



Original Research / Orijinal Araştırma

Traditional Beliefs And Practices Related To Puerperium, Neonatal Care And Breastfeeding In The Postpartum Period

Postpartum Dönemde Lohusalık, Yenidoğan Bakımı Ve Emzirme İle İlgili Geleneksel İnanç Ve Uygulamalar

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Abstract

Objective: In this research, we aimed to determine the traditional beliefs and implemented practices of women in postpartum period regarding puerperium, neonatal care, and breastfeeding.

Method: The study was cross-sectional and descriptive and consisted of 618 women living in seven regions of Turkey between December 12, 2022 and January 15, 2023. The data were collected through a personal information form created by the researchers and snowball sampling method was used. Mean, standard deviation, number, percentage, and chi-square tests were used to evaluate the data.

Findings: The average age of the women participating in the study was between 38.15±10.62, and the duration of the marriage was 16.59±11.54 years. Of the women, 33.3% are primary school graduates, 73% are not working, 54.4% have an income equivalent to expenses, and 86.9% have a nuclear family structure. Of them, 59.7% stated that they resorted to traditional practices related to puerperal care, 61.8% to neonatal care, and 47.9% to breastfeeding. The traditional practices that women use the most are abstinence from sexual intercourse for forty days in puerperium (66.8%), swaddling in neonatal care (75.9%), consuming hot milk, soup, etc., and increasing milk consumption during breastfeeding (62.6%). It was found that there is a significant difference between the traditional methods applied for puerperal care, neonatal care, and breastfeeding when compared by region (p<0.05).

Conclusions and recommendations: It was determined that the women participating in the study applied many traditional methods related to puerperium, neonatal care, and breastfeeding. Although these methods show regional differences, they are often used. It is proposed to increase the awareness of society and health professionals specialized in their field about traditional methods and to create policies for health organizations to identify and inform, considering that these traditional methods may create differences in individuals.

Keywords: Postpartum, Breastfeeding, Neonatal, Traditional Practices

Özet

Amaç: Bu araştırma doğum yapmış kadınların lohusalık, yenidoğan bakımı, emzirmeye yönelik geleneksel inanç ve uygulamalarını saptamak amacıyla yapılmıştır.

Yöntem: Araştırma kesitsel ve tanımlayıcı tipte tasarlanmış olup, 15 Aralık 2022 ve 15 Ocak 2023 tarihleri arasında Türkiye'nin yedi bölgesinde yaşayan 618 kadından oluşmuştur. Veriler, araştırmacılar tarafından oluşturulan kişisel bilgi formu aracılığıyla toplanmış ve kartopu örnekleme yöntemi kullanılmıştır. Verilerin değerlendirilmesinde ortalama, standart sapma, sayı, yüzde ve ki kare testleri kullanılmıştır.

Bulgular: Araştırmaya katılan kadınların yaş ortalaması 38.15±10.62 ve evlilik süresi 16.59±11.54 yıldır. Kadınların %33.3'ü ilköğretim mezunu, %73'ü çalışmıyor, %54.4'ünün geliri giderine denk, %86.9'u çekirdek aile yapısına sahiptir. Kadınların %59.7'si lohusalık, %61.8'si yenidoğan bakımı, %47.9'u emzirme ile ilgili geleneksel uygulamalara başvurduğunu belirtmiştir. Kadınların en fazla uyguladıkları geleneksel uygulamalar lohusalarda (%66.8) kırk gün cinsel ilişkiye girilmemesi, yenidoğan bakımında (%75.9) kundaklama, emzirme döneminde (%62.6) sütü artırmak için sıcak süt, çorba vb. içirilmesi şeklinde sıralanmaktadır. Lohusalık, yenidoğan bakımı ve emzirmeye yönelik uygulanan geleneksel yöntemlerin bölgelere göre bakıldığında anlamlı bir fark olduğu saptanmıştır (p<0.05).

Sonuç ve öneriler: Araştırmaya katılan kadınların lohusalık, yenidoğan bakımı ve emzirme ile ilgili birçok geleneksel yöntemi uyguladıkları belirlenmiştir. Bu yöntemler bölgesel farklılıklar göstermekle birlikte, sıklıkla kullanılmaktadır. Toplum ve alanında uzman sağlık çalışanlarının geleneksel yöntemler konusunda farkındalığının artırılması ve sağlık kuruluşlarının bu geleneksel yöntemlerin bireylerde farklılık oluşturabileceği göz önünde bulundurularak tespit ve bilgilendirme yapması konusunda politikalar oluşturulması önerilmektedir.

Anahtar Kelimeler: Postpartum, Emzirme, Yenidoğan, Geleneksel Uygulamalar

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Introduction

Although culture and society are inseparable, societies' health practices, due to a cultural perspective, are defined as "traditional health practices".¹ In all cultures, some traditional practices have been developed to reflect society's thoughts about life and passed down from generation to generation.^{2,3,4} Regardless of where they live, whether in urban or rural areas, cultural and traditional ethnic origin norms affect attitudes toward neonatal care in the postpartum period.⁵ Traditional practices for the neonatal in the postpartum period are observed in many cultures and consist of practices for breastfeeding and nutrition during neonatal care.⁵

Traditional practices for the neonatal are caused by many reasons, such as difficult access to health services, the economic situation of society, distrust of health personnel, and lack of health assurance.⁶ Traditional practices are also included in most countries of the world and our society. Postpartum mothers in Iran pray to protect the newborn from evil eyes; in Mangalore, mothers use cold water to speed up the drying process of the newborn's umbilical cord during the postpartum period, engage in spiritual activities and apply herbal medicines, in Tanzania for 6-7 days after childbirth (until the newborn's umbilical cord falls off), newborns are not shown to people other than the baby's family members in order to protect them from the evil eye; these can be listed amongst the traditional practices for newborns worldwide.^{7,8,9} In Turkey, on the other hand, it is found that we have practices such as "not to breastfeed before three adhan times after the baby is born, not to breastfeed without reciting the adhan in the ear of the baby, not to give colostrum to the newborn" for newborn nutrition; whereas there are some other practices such as "covering the baby's face with a yellow muslin to protect him/her from jaundice, swaddling, salting, not cutting his/her nails before 40 days, singing a lullaby, applying olive oil to prevent diaper rash".^{10,11,12} Although some traditional practices applied to the newborn are rational, some are risky practices that may negatively affect the newborn's health.¹² For these reasons, it is aimed to determine the traditional beliefs and practices applied by women who had given birth at least once in the study about puerperal, neonatal care, and breastfeeding process

Method

The objective and type of the research:

This is a descriptive cross-sectional research conducted to determine the traditional beliefs and practices applied by women who had given birth at least once about puerperal, neonatal care, and breastfeeding process.

Place, Time, and Sample of the Research

The general population of the study consists of women living in seven regions of Turkey between December 15,2022 and January 15,2023. We aimed to reach the sample group with the snowball sampling technique, and the data collection process was terminated when the sample size to represent the study population was reached. The number of participants according to regions is 95 in Central Anatolia, 52 in Eastern Anatolia, 158 in Southeastern Anatolia, 180 in the Black Sea Region, 63 in the Mediterranean Region, 11 in the Aegean Region, and 59 in the Marmara Region.

The G*Power 3.1.9.7 program was used to determine the study sample.¹³ The study sample was calculated by considering Cohen's medium effect size suggestion (1988).¹⁴ Accordingly, the confidence interval was 95% ($1-\beta=0.95$), and the margin of error was 5% in the medium effect size. As a result of the calculations, it was concluded that there should be a total of 556 women, and taking into account possible data losses (10% data loss), 618 women were reached. According to the posthoc analysis conducted at the end of the research, 96% power ($1-\beta=0.96$) and medium effect size were reached with 618 women.

Data Collection Tools

In order to collect data, a questionnaire prepared by the researchers per the literature was used.^{15,16} The questionnaire form consisted of 74 questions, including 8 questions about the socio-demographic characteristics of mothers, 9 questions about obstetric characteristics, and 57 about the methods she has heard and applied for the puerperal period, neonatal care, and breastfeeding. The survey questions were sent to the participants. **Inclusion**

Criteria:

Women who lived in Turkey had given birth at least once and agreed to participate in the study were included.

Collection of Data

After obtaining the permits of the ethics committee and the institution, the study data were collected between December 15,2022 and January 15,2023 by online connection after receiving their consent.

Research Strengths

In the literature, there are generally studies covering a region or a city. Our study was conducted throughout Turkey. Our study results show regional differences from the literature.

Limitations of the Research

The regional distribution should have been more homogeneous, but the respondents who agreed to participate in the research show a more irregular distribution.

The Ethical Dimension of the Research

In order to conduct the research, ethics committee permission was obtained from the Social and Humanities Ethics Committee of a University (Decision No: 14-27, Decision Date: 17.10.2022), and official written permissions were obtained from the institutions where the research was conducted. In the research process, the principles of research and publication ethics and the Helsinki Declaration on Human Rights were adhered to since using the human phenomenon requires the protection of individual rights.

Analysis of the data

The analysis of the data was carried out with SPSS 23.0 package program (firme ve ülke bilgisinin eklenmesi gerekir). Categorical variables, number (n), percentage (%), mean and standard deviation calculations and numerical variables were analyzed using the chi-square test.

Results

The current research was conducted with 618 women from seven regions of Turkey. Amongst the women included in the research, 33.3% are primary school graduates, 73% are not working, 54.4% have an income equivalent to their expenses, and 86.9% have a nuclear family structure. While 15.4% of women live in the Central Anatolia Region, 8.4% in the Eastern Anatolia Region, 25.6% in the Southeastern Anatolia Region, 29.1% in the Black Sea Region, 10.2% in the Mediterranean Region, 1.8% in the Aegean Region, and 9.5% in the Marmara Region. The average age is 38.15 ± 10.62 (min 18-max 80), and the year of marriage is 16.59 ± 11.54 (min 1-max 64). According to the obstetric characteristics of women, the average number of births is 2.56 ± 1.49 (min 1-max 14), the average number of pregnancies is 2.81 ± 1.81 (min 0-max 14), the average number of living children is 2.52 ± 1.81 (min 0-max 30), the average number of stillbirths is 0.13 ± 0.46 (min 0-max 4), the average number of miscarriages is 0.33 ± 0.709 (min 0-max 4), the average number of abortions are 0.18 ± 0.62 (min 0-max 9) (Table 1).

Table 1. Sociodemographic and obstetric data of the participants

Personal information		Frequency (F)	Percent (%)
Education status	Literate	53	8.6
	Primary education	206	33.3
	High school	185	29.9
	License	164	26.5
	Postgraduate	10	1.6
Employment status	Working	167	27.0
	Not working	451	73.0
Income status	Income exceeds expenses	109	17.6
	Income equals to expenses	336	54.4
	Income less than expenses	173	28.0
Family type	Nuclear family	537	86.9
	Extended family	81	13.1
Region of residence	Central Anatolia Region	95	15.4
	Eastern Anatolia Region	52	8.4
	Southeastern Anatolia Region	158	25.6
	Black Sea Region	180	29.1
	Mediterranean Region	63	10.2
	Aegean Region	11	1.8
	Marmara Region	59	9.5

Table 1(continued). Sociodemographic and obstetric data of the participants

Gender of the last baby born	Girl	319	51.6
	Boy	299	48.4
The place of the most recent birth	Hospital	589	95.3
	Home	29	4.7
Source of knowledge on traditional practices	No	28	4.5
	Family	230	37.2
	Health personnel	132	21.4
	Internet/Television	20	3.2
	All of them	208	33.7
Are there any traditional methods you use for puerperium?	Yes	369	59.7
	No	249	40.3
Is there a traditional method you use with a newborn baby?	Yes	382	61.8
	No	236	38.2
Do you have a traditional method for breastfeeding?	Yes	296	47.9
	No	322	52.1
	Mean±SD		
Age	38.15±10.62 (min 18-max 80)		
Year of marriage	16.59±11.54 (min 1-max 64)		
Number of births	2.56±1.49 (min 1-max 14)		
Number of pregnancies	2.81±1.81 (min 0-max 14)		
Number of living children	2.52±1.81 (min 0-max 30)		
Number of stillbirths	0.13±0.46 (min 0-max 4)		
Number of miscarriages	0.33±0.709 (min 0-max 4)		
Number of abortions	0.18±0.62 (min 0-max 9)		

The traditional practices that women practice the most during the puerperal period are not having sexual intercourse for forty days (66.8%). 62.8% of puerperal women consume plenty of water and sugary foods. eat whatever they desire. 42.9% stated that they practice putting a Quran, mirror, broom, onion, garlic, and evil eye beads by the bedside of puerperal women (Table 2).

Table 2. *Traditional practices related to the puerperium*

Traditional methods in the puerperium	Yes n (%)	No n (%)
Burial or cremation of the placenta	85 (13.8)	533 (86.2)
Preparing a puerperal bed with red cover and ornaments	136 (22.0)	482 (78.0)
Putting a red cloth on the head of the puerperant	180 (29.1)	438 (70.9)
Putting combs, cutting instruments and gold near the puerperant	168 (27.2)	450 (72.8)
Placing a Quran, mirror, broom, onion, garlic and evil eye bead on the head of the puerperant	265 (42.9)	353 (57.1)
During puerperium, the mother should consume plenty of water and sugary foods, eat onions green vegetables, and whatever she craves	388 (62.8)	230 (37.2)
No sexual intercourse for forty days	413 (66.8)	205 (33.2)
Putting a moxibustion on the waist of the puerperant	60 (9.7)	558 (90.3)
Raising the puerperant's feet	95 (15.4)	523 (84.6)
Warming a tile under the puerperant	54 (8.7)	564 (91.3)
Not leaving the puerperant alone)	174 (28.2)	444 (71.8)
Keeping the puerperant indoors for forty days	226 (36.6)	392 (63.4)
Staying with the puerperant day and night for three days and leaving the lights on at night	172 (27.8)	446 (72.2)
Not taking menstruating women with the puerperant	136 (22.0)	482 (78.0)
Not taking women whose children have died with the puerperant	72 (11.7)	546 (88.3)
Not keeping two women who have just given birth in the same room during the puerperium	124 (20.1)	494 (79.9)

The most traditional practices are specific to the newborn applied by women are swaddling the newborn (75.9%), covering the newborn's face with yellow muslin and dressing their clothes in yellow 55.3%, and making a 40th-day ceremony for the newborn 52.9% (Table 3).

Table 3. *Traditional practices related to the newborn*

Traditional methods in the newborn period	Yes n (%)	No n (%)
Not breastfeeding until three adhan times have passed	59 (9.5)	559 (90.5)
Swaddling the baby	469 (75.9)	149 (24.1)
Bathing the newborn with salt water or rubbing the body directly with salt	261 (42.2)	357 (57.8)
Laying the newborn in the ground	83 (13.4)	535 (86.6)
Covering the newborn's face with yellow cheesecloth and wearing yellow clothes	342 (55.3)	276 (44.7)
Burying the newborn's fallen umbilical cord in mosques, schools, etc.	312 (50.5)	306 (49.5)
Giving the newborn sugar water, olive oil, herbal tea	174 (28.2)	444 (71.8)
Applying soot on the invisible parts of the newborn	52 (8.4)	566 (91.6)
Not leaving the newborn's laundry out after noon	164 (26.5)	454 (73.5)
Wearing amulets and evil eye beads on the newborn	300 (48.5)	318 (51.5)
Rubbing honey on a newborn's tongue	88 (14,2)	530 (85,8)
Celebrating forty days for a newborn	327 (52,9)	291 (47,1)
Performing mawlūt at the forty days celebration	229 (37,1)	389 (62,9)
Taking a forty-day-old baby to visit relatives	214 (34,6)	404 (65,4)

Among breastfeeding practices, consuming hot milk, soup, etc. to increase milk is the most traditional practice with 62.6%, followed by drinking or eating sweet foods with 57.8%. Of the women, 50.2% do not consume gas-forming foods such as beans, chickpeas, grapes and milk because they are considered objectionable (Table 4).

Table 4. *Traditional practices during breastfeeding*

Traditional practices during breastfeeding	Yes n (%)	No n (%)
Not breastfeeding until three adhan times have passed	54 (8.7)	564 (91.3)
Not giving the first milk to the baby	98 (15.9)	520 (84.1)
Drinking hot milk, soup, etc. to increase milk	387 (62,6)	231 (37,4)
Gathering wheat and giving it to the shepherd	24 (3,9)	594 (96,1)
Another woman breastfeeding your baby	79 (12.8)	539 (87.2)
Woman or baby uses sugar water	219 (35.4)	399 (64.6)
Not breastfeeding the foremilk	82 (13.3)	536 (86.7)
Not eating foods that are considered contraindicated, such as beans, chickpeas, grapes, milk	310 (50.2)	208 (49.8)
Drinking puerperal sherbet	226 (36.6)	392 (63.4)
Sitting on the ground, which is referred to as the practice of “höllük”	53 (8.6)	565 (91.4)
Drinking light and sweet tea	276 (44.7)	342 (55.3)
Eating sweet foods	357 (57.8)	261 (42.2)

A significant difference was found between the traditional methods most used by women during the puerperal period among regions, such as preparing ornamental bedding with red, covering the head of the puerperal with a red veil, putting a Quran, broom, mirror, etc. at the bedside of the puerperal, consuming plenty of water and sugary foods, putting combs, cutting tools next to the puerperal, not having sexual intercourse for 40 days ($p<0.005$) (Table 5).

A significant difference was found between the traditional methods among regions most commonly used by women for the newborn period and washing the newborn with salty water or rubbing it with salt, covering the newborn's face with yellow muslin, dressing in yellow, burying the newborn's umbilical cord in places such as mosques, schools, giving sweet water, olive oil, herbal tea to the newborn, making 40th-day ceremony to the newborn ($p<0.005$) (Table 5).

A significant difference was found among regions between the traditional methods most used by women for breastfeeding to make a woman or baby drink sweet water, not eating foods such as beans, chickpeas, grapes, milk that are considered objectionable, making puerperal sorbet drink, making the mother drink sweet and weak tea, making them consume sweet foods ($p<0.005$) (Table 5)

Table 5. Distribution of participants' traditional practices for puerperium, newborn and breastfeeding by region

The most traditional method during the puerperium		Central Anatolia n (%)	Southeastern Anatolia n (%)	Eastern Anatolia n (%)	Marmara n (%)	Black Sea n (%)	Mediterranean n (%)	Aegean n (%)	Test χ^2 (p)
Prepare a fancy bed with a red coverlet	Yes	16 (16.8)	46 (29.1)	9 (17.3)	11 (18.6)	30 (16.7)	22 (34.9)	2 (18.2)	16.309 (0.012)
	No	79 (83.2)	112 (70.9)	43 (82.7)	48 (81.4)	150 (83.3)	41 (65.1)	9 (81.8)	
Covering the puerperant's head with a red cloth	Yes	30 (31.6)	63 (39.9)	12 (23.1)	12 (20.3)	31 (17.2)	30 (47.6)	2 (18.2)	35.678 (0.000)
	No	65 (68.4)	95 (60.1)	40 (76.9)	40 (76.9)	149 (82.8)	33 (52.4)	9 (81.8)	
Putting a Quran, mirror, broom, onion, garlic, and evil eye bead on the head of the puerperant	Yes	37 (38.9)	71 (44.9)	13 (25.0)	20 (33.9)	94 (52.2)	26 (41.3)	4 (36.4)	16.275 (0.012)
	No	58 (61.1)	87 (55.1)	39 (75.0)	39 (66.1)	86 (47.8)	37 (58.7)	7 (63.6)	
The puerperant consumes plenty of water and sugary foods	Yes	60 (63.2)	110 (69.6)	32 (61.5)	38 (64.4)	93 (51.7)	44 (69.8)	11 (100)	20.651 (0.002)
	No	35 (36.8)	48 (30.4)	20 (38.5)	21 (35.6)	87 (48.3)	19 (30.2)	-	
Putting combs, cutting instruments, gold next to the puerperant	Yes	20 (21.1)	61 (38.6)	13 (25.0)	10 (16.9)	45 (25.0)	15 (23.8)	4 (36.4)	16.733 (0.010)
	No	75 (78.9)	97 (61.4)	39 (75.0)	49 (83.1)	135 (75.0)	48 (76.2)	7 (63.6)	
40 days without sexual intercourse	Yes	71 (74.7)	110 (69.6)	39 (75.0)	40 (67.8)	99 (55.0)	45 (71.4)	9 (81.8)	17.904 (0.006)
	No	24 (25.3)	48 (30.4)	13 (25.0)	19 (32.2)	81 (45.0)	18 (28.6)	2 (18.2)	
The most common traditional practices for the newborn									
Washing the newborn with salt water or rubbing with salt	Yes	30 (31.6)	83 (52.5)	24 (46.2)	25 (42.4)	66 (36.7)	27 (42.9)	6 (54.5)	14.597 (0.024)
	No	65 (68.4)	75 (47.5)	28 (53.8)	34 (57.6)	114 (63.3)	36 (57.1)	5 (45.5)	
Covering the newborn's face with yellow cheesecloth. dressing in yellow	Yes	55 (57.9)	113 (71.5)	38 (73.1)	21 (35.6)	78 (43.3)	33 (52.4)	4 (36.4)	45.238 (0.000)
	No	40 (42.1)	45 (28.5)	14 (26.9)	38 (64.4)	102 (56.7)	30 (47.6)	7 (63.6)	
Burying the newborn's falling umbilical cord in places like mosques and schools	Yes	48 (50.5)	100 (63.3)	30 (57.7)	19 (32.2)	76 (42.2)	32 (50.8)	7 (63.6)	25.014 (0.000)
	No	47 (49.5)	58 (36.7)	22 (42.3)	40 (67.8)	104 (57.8)	31 (49.2)	4 (36.4)	
Newborn drinking sugar water, olive oil, herbal tea	Yes	21 (22.1)	78 (49.4)	14 (26.9)	9 (15.3)	28 (15.6)	21 (33.3)	3 (27.3)	56.723 (0.000)
	No	74 (77.9)	80 (50.6)	38 (73.1)	50 (84.7)	152 (84.4)	42 (66.7)	8 (72.7)	
Celebrating forty days for a newborn	Yes	58 (61.1)	89 (56.3)	31 (59.6)	27 (45.8)	84 (46.7)	29 (46.0)	9 (81.8)	13.119 (0.041)
	No	37 (38.9)	69 (43.7)	21 (40.4)	32 (54.2)	96 (53.3)	34 (54.0)	2 (18.2)	
The most common traditional practices for breastfeeding									
Making the mother or the baby drink sugar water	Yes	27 (28.4)	72 (45.6)	22 (42.3)	19 (32.2)	54 (30.0)	21 (33.3)	4 (36.4)	12.928 (0.044)
	No	68 (71.6)	86 (54.4)	30 (57.7)	40 (67.8)	126 (70.0)	42 (66.7)	7 (63.6)	
Not eating foods such as beans, chickpeas, grapes, milk, which are thought to be contraindicated	Yes	49 (51.6)	111 (70.3)	23 (44.2)	25 (42.4)	70 (38.9)	25 (39.7)	7 (63.6)	40.468 (0.000)
	No	46 (48.4)	47 (29.7)	29 (55.8)	34 (57.6)	110 (61.1)	38 (60.3)	4 (36.4)	
Drinking puerperal sherbet	Yes	30 (31.6)	72 (45.6)	17 (32.7)	25 (42.4)	59 (32.8)	16 (25.4)	7 (63.6)	15.711 (0.015)
	No	65 (68.4)	86 (54.4)	35 (67.3)	34 (57.6)	121 (67.2)	47 (74.6)	4 (36.4)	
Drinking light and sweet tea	Yes	35 (36.8)	91 (57.6)	28 (53.8)	25 (42.4)	72 (40.0)	21 (33.3)	4 (36.4)	20.104 (0.003)
	No	60 (63.2)	67 (42.4)	24 (46.2)	34 (57.6)	108 (60.0)	42 (66.7)	7 (63.6)	
Eating dessert-type foods	Yes	56 (58.9)	112 (70.9)	34 (65.4)	24 (40.7)	86 (47.8)	39 (61.9)	6 (54.5)	27.351 (0.000)
	No	39 (41.1)	46 (29.1)	18 (34.6)	35 (59.3)	94 (52.2)	24 (38.1)	5 (45.5)	

Discussion

Discussion of Traditional Practices Related to Puerperant

Traditional practices are carried out in most parts of the world for treatment and protection. These practices may differ within the same society according to region, territory, family structure, and personal beliefs.¹² According to the distribution between regions by the traditional methods used most by the women, it was determined that there is a significant difference between preparing an ornamental bed with a red cover, covering a red cover on the head of the puerperal, putting a Quran, broom, mirror, etc. on the bedside of the puerperal, consuming plenty of water and sugary foods, putting comb and cutting tools next to the puerperal, not having sexual intercourse for forty days ($p < 0.005$).

In many studies conducted in the literature about the puerperal period, it has been stated that the tradition of not having sexual intercourse for forty days is applied.^{17,18} In a study conducted in 2014, this rate was found to be 82.5%.¹⁹ Our study revealed similar results to the literature and showed interregional differences. Not having sexual intercourse during the postpartum period for forty days is among the traditional practices that are beneficial for health because the anatomical and physiological changes that occur in a woman's body during pregnancy return to their former state during the six-week postpartum period. Additionally, lacerations may occur during childbirth, the risk of infection during the postpartum period increases due to the episiotomy wound or the open blood vessels in the separation area of the placenta, and sexual intercourse may be painful as a result of decreased tone in the perianal muscles.¹⁸

In a study conducted by Altuntuğ et al. (2018), it was stated that 92.4% of puerperants consumed juicy and 87.3% consumed sweet foods.¹⁹ Among the applications made to have plenty of milk throughout Turkey so that the newborn can grow and develop with full of enjoyment, there are practices such as drinking puerperal sorbet by 47%, feeding the puerperant with everything she wishes so that she does not suffer from lack of anything she desires by 54.4%.^{20,21,22,23} Our research results are similar to the literature, and considering that 2500-3000 ml of liquid should be consumed during the puerperal period and 600-700 more calories should be added to the daily requirement during the puerperal period, it can be said that these applications are beneficial.

Ergün et al. (2018) conducted a study in which 24.2% of women during the puerperal period resorted to applications such as putting a Quran, broom, mirror, etc., at the bedside of puerperal.¹⁸ It is observed that this application is performed frequently in the literature.^{24,25} Our study result supports the literature and suggests that these traditional applications are harmless for health and can be made according to the grade of people's belief.

Discussion of Traditional Practices for the Newborn

In the current research, it was determined that there is a significant difference between the most commonly used traditional methods for the newborn period by women and "washing the newborn with salty water or rubbing with salt," "covering the newborn's face with yellow muslin," "dressing in yellow," "burying the newborn's umbilical cord in places such as mosques, schools," "giving the newborn sweet water, olive oil, herbal tea," "making 40th-day ceremony to the newborn" ($p < 0.005$). In a study conducted by Inci et al. (2019) in Batman, it was concluded that the practice of "washing the newborn with salty water or rubbing with salt (salting)" is excessive in the Southeastern Anatolia Region.²⁶ In different studies conducted in Tokat, Karaman, Kayseri, Şanlıurfa, Nevşehir, and Erzurum regions, the salinity ratios of the salty water used in washing the newborn are determined to be 64%, 58.9%, 44.4%, 25.7%, 39%, 17.5%, and 14.4%, respectively.^{27,28,29,30,31,32} The interregional differences observed in our research also support this result. Salting of the newborn is among the harmful traditional practices. Due to the sensitivity of the newborn's skin and dehydration from salting, this application should be avoided, and families should be informed about it.

In our country, traditional practices specific to the newborn are widely performed, such as keeping the newborn's umbilical cord, burying it, or making it fall early. Our research has also determined that practices such as burying a newborn's umbilical cord in places such as mosques and schools differ between regions. A 2012 study found that 48.2% of the respondents said that the newborn's umbilical cord should be buried in a mosque courtyard to give the child the wisdom of religious beliefs or in a schoolyard for a good education. The results of many studies in the literature show variability at the same rate.^{27,33} Storing or burying a newborn's umbilical cord is not a harmful practice that endangers the newborn's health. According to the transcultural approach, there are no disadvantages in applying such practices that are not harmful.

One of the mainly applied practices in the first rank for preventing the newborn from jaundice in our country is putting a yellow muslin on the face of the newborn.^{15,25,27,28,29,31,32,33} When jaundice occurs in a newborn, and it is necessary to be taken to a health institution to determine the bilirubin level in the blood and to decide on the treatment to be performed.^{29,32}

Our research results support that the yellow muslin tradition shows interregional variability and is often preferred in traditional practice. This application, which is applied at different frequencies in different regions, is not dangerous

for the health of a newborn. However, it is also not an effective method to treat jaundice. For this reason, it is important to inform women about neonatal jaundice before discharge.

Discussion of Traditional Practices for Breastfeeding Period

A significant difference was found between the traditional methods most commonly used by women for breastfeeding in the distribution between regions that are to make the mother or baby drink sweet water, not eating foods such as beans, chickpeas, grapes, milk that are considered objectionable, making mother drink puerperal sorbet, weak tea, and eat sweet foods ($p<0.005$). One of the traditional practices for increasing breast milk is making the puerperal consume plenty of fluid.³⁴ In the current study, 62.6% of women applied the traditional practice they do the most during breastfeeding: consuming hot milk and soup, etc. to increase breast milk. In a study by Myint et al. (2019), 29.8% of the participants stated that they drank milk to increase breast milk.³⁵ In a study conducted by Sarı et al. (2023) in Van and Istanbul, it was determined that 61.4% of women in Van consume bulgur rice to increase breast milk, while 58.8% of women in Istanbul consume apricot smoothies.³⁶ Although our research results are similar to the literature, it is thought that such applications may differ according to cultural changes between countries, regions, and cities, and the goal in all of them is to increase breast milk.

Of the women 50.2% participating in the current study did not eat such food considering eating beans, chickpeas, grapes, etc., objectionable. In the study of Ünver (2014), it is stated that an increase in the consumption of legumes by mothers increases breast milk at the highest rate of 90%.³⁶ It is thought that the differences between the regions of the current research may be due to the level of culture, access to health services, belief level in traditional practices, health literacy level, and differences in the number of participants between regions. Newborn feeding takes place with breast milk. As a result of the idea that colic pain may occur in the newborn when the mother consumes pulses or gas-producing food and beverages, it is believed that the women participating in the study expressed that these foods are objectionable.

Conclusions And Recommendations

Women who have given birth can resort to many traditional methods related to puerperal, breastfeeding, and newborn care during the postpartum period. However, some traditional practices may carry risk factors that may cause physical and mental adverse effects on the mother and the baby. In order to prevent the adverse effects of these practices to ensure the increase of positive practices, it is recommended to raise awareness of health professionals specialized in their field on this issue to determine the attitudes of individuals in traditional practices in pregnant and post-pregnancy training and to plan training for these practices. Raising the awareness of society and health professionals about traditional practices related to the puerperal period, breastfeeding, and newborn care has an important role.

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