6 months were used (Ersanlı & Aydın, 2023; McBride et al., 2022; Meek et al., 2022; Ryan et al., 2023; Sarı et al., 2023; Yaman & Balcı, 2019). Individual Identification Form; It consists of 9 questions created to determine identity characteristics (sociodemographic characteristics of mothers and babies). Questions about the traditional methods used by mothers with babies aged 6 months and over to increase breast milk between 0-6 months; There are questions (33 questions) about breastfeeding their babies, breastfeeding and traditional practices to increase breast milk.

Evaluation of data

The data obtained from the study were evaluated using the statistical package program (SPSS 26.0) in the computer environment, percentage, average and standard deviation values were calculated in the descriptive statistical analysis, and chi-square test was used in the comparisons between the groups. $p<0.05$ was considered significant.

Ethical aspects of research

Ethical aspect of the research Written and verbal consent was obtained by stating to the participants the purpose of the research, that their personal information would not be requested, that they could leave the research at any time, and that their answers would not be used for any purpose other than the research. All steps of the research were carried out in accordance with the Principles of the Declaration of Helsinki. For the ethical review of the research, ethical approval dated 13.12.2023 and numbered "GO 2023/532" was obtained from the ethics committee of Burdur Mehmet Akif Ersoy University.

Results

Table 1. Distribution of descriptive characteristics of mothers (n=250)

Properties	n	%
Employment status		
Employee	127	50.8
Non-working	123	49.2
Level of education		
Primary school	48	19.2
Secondary school	33	13.2
High school	62	24.8
University	107	42.8
Family type		
Kernel	229	91.6
Wide	21	8.4
Income status of the family		
Income is less than expense	42	16.8
Income is equal to expense	119	47.6
Income is more than expense	89	35.6
Health insurance		
Yes	213	85.2
No	37	14.8
Mode of delivery		
Vaginal birth	151	60.4
Caesarean section	99	39.6
The place where the birth took place		
Hospital	244	97.6
At home	6	2.4

Table 2. Distributions according to some characteristics related to the feeding status of mothers to their babies and their status of receiving information about breast milk

Properties	n	%
How to feed the baby after birth		
Breast milk	220	88.0
Formula	30	12.0
The duration of breastfeeding the baby after birth		
First half hour	111	44.4
Within the first hour	86	34.4
The first two hours and later	53	31.2
The first food given to your baby after birth		
Breast milk	180	72.0
Sugar water	19	7.6
Herbal tea	5	2.0
Formula	27	10.8
Water	1	0.4
Juice	1	0.4
Zamzam water	14	5.6
Date palm	3	1.2
Status of receiving training on breastfeeding and breastfeeding enhancing practices		
Yes	151	60.4
No	99	39.6
From whom she received training on breastfeeding and breastfeeding enhancement practices		
Nurse	52	34.4
Midwife	80	53.0
Doctor	19	12.6

In our research, it was revealed that 53.0% of the mothers received information about breast milk from midwives (Table 2). In the study, it was determined that 88% of the mothers gave breast milk to their newborn babies, 44.4% breastfed their babies within the first half hour after birth, 10.8% gave formula, 7.6% sugar water and 5.6% zamzam water as the first food after birth. In our research, it was revealed that 53.0% of the mothers received information about breast milk from midwives (Table 2).

It was determined that 52.8% of the mothers within the scope of the study used the traditional method while increasing breast milk, 85.2% used the traditional method around them, and 68.1% of the mothers who used the traditional method recommended this method to others.

Table 3: Distribution of characteristics related to the traditional methods used by mothers to breastfeed-increase breast milk

Properties	n	%
Using the traditional method		
Yes	132	52.8
No	118	47.2
From whom the method was learned		
Consanguineous	62	46.9
Neighbour	24	18.4
Internet	27	20.4
Books/magazines/newspapers	19	14.3
How the method Works	90	68.1
Yes	22	16.6
No	20	15.3
Partly		
Recommending the method she uses to other mothers		
Yes	90	68.1
No	42	31.9
The use of traditional methods in the mother's environment		
Yes	213	85.2
No	37	14.8
Traditional methods used*		
Plenty of fluids and puerperal syrup	99	38.4
Eating plenty of food	31	12.0
Sweet foods	17	6.6
Molasses/honey/jam/tahini	11	4.3
Hoshaf/compote/sherbet	13	5.1
Eating greens	5	1.9
Fennel	12	4.6
Bulgur pilaf	16	6.2
Popcorn	21	8.2
Onion	14	5.4
Fruit	8	3.1
Hazelnuts/peanuts/walnuts	7	2.7
Milk and dairy products	4	1.5

*More than one answer has been given.

It was determined that 46.9% of the mothers using the traditional method learned the method from their relatives and 68.1% thought that the method they used worked. Traditional methods used include plenty of liquids and puerperium syrup (38.4%), eating plenty of food (12%), popcorn (8.2%), sweet foods (6.6%), bulgur pilaf (6.2%), onions (5.4%) and compote/sherbet (5.1%) (Table 3).

Table 4. Distribution of mothers' opinions on breast milk

Expressions*	Agree	I disagree	Neither agree nor disagree
When breast milk is insufficient, babies are given ready-made formula and supplementary food.	211(%84.4)	18(%7.2)	21(%8.4)
When breast milk is insufficient, traditional methods can be used to increase milk.	199(%79.6)	29(%11.6)	22(%8.8)
When breast milk is insufficient, herbal drinks that increase milk can be used.	197(%78.8)	33(%13.2)	20(%8.0)
Although breast milk is sufficient, traditional methods and herbal drinks can be used.	121(%48.4)	113(%45.2)	16(%6.4)
During breastfeeding, the mother's diet affects the amount of milk.	228(%91.2)	14(%5.6)	8(%3.2)
The psychological state of the mother affects the amount of milk.	241(%96.4)	6(%2.4)	3(%1.2)
The stress experienced by the mother reduces her milk.	246(%98.4)	1(%0.4)	3(%1.2)
Traditional methods recommended by family elders are useful.	162(%64.8)	25(%10)	63(%25.2)
Before using traditional methods, it is necessary to consult a doctor.	201(%80.4)	27(%10.8)	22(%8.8)
Not every traditional method is effective in increasing breast milk.	175(%70)	50(%20)	25(%10)

Expressions are given as n(%)

While 79.6% of the mothers within the scope of the study think that traditional methods can be used to increase milk when breast milk is insufficient, 48.4% think that traditional methods and herbal drinks can be used even though breast milk is sufficient. 98.4% of the mothers think that the stress experienced during breastfeeding reduces breast milk, and 91.2% think that the diet affects the amount of milk (Table 4).

Table 5. Comparison of the descriptive characteristics of mothers and their use of traditional methods

Introductory features	Yes n (%)	No n (%)	Test/p
Average age	35.46 ±4.97	32.34 ±4.62	t= 0.701 p=0.496
Number of pregnancies	2.02 ±1.10	2.12 ±0.92	t=-0.135 p=0.776
Educational background			
Primary school	46 (95.8)	2 (4.2)	
Secondary school	30 (90.9)	3 (9.1)	X^2=10.567
High school	7 (11.3)	55 (88.7)	p=0.052
University	49 (45.8)	58 (54.2)	
Family Type			
Kernel	58 (25.3)	171 (74.7)	X^2=0.526
Wide	7 (33.3)	14 (66.7)	p=0.805
Income status of the family			
Income less than expenses	10 (23.8)	32 (76.2)	X^2=3.340 p=0.106
Income equals expense	50 (42.0)	69 (58.0)	
Income more than expense	27 (30.3)	62 (69.7)	
Mode of delivery			
Normal birth	50 (33.1)	101(66.9)	X^2=6.304
Caesarean section	30 (30.3)	69(69.7)	p=0.010
The place where the birth took place			
Hospital	44 (18.0)	200 (82.0)	X^2=3.401
At home	3 (50.0)	3 (50.0)	p=0.310

In the study, it was found that there was no statistically significant relationship between the mothers' age, number of pregnancies, educational status, family type and income level, place of birth and use of traditional methods to increase breast milk (p>0.05). It was determined that there was a statistically significant relationship between the mode of delivery of mothers and their use of traditional methods to increase breast milk (p<0.05) (Table 5).

Discussion

For mothers, breastfeeding is the most natural and healthiest way to feed the baby (Golan & Assaraf, 2020). Most mothers prefer to breastfeed their babies after birth. Recent data shows that at least 75% of new mothers try to breastfeed their babies (Yurtseven et al., 2024). In our study, it was determined that 72.0% of postpartum women gave breast milk to their babies as the first food, while it was determined that they also gave formula (10.8%), sugar water (7.6%), zamzam water (5.6%), herbal tea (2%), date (1.2%), water (0.4%) and fruit juice (0.4%). In the study of Turan and Kutlu (2020), mothers first of all compared to traditional approaches in breastfeeding; It was determined that he gave water (26%), sugar water (11.3%), zamzam water (26%), honey-molasses (3.3%), ready-to-eat food (10%), and dates (20%). Similarly, in the literature, the traditional practices of mothers before the first breastfeeding; dripping zamzam into the baby's mouth, reciting the call to prayer in the ear, giving sugar water and applying dates to the mouth (Aygör et al., 2024; Abouelfettoh & Matrafi, 2021; Karahan et al., 2017). According to the results of this study, it can be thought that the traditional practices before the first breastfeeding are due to the religious values of the culture of the society in which the mothers are raised.

In our study, traditional practices to increase breast milk are the consumption of some foods and beverages (molasses, honey, jam, tahini, popcorn, bulgur pilaf, onion, compote, sherbet, fennel, hazelnut, peanut, walnut). While 79.6% of the mothers within the scope of the study think that traditional methods can be used to increase milk when breast milk is insufficient, 48.4% think that traditional methods and herbal drinks can be used even though breast milk is sufficient. Similar to the study finding, some foods such as dates, molasses, figs, raisins, dried onions, parsley as traditional practices to increase breast milk in the literature (Bulut et al., 2020; Çakırer Çalbayram et al., 2019) and herbal teas such as linden, sage, fennel and anise (Tural Buyuk et al., 2019; Üstüner Top & Çam, 2022). In addition, studies have shown that mothers drink milk to increase the amount of milk (Tural Buyuk et al., 2019; Üstüner Top & Çam, 2022), where he eats dessert (Bayram & Deveci, 2017; Gölbaşı et al., 2018), consuming liquids such as quince compote and fruit juice (Bulut et al., 2020; Tural Buyuk et al., 2019) and wearing amulets (Üstüner Top & Çam, 2022). In the current study, the foods and beverages consumed by the majority of mothers are consistent with the literature.

The present study, 60.4% of the mothers received training on breastfeeding and breastfeeding practices, and 53.0% of them received information from the midwife, 34.4% from the nurse and 12.6% from the doctor. In the study of Yaman and Balcı (2019), 94.7% of the mothers received education, and according to the findings of Gökduman and Akdolun (2010), it was determined that 22.2% of the mothers received education. In this study, midwives and nurses stand out as the health professionals who provide the most information to mothers about breastfeeding. This may be explained by the fact that these professional groups are in closer and continuous communication with mothers. However, the roles of midwives and nurses in breastfeeding support vary in different studies. These differences may be due to the structure of health systems, the content of training programs or regional practices.

In the study, it was found that there was no statistically significant relationship between the mothers' age, number of pregnancies, educational status, family type and income level, place of birth and use of traditional methods to increase breast milk (p>0.05). In the study of Turan and Kutlu (2020), it was determined that there were no significant differences between the mother's education, number of children, hometown, family type, breastfeeding education status, knowledge that breastfeeding is beneficial, milk sufficiency status and delivery method distributions according to the belief and use of traditional approaches in the first breastfeeding (p>0.05). Demographic characteristics have no effect on the use of traditional milk increasing methods. The reasons for using these methods mostly include health-related factors.

Limitations of the study

The fact that the research was conducted in a district of a province and there was a limited sample limit the generalization of the results. It can be studied in different regions of Türkiye and with a larger sample.

Conclusions and Recommendations

In line with the findings obtained in our study, as a result: most of the women gave breast milk as the first food, from traditional approaches in the first breastfeeding to the baby first; It was determined that they gave food, sugar water, zamzam water, herbal tea and dates. Although most of the women have been trained in breastfeeding, they still resort to traditional practices in increasing breast milk. Mothers stated that they learned traditional methods to increase their milk from their relatives and consumed the recommended foods to increase their milk. In the study, it was found that there was no statistically significant relationship between the mothers' age, number of pregnancies, educational status, family type and income level, place of birth and use of traditional methods to increase breast milk (p>0.05) Midwives have important duties in raising awareness and training of family elders about traditional cultural beliefs and practices. One of these tasks is to inform family members about the positive and negative aspects of traditional cultural practices; to prevent harmful behaviors and raise awareness.

Ethics Committee Approval

Ethics committee approval was obtained from Health Sciences Scientific Research Ethics Committee of a Burdur Mehmet Akif Ersoy University (Board Decision No: GO2023/532) on December 13, 2023).

Informed Consent

Written consent was obtained from the participants of parents.

Peer-Review

Externally peer-reviewed.

Author Contributions

S.U.Y.: Idea/Concept, Design, Supervision/Consultancy, Analysis and/or Interpretation, Source Review, Writing of the Article, Critical Review.

S.T: Idea/Concept, Data Collection and/or Processing, Analysis and/or Interpretation, Source Review, Writing of the Article.

S.O.: Idea/Concept, Data Collection and/or Processing, Analysis and/or Interpretation, Source Review, Writing of the Article.

Conflict of Interest

There is no conflict of interest.

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