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# Traditional and Complementary Breastfeeding and Weaning Practices Among Mothers in Northern Cyprus



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**Original Article** 

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### Abstract

**Objectives:** The study was conducted to examine the traditional and complementary practices used by women to increase breast milk and wean their children from breastfeeding.

**Materials and Methods:** This is a descriptive and cross-sectional study. The population consisted of 254 mothers aged 20-45 lived in Cyprus. Mothers who had breastfed and stopped breastfeeding were included in the study. The data were collected by using an introductory information form prepared based on the literature, about breastfeeding and weaning process. Descriptive statistics were used to assess the data.

**Results:** 64% of the participants started breastfeeding within the first hour of birth, 58% only breastfed for the first 6 months, and 16% breastfed for 24 months or more. Also women consumed mostly water and herbal tea (mostly fennel) and bulgur to increase breast milk.

**Conclusions:** Although it was determined that mothers did not use many traditional methods when weaning their children, it was a remarkable finding that weaning by talking to the child was used less. It is recommended that education and counselling services be increased in order to increase rates of exclusive breastfeeding for the first six months, and to follow evidence-based practices at the stages of increasing breast milk and weaning.

Keywords: Breastfeeding, Lactation, Mothers, Weaning, Methods

# Introduction

Breast milk is the best food all around the world that promotes child health and survival. It should be provided within the first hour of birth and continue up to 2 years (1). WHO & UNICEF recommend exclusively breastfeeding without any food and water for approximately 6 months (1). According to the guidelines, breastfeeding should be continued up to 2 years of age with complementary foods and drinks. After exclusively breastfeeding for 6 months, complementary feeding should be introduced to infants until they are able to eat like the rest of their family (1, 2). This is regarded as the transition period from exclusive breastfeeding to family foods (2). According to universal data, 43% of infants start breastfeeding in the first one hour, only 41% of them are exclusively breastfed for 6 months and 45% of them continue breastfeeding up to 2 years of age (1). Unfortunately, there has been no national study in Northern Cyprus that indicates the breastfeeding status of mothers. Moreover, the results of two studies which were conducted in two large hospitals in Northern Cyprus revealed that the rate of mothers that fed their children only with breast milk for 6 months was low (22.4%-41.7%) (3,4). Another study conducted by Şafak & Ata Tutkun in a private hospital with 187 mothers in Northern Cyprus indicated that the average duration for

exclusive breastfeeding was 3 months and total duration for breastfeeding was 8 months (5).

Although it has been proved that breastfeeding has a beneficial effect both on mothers and infants, several factors such as maternal/infant health problem, nipple infection, delayed skin to skin contact, minimal social support or perception of insufficient milk production may hinder breastfeeding (6). Especially, mothers who think that their breast milk is not enough may resort to consuming several traditional-cultural foods and herbal drinks to increase breast milk if they want to breastfeed their infants (7,8). Although starting and maintaining of breastfeeding is a process that requires great effort and patience, its termination is also seen as an important and difficult process for both mother and infant (7,9,10). Breastfeeding not only means feeding a child, but also has numerous psychological effects such as calming the child down when he/she is afraid, crying or in pain. For this reason, gradual weaning is a crucial process that affects the relationship between breastfeeding and the infant (7,9,11). Weaning practices can vary based on time and culture (12, 13). Studies have indicated that mothers use numerous traditional methods during the weaning and the method they use has difficulties in adapting the mother and the infant to this process (10,14). Stopping breastfeeding an

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#### Key Messages

- Mothers use traditional practices to increase breast milk. In general, women consume mostly water and fluids such as herbal tea (mostly fennel) and solid foods such as bulgur.
- The thought of insufficient breast milk is one of the reasons mothers wean their babies from milk.

infant/child with ineffective methods such as creating bad taste or images before the mother and her infant /child are physically, emotionally and mentally ready, can lead to the feeling of punishment, feelings of insecurity, and a psychological trauma (7,9,11,13,15). It can also cause the mother to feel guilty and have breast problems (15). In addition, early weaning from breast milk will lead to early transition to complementary foods. The duration of complementary foods are related with child's later life and development. Timely complementary feeding is very important to prevent malnutrition and overnutrition (2).

In Northern Cyprus, there are some studies on breastfeeding (16-19), but no studies were found on increasing the breast milk and weaning babies from breastfeeding. Knowing the traditional and complementary practices used by mothers to increase breast milk and wean their infants from breastfeeding, would guide professionals to plan training and consultancy services. According to that mothers do not adversely affect their and their child's health (14,15). In Northern Cyprus, there are studies on breastfeeding but no studies were found on increasing the breast milk and weaning babies from breastfeeding. The aim of this study is to examine the traditional and complementary practices by women aged 20 to 45, who are breastfeeding and live in Northern Cyprus, to increase breast milk and wean their children from breastfeeding. For this purpose, in the study, following questions were asked; "What traditional and complementary practices do mothers use to increase breast milk?" and "What traditional and complementary practices do mothers use to wean their children from breastfeeding?"

# **Materials and Methods**

# Study Design

The study was conducted with descriptive and crosssectional design.

# Population and Sample

The study included mothers aged 20 to 45 residing in Northern Cyprus. Between June 30, 2021, and November 5, 2021, a total of 254 individuals were reached based on pre-determined criteria. The sampling error of the study was 6.15%. The inclusion criteria required participants to have stopped breastfeeding and to be currently breastfeeding their youngest child, if they had more than one child.

# Data Collection Tools and Process

The researchers collected the data by using an introductory information form (7,9,11,13-15) prepared based on the literature, an information form on the breastfeeding process, and the forms of determining the methods of increasing breast milk and weaning. The introductory information form consists of 8 questions in total, such as the mothers' age, education level, marital status, nationality, employment status, income perception, number of children, and residence region. There are totally 10 questions on the information form on the breastfeeding process related to the status of receiving breastfeeding information/support and the source of that information/support, the time to begin breastfeeding, the time to begin complementary food and the type of this food, the status of being exclusively breastfed for the first six months, the average duration of breastfeeding, the state of having problems during breastfeeding and the problems experienced, and the reason for weaning/stopping breastfeeding. The data collection form includes five questions about traditional and complementary practices used to increase breast milk and it includes totally seven questions about traditional and complementary practices used to wean their child from breastfeeding. Google forms were used to prepare data collection forms. Researchers collect data through various online channels, such as social media, whatsApp, email, etc. It took approximately five minutes to fill out all the forms. Views of three experts were taken about the data collection forms. The data were collected between 30/06/2021 and 05/11/2021. As the study data was collected online, the researchers' access was limited to the online environment and the circle that they could reach through online sharing.

### Data Analysis

In the study, the data obtained were analyzed statistically using the Statistical Package for Social Sciences (SPSS) 20.0 software. Descriptive statistics analyses, such as percentages and means, were employed to evaluate the socio-demographic characteristics of women, data on the breastfeeding process, as well as the methods of increasing breast milk and weaning.

#### Results

The population consisted of 254 mothers aged between 20-45 years. Their mean age was  $35.91\pm5.33$  years. It was determined that 92% of the women had a bachelor's degree or higher education and were married, 88% of them were employed, 68% perceived their income level as a medium, and around half of them (51.1%) had two children.

It was determined that 69% of the participants (88%) received information on the breastfeeding process from the healthcare professionals. When the breastfeeding behaviours of women were examined, it was determined that 64% of the women began breastfeeding their infants within the first hour of birth, 58% exclusively breastfeed

their child for the first six months, and 16% breastfed their child for 24 months or more.

Table 1 shows the traditional and complementary practices of women to increase breast milk. Almost all of the women (93%) consumed fluids to increase breast milk, and the first three rankings of these fluids were water, herbal teas, and commercially sold lactation teas. Fennel is reported to be the most consumed herbal tea. It

Table 1.	Cultural	and	Complementary	Practices	to	increase	breast	milk
(n=254)								

	Number (n)	Percent
Practices to increase breast milk*		
Drink liquids	237	93.31
Frequent breast feeding	95	37.40
Using breast pump	79	31.10
Eating some specific foods	70	27.56
Longer breastfeeding	44	17.32
Massaging the breasts	32	12.60
Type of liquids*		
Water	237	93.31
Herbal Tea	167	65.75
Commercially sold lactation tea	102	40.16
Malt drinks	47	18.50
Fruit juice	35	13.78
Milk	35	13.78
Type of herbal tea*		
Fennel	167	65.75
Anis	56	22.05
Linden	36	14.17
Sage	7	2.76
Rosehip	7	2.76
Type of foods*		
Cracked Wheat (Bulgur)	78	30.71
Compote	65	25.59
Milky desserts	64	25.20
Nuts	63	24.80
Onion - garlic	62	24.41
Green vegetables	45	17.72
Date	44	17.32
Honey – molasses	43	16.93
Raisins	36	14.17
Oat	32	12.60
Sesame	14	5.51
Effectiveness of the practices		
Effective	197	77.56
Not effective	42	16.54
Don't understand	15	5.90

\* Multiple answers were given, percentages were calculated according to n.

was determined that the eating of bulgur, compote, and milk desserts was used to increase breast milk among solid foods (Table 1). It was noteworthy that 37% of the women began eating complementary foods within the first four to six months.

Table 2 shows the information on the traditional and complementary practices of mothers to wean their children from breastfeeding. The infant's age that reached weaning (37.8%), natural weaning (29.5%), and insufficient breast milk (22.8%) ranked the first three among the causes for weaning in the study. It was determined that the participants mostly weaned their children from breastfeeding gradually (58%), and trying to get the child used to by giving liquid and solid foods, using a bottle, and talking to the child ranked the first three for the weaning methods used (Table 2). 12.8% of mothers who used the method of weaning did so by administering a frightening, unattractive, and taste-changing (sour, bitter) substance. Applying tomato paste, shoe polish, carbonate, coffee grounds on the breast and placing a band-aid, wool, hair on it are given as practice examples (Table 2). It was discovered that the majority of mothers who used the abrupt weaning and progressive weaning methods achieved success in less than one month (67%) (76.5%) and had no problem (93%) following weaning (Table 2).

# Discussion

Breastfeeding practices are crucial for mothers and babies. Maternal confidence or self-efficacy is very important for this process. As a result, development of educational programs by healthcare professionals to support mothers and improve their knowledge and awareness about breastfeeding before, during and after birth is so beneficial (20). In this study, majority of the mothers (69.29%) got information about breastfeeding and 88.07% of the participants got information from healthcare professional.

It is well known that breastfeeding initiation within the first hour of life, is recommended by WHO and UNICEF (1). According to the data given by Republic of Cyprus Ministry of Health, 39.1% of mothers living in southern Cyprus breastfed their infants within the first 48 hours after birth in 2017 (21). Also this rate was found to be minimum 9.9% and maximum 92.4% in a systematic review (22). In the present study, the rate of women breastfed their infants within less than 1 hour and between 1-24 hours after birth was 64.58% and 24.41%, respectively. Also almost half of the participants (58.66%) breastfed their infants exclusively for 6 months and continued breastfeeding up to 24 months of age. Another study conducted on 187 mothers in Northern Cyprus reported that the average duration for exclusive breastfeeding was 3.29±0.17 months and average total breastfeeding duration was 8.10±0.57 months (5). In Southern Cyprus, 36% of the mothers were still breastfeeding their infants for the first six months and 4.7% were still exclusively breastfeeding their infants (21). For Turkey, min and max values for Table 2. Cultural and Complementary Practices to Weaning Practices of the Participants (n=254)

	Number	Percent
Reason for weaning child		
Reached weaning age	96	37.8
Child refused to feed	75	29.5
Not enough milk	58	22.8
Health problems of mother/baby	11	4.3
New pregnancy	8	3.4
Return to work	6	2.4
Type of weaning practices		
Sudden	31	12.2
Gradual	148	58.2
Child refused to feed (The child's self-cessation of breastfeeding)	75	29.5
Weaning practices (n=179)*		
Trying to get used to by giving liquid and solid food	82	45.8
Bottle feeding	32	17.9
Talking to the children	31	17.3
Applying a substance (sour/bitter) to the nipple to change the taste of milk (tomato sauce, coffee grounds, baking soda)	10	5.5
Applying a substance to the nipple to create a frightening effect (shoe bay)	8	4.5
Stay away from child	6	3.4
Putting a substance to the nipple to create a repulsive effect (hair, cotton, bandage etc.)	5	2.8
Using a pacifier	5	2.8
Effectiveness of the practices (n=179)*		
Effective	137	76.5
Partially effective	37	20.7
Not effective	5	2.8
Duration of weaning (n=179)*		
Less than 1 month	120	67.0
1-2 months	36	20.2
2-3 months	9	5.0
More than 3 months	14	7.8
Problems after weaning (n=254)		
No problem	237	93.3
Physical problems	4	1.6
Psychological problems	5	2.0
Unwanted habits	8	3.1

\* Sum of the responses for sudden weaning practices and gradual weaning practices.

duration of breastfeeding were found as 3.45% and 17.7%, respectively and the rates of exclusive breastfeeding for 6 months were indicated as 8.7% for minimum value and 67.1% for maximum value (22). In both studies, the most commonly reported reason for weaning was determined as insufficient milk (21,22). Apart from these results, the main breastfeeding problem was determined as nipple problems and mastitis in this study.

Most of the mothers especially new ones often worries about their milk supply and they feel as though they don't have enough milk for their infants (7,8). For this reason, they consume different foods and beverages that can vary from culture to culture in order to increase their milk supply. According to the Cochrane's review, interventions involving initiation of pumping, increased frequency of pumping, relaxation, music, warmth, and massage might support breastfeeding (23). A study conducted in Turkey reported that 99.4% of mothers frequently breastfeeding and 51% of mothers consumed plenty of fluid in order to increase their milk supply (24). In this study, 93.31% of the mothers preferred to drink fluids and 37.40% of mothers preferred frequently breastfeeding. At different times, various foods and beverages such as garlic, sesame, milk, and collagen soup were identified as galactagogues (lactogenic) (25). In a recent review article, dates and fennel tea were recommended to the breastfeeding mothers (26). Furthermore, two studies conducted in Turkey reported that while fennel tea, linden, compote, fruit juice were the most popular beverages, onion, desserts, bulgur pilaf, and figs were the most popular foods (24-27). The results of this study revealed that water, herbal tea mainly fennel tea, bulgur pilaf, compote and milk desserts were mostly preferred by mothers to increase their milk fsupply. Also in this study, majority of the mothers (77.56%) found these practices effective. Likewise, the only study conducted in this topic in Northern Cyprus indicated that the most popular practices to increase milk supply were drinking plenty of fluid and eating desserts and onions (28).

The findings of the study have revealed that 70% of the mothers used traditional or complementary weaning practices, and the majority of them had no problems. The rest ones stopped breastfeeding when their infant no longer wanted it. The fact that around 34% of mothers breastfed their infant for 18 months or more might have reduced the infant's interest in breast milk, and hence no method might have been used. Trying to adapt the child by giving liquid/solid foods and feeding by a bottle ranked the first two among the weaning methods used by the mothers, and this result is compatible with similar research findings in Turkey (7,24,29). The traditional weaning methods used in the study included applying tomato paste, coffee grounds, shoe polish on the breast, and placing band-aids, wool, and hair on the breast, which is similar to the studies (7,15,24-29). A study conducted in Nigeria (14) reported that women mostly used the weaning method of applying hot pepper on the breast, which is different from the present study. The mothers in this study less used traditional practices included in the abrupt weaning methods. This was thought to be associated with high level of education of the majority of the women and being informed by the healthcare professionals about breastfeeding.

The study noted that most of the mothers who used a weaning method reported using a gradual method and that 17% of them tried to wean their child from breastfeeding by talking to them. To prevent the children from thinking that their mother does not want them, it is critical to make appropriate explanations for the child's development during the weaning process, as well as to draw pictures and utilize books when communicating with the child.

In the study, the mothers' belief that their breast milk was insufficient was one of the reasons for weaning and one of the breastfeeding problems. This problem, in particular, may have affected the decrease in the rate of exclusive breastfeeding for the first six months of the mothers who participated in the study. The studies underline that the belief that mother's milk is insufficient is a major problem (7,8,29). Since the concept of insufficient milk supply is a situation that can be decided according to the development of the infant and insufficient milk secretion is a very rare problem, it is considered important to convince mothers that their milk are valuable and sufficient (7).

Besides the processes of initiating and maintaining breastfeeding, difficulties in the adaptation of mother and the infant after stopping breastfeeding may be experienced (10,14). Mothers may require information and support (15). Breastfeeding counsellors, midwives, and nurses have many duties and responsibilities during these processes. In this study, the fact that 88% of the mothers stated that they received information from health professionals about the breastfeeding process and that they mostly did not have any problems in stopping breastfeeding was a result of the responsibilities of the healthcare professionals significantly affecting this. These results may raise awareness of delivering adequate breastfeeding training and initiating counselling services in primary and secondary healthcare services in Northern Cyprus.

### Conclusion

It was determined that women consumed mostly water and fluids such as herbal tea (mostly fennel) and solid foods such as bulgur to increase breast milk. Although it was determined that they did not use many traditional methods when weaning their children from breastfeeding, the weaning by communicating with the child, was used less. It's recommended that education and counselling services be increased in order to implement the necessary procedures to increase rates of exclusive breastfeeding for the first six months, and to follow evidence-based practices at the stages of increasing breast milk and weaning.

#### Authors' Contribution

Dilek Sarpkaya Güder: Designed, literature review, data collection, writing.

Nezire İnce: Literature review, data collection, analysis, writing.

#### **Conflict of Interests**

Authors declare that they have no conflict of interests.

#### **Ethical Issues**

Prior to conducting the study, consent was obtained from the mothers who indicated their agreement on the form. Additionally, approval was granted by the scientific research evaluation ethics committee of the university (YDU/2021/92-1363). It should be noted that the manuscript has not been published previously, nor is it currently under consideration for publication elsewhere.

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