

# Wet Nursing in the Muslim Community from a Health Perspective

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## Abstract

Since ancient times, breastfeeding and wet nursing have been synonymous. The two most commonly used approaches are direct breastfeeding and feeding expressed milk from a wet nurse, and their applicability varies by population. The most recent applicable research has shown that throughout cultures, there is a mutual understanding of the characteristics, benefits, and challenges of wet nursing practise. Instead, there is a lot of discussion about direct wet nursing and the indirect approach (donor human milk feeding) for feeding babies or sharing in the community. Despite the absence of practical guidelines, direct wet nursing is widely considered to be a healthy practice. Generally, wet nursing is in line with Islamic teachings based on mutual help. Breast milk is known to be very nourishing for the physical and mental health of babies as well as very small children, so it is essential to enhance awareness among Muslim women so that Muslim infants consume more breast milk rather than infant formula. Wet-nursing research and concerns could continue to benefit society significantly.

**Keywords:** breastfeeding, wet nursing, Muslim community, Health perspective

## INTRODUCTION

Breastfeeding and wet nursing have been synonymous since ancient times. Direct breastfeeding and feeding expressed milk from a wet nurse are the two methods currently used, and their applicability varies by community. In medicine, literature is scarce on wet nursing. Many previous studies on milk child have been conducted. Briefly, past research had discussed mothers' understanding of the wet-nursing concept, studied mothers' knowledge concerning breastfeeding exclusively, the attitude and practice of mothers who feed with their breast milk, duration of practice, rights and duties in feeding, challenges for career mothers as well as the factors of not continuing to breastfeed [1-5].

## DISCUSSION

In Malaysia, wet nursing practice is on the rise due

to the emergence of public awareness about the importance and benefits of breast milk [6]. Wet nursing is a valuable option for healthy infant nutrition. Mother's breast milk is scientifically proven to contain nutrients and other essential substances for infants' physical and mental development in their growth process [7-8]. Breast milk has also been discovered to strengthen infants' antibodies or immunity to harmful diseases [9-11]. Since more people are learning about the advantages of breast milk for babies, mothers who cannot breastfeed their babies are hiring wet nurses or purchasing breast milk from other women. This practice has given rise to the phenomenon of wet nursing. In Islam, a discussion about breastfeeding is critical to the law as it affects *nasab* and ancestry as described in the Quran. Basically, the law on wet nursing is about *mahram* (umarriageability). A

child fed with another woman's milk becomes her milk child permanently. The milk son/daughter is permanently forbidden to marry the milk mother or milk father and their offspring or descendants due to their blood ties. Their sons and daughters are also *mahram* (unmarriageable). Their milk kinship does not nullify ablution as they are allowed to mix as milk siblings, subject to *awrah* limits (or *hijab* rules), just as the milk son/daughter would with his own biological siblings. The milk mother's lineage whom the milk son/daughter is forbidden to marry is her siblings, her sons and daughters, her female grandchildren, and the mother of the milk mother. Likewise, the milk father's lineage to whom the milk son/daughter is mahram (unmarriageable) includes the milk father's siblings, his daughters even from another wife, his female grandchildren, and his mother. This is the consensus of the four Sunni schools of law, Shafi'i, Hanafi, Maliki and Hanbali [12-13].

The law also provides conditions for wet nursing that need to be understood to establish an infant's status as a milk child legally. The conditions that need to be met to establish a valid milk kinship status relate to a woman's breast milk, amount of feeding, infant age while feeding and mode of feeding [14]. According to Shafi'i and Hanbali school of law, infants need to be satiated five or more times to establish milk kinship between the woman and the infant [15]. In the case of feeding method, there were two methods of feeding agreed by the majority of Scholars to make the baby mahram through breast milk. They were feeding directly from the breast and breastfeeding indirectly with the aid of breastfeeding such use tubes, bottles, Supplemental Nursing System (SNS) and the like with the proviso that the baby milk must reach the stomach [16]. As shown in a survey on wet nursing practise among Muslim wet nurses in Selangor, Malaysia [17], 43.0% of respondents had breastfed at least one child who was not their own. Meanwhile, there were 3.0% of the respondents nursing seven to ten other children. A total of 237 children have been breastfed by the respondents (n=100). This phenomenon seems to be increasingly acceptable to the present Muslim community in Malaysia, mainly due to the desire to help sick infants overcome health problems. In matters of guardianship, lineage, and succession, the Muslim culture, too, needs to know the rule on

feeding breast milk to someone else's child. According to Nanang[18], there were two reasons that marriage is banned: sibling and breastfeeding.

The most recent applicable research has shown a shared understanding of the features, advantages, and difficulties of wet nursing practise across cultures. Instead, there is a considerable amount of discussion on the direct wet nursing and indirect method (donor human milk feeding) in feeding infants or sharing in the community. Despite the absence of practical guidelines, direct wet nursing is widely considered to be a healthy practice. According to one study in Malaysia, 58.0% of wet nurses gave breastmilk by direct breastfeeding [17]. Compared with feeding expressed milk, several studies of the health and disease outcomes have indicated the benefits of direct breastfeeding in terms of the following situations: (1) In terms of minimising the chance of otitis media, direct breastfeeding is preferable to feeding expressed milk [19]; (2) Direct breastfeeding's suckling process aids in the regulation of satiety and the avoidance of accelerated weight gain [20-21]; (3) Milk expression and storage, unlike direct breastfeeding, necessitate the use of technology [22]; and (4) In crises, the child population is especially vulnerable to morbidity and mortality [23]. As a result, promoting overt breastfeeding and wet nursing activities could save the lives of these infants [23-25].

According to the findings of a study on wet nursing practise among Muslim milk mothers in Selangor, Malaysia [17], the reason for the mothers to breastfeed other children is to support mothers who do not have enough milk (92.0%; mean = 3.36), while 73.0% said they do so out of sympathy for children whose mothers have health problems (mean = 3.01). This practice is a good deed, as the intention is to help others in need. The majority of research respondents, namely 84.0%, feed someone else's infant because they have surplus milk (mean=3.18). This is also a good practice in not letting surplus milk go to waste and sharing sustenance of abundant or excessive milk bestowed by feeding the surplus to someone else's child. Generally, wet nursing is in line with Islamic teachings based on mutual help. Awareness such as this is important to be nurtured among Muslim women so that Muslim infants drink more breast milk rather than infant formula, as it is known that breast milk is very nourishing for the physical and mental health of

babies and very young children [1, 26]. This finding shows that research respondents are more inclined to do good to fellow Muslims by helping other mothers in feeding their infants with breast milk.

The feeding of expressed human milk from a donor (wet nurse) is another form of wet nursing. This procedure is particularly important for high-risk babies, especially those born with a low birth weight [27]. This is because premature babies have a hard time sucking at the breast, and certain mothers are unable to supply sufficient amounts of their own milk. Experts recommend that high-risk babies be fed donor human milk collected from milk banks [27-28]. A study on wet nursing practice among Muslim milk mothers in Selangor, Malaysia [17] showed most respondents provided breast milk using bottles (82.0%). While 11.0% of respondents use a cup to feed the child, 10.0% were using a syringe. Only 8.0% of respondents used a tube (Supplementary Nursing System) to deliver milk to their milk child.

Nevertheless, the American Academy of Paediatrics discourages the practice of informal milk sharing because of the increased risk of bacterial and viral infections, the transfer of drugs or medications, and the presence of cow milk protein. In fact, the practice of feeding expressed milk is also now observed with normal newborns in a nursery [29], and informal milk sharing is observed in some communities [30-31]. However, the concept of feeding donor milk to sick infants is not acceptable in certain communities [32]. Based on Taqwa [33], Malaysia is also not allowed to establish a milk bank.

Finally, in the context of Muslim communities, milk kinship should not be considered an obstacle to wet-nursing; indeed, it should be addressed as a convenient feature that can expand human relations between the wet nurses and the receiving families. Research and issues pertaining to wet-nursing might continue to bring a great deal of good to the society. The options for wet nursing vary in quality, feasibility, customs, and cost across communities; this is in addition to the physiological variabilities of lactation. Direct wet nursing is a valuable resource that should be encouraged with appropriate support from the medical community. Islam supports breastfeeding from mothers as well as from wet nurses. However, the

parents must know the human milk donors' identity as a mark of respect for the kinship created between the wet nurse and the infant according to Islamic law.

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