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Exclusive Breastfeeding In Islamic Perspective And Health Science

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Abstract–Exclusive breastfeeding for six months has been proven to provide various benefits for both infants and mothers. In Indonesia, the coverage rate of exclusive breastfeeding still falls short of the national target. This study aims to describe exclusive breastfeeding from two primary perspectives: health science and Islamic teachings. This interdisciplinary approach is expected to strengthen public understanding and support the creation of a physically and spiritually healthy generation. The research method employed is a literature study that involves analyzing previous research on the benefits of breastfeeding from both Islamic and health science perspectives. Breastfeeding in Islam is carried out as a form of fulfilling Allah's command to preserve offspring. Additionally, the benefits of breastfeeding are numerous. The benefits can be seen from the health aspect, such as fulfilling nutritional needs and supporting the child's psychological development. This interdisciplinary study is expected to enrich scientific insights regarding the importance of exclusive breastfeeding from both health and religious perspectives.
Keywords: Breastfeeding, Islam, Health, Interdisciplinary.

I. INTRODUCTION

Breast milk plays a central role in ensuring the optimal growth and development of infants, as it is the first natural source of nutrition and contains biological properties that cannot be replaced by formula milk or any artificial substitutes currently available. The nutritional composition of breast milk has been biologically and divinely engineered by Allah to perfectly match neonatal physiological needs from the very first day of birth, making it a unique adaptive biological system that dynamically changes its components based on infant age, stage, immune status, and environmental exposure [1]. This natural mechanism therefore not only fulfills basic nutritional functions but also provides biological protection that modern biotechnology and synthetic formulations have yet to reproduce or simulate with equal precision [2], making breast milk the most ideal food for newborns.

Breast milk also plays a significant role in establishing the early immune system, supporting neurocognitive brain development, and strengthening emotional bonding between mother and child in a way that builds long-term mental health capital. The bioactive components in breast milk, such as hormones, living enzymes, antibodies, growth factors, oligosaccharides, and natural probiotics are critically responsible for maintaining the stability, composition, and resilience of the infant's gut microbiota ecosystem, which becomes the foundation of lifelong health [3]. Recent studies further confirm that breastfeeding duration correlates positively with children's cognitive and socio-emotional outcomes [4], [5]. This demonstrates that breastfeeding is not merely a means of delivering nutrition, but a psychoneuroimmunological shaping process that affects the infant's biobehavioral system at cellular, neuroendocrine, and affective levels simultaneously.

In the first six months of life, infants experience a critical developmental window during which immunological vulnerability is exceptionally high, and the risk of infection, malnutrition, and inflammation-related disorders is significantly increased. Therefore, exclusive breastfeeding becomes the best physiological strategy to guarantee the complete fulfillment of macro and micronutrients without contamination or nutritional imbalance [6]. During this exclusive period, no additional food, water, supplements, or other

substances can compete biologically with breast milk, as its molecular structure and functional composition are evolutionarily designed to protect newborn life with maximum efficiency and minimal metabolic burden [7].

Exclusive breastfeeding for six months also provides substantial benefits for mothers, both physically and psychologically, making breastfeeding a reciprocal health investment for mother and child. The process of breastfeeding accelerates uterine involution, normalizes hormonal homeostasis after delivery, stabilizes maternal emotional regulation, and significantly reduces lifetime risk of breast cancer, ovarian cancer, and postpartum metabolic disorders up to long-term adulthood [8], [9]. Consequently, breastfeeding must be understood as a dual-directional health intervention that supports maternal recovery, promotes emotional connectedness, and strengthens long-term public health outcomes for two generations simultaneously [10].

Global WHO population data consistently show that more than 800,000 child deaths under five years of age could be prevented annually if exclusive breastfeeding were optimally implemented and practiced across countries [11]. Unfortunately, in Indonesia, the prevalence of exclusive breastfeeding has still not achieved the national target and remains inconsistent across provinces and diverse socio-cultural contexts [12]. The barriers are not solely related to maternal knowledge, but also influenced by structural, cultural, mythological, and work culture pressures that shape maternal decision-making in everyday life [13], indicating that breastfeeding behavior is deeply socio-behavioral, not only biomedical.

This condition underscores the need for an interdisciplinary scientific approach to enhance collective awareness and transform breastfeeding practices on a population scale. Biomedical knowledge is essential but insufficient without being backed by moral meaning, a value system, identity, and cultural legitimacy. Islamic perspectives can strengthen breastfeeding motivation by anchoring it within transcendental meaning, divine law, theological commitment, and moral accountability, thereby creating a stronger internal drive that is not easily defeated by social pressure or commercial infant formula influences [14].

From the religious perspective, Islam clearly establishes breastfeeding as a rights-based obligation of parents toward children. The Qur'an explicitly states that the ideal duration of breastfeeding is two full years, and the sayings of Prophet Muhammad reinforce breastfeeding as a virtuous, meritorious, and rewarded act [15]. Islam, therefore, constructs breastfeeding as an ibadah that generates both spiritual merit and physiological benefits, positioning it not merely as a biological necessity but as a moral act related to the protection and continuity of human lineage.

Islamic law positions breastfeeding not only as a biological act, but as an act of worship, full of blessings and long-term spiritual and social impact. Breastfeeding is categorized within *hifẓ al-nasl* (protection of progeny) which is one of the core objectives of the *Maqaṣid al-Shari'ah*, making breastfeeding a sacred parental responsibility, emotional expression of compassion, and an act that contributes to building a morally strong, healthy, and resilient generation [16]. Thus, breastfeeding becomes an integrated spiritual-ecological system that supports individual health and the collective future of the ummah.

Hence, examining exclusive breastfeeding through an interdisciplinary perspective that integrates Islamic teachings and health science becomes essential and strategic. This approach strengthens the normative theological foundations for Muslim communities, enriches scientific health promotion, and supports evidence-driven, culturally embedded intervention models that can improve breastfeeding practices sustainably at the societal level.

This research is therefore conducted using a literature review methodology that systematically analyzes previous studies regarding the benefits of breastfeeding from Islamic perspectives and Islamic jurisprudence, alongside empirical biomedical evidence from the health sciences. The results of this interdisciplinary study are expected to enrich scientific discourse, expand the repertoire of Islamic biomedical epistemology, and contribute to improving health outcomes for the Muslim population, ultimately fostering a future generation that excels physically, intellectually, mentally, and spiritually.

II. RESEARCH METHOD

This study employed a literature review research design. The literature review was conducted by identifying, selecting, analyzing, synthesizing, and interpreting previous research related to exclusive breastfeeding from two perspectives, namely Islamic teachings and health science. The review focused on empirical research articles, textbooks, and scientific publications that discussed

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breastfeeding, maternal-infant health, and Islamic perspectives on *raḍa'ah* [17], [18]. Sources were obtained from nationally accredited journals and internationally indexed articles [19].

The inclusion criteria consisted of references that specifically examined exclusive breastfeeding practices, benefits, determinants, and religious views regarding breastfeeding in Islam, including its relation to *maqaṣid al-Shari'ah* and parental obligations [20]. Meanwhile, publications that only discussed formula feeding, artificial feeding, and partial breastfeeding without relevance to exclusive breastfeeding were excluded. Screening was conducted based on the relevance of the topic, the abstract content, the year of publication, and the research quality [21].

Data extraction was performed by categorizing findings into two analytical domains: (1) Health science findings, which focused on physiological benefits, nutritional fulfillment, breast milk production, bonding, and child psychological development [19]; and (2) Islamic perspective findings, which examined breastfeeding commands, values, wisdom, and regulations based on the Qur'an and its interpretation [17], [18]. The data were then compared, synthesized, and interpreted using a narrative synthesis approach [21].

The analysis was conducted through thematic content analysis, allowing for the identification of similarities, differences, strengthening patterns, and complementary conclusions from both perspectives. The interdisciplinary interpretation in this study emphasizes integration between Islamic norms and scientific evidence to produce a more holistic understanding [20]. The review results then became the basis for discussion and conclusion related to the urgency and relevance of exclusive breastfeeding as an effort to build a healthier and more spiritually grounded generation [19], [21].

III. RESULTS AND DISCUSSION

Exclusive Breastfeeding from the Perspective of Health Science

Exclusive breastfeeding refers to providing breast milk without mixing with any other foods or drinks, and without introducing formula milk, solid foods, or plain water. During the first six months of life, exclusive breastfeeding is one of the most crucial infant care practices acknowledged by major health organizations worldwide. According to the recommendations of the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO), babies should receive only breast milk from birth until six months of age. They should be breastfed frequently without time restrictions. Starting from six months onwards, infants receive complementary feeding according to their age, but breastfeeding should continue until two years of age or beyond [22], [23].

To ensure infants receive adequate nutrition during growth and development, exclusive breastfeeding during the first six months of life is one of the efforts to prevent stunting [23]. Breast milk is the primary nutritional source for babies and is widely recognized as essential for ensuring optimal growth and development. Exclusive breastfeeding has a positive impact on preventing infectious diseases. Secretory IgA, a type of antibody, plays a role in protecting against infections. In addition, breast milk contains antibacterial and antiviral substances such as lysozyme, lactoferrin, and specific fatty acids that work to fight pathogens [24]. Therefore, exclusive breastfeeding not only provides optimal nutrition but also protects babies from infections through various defense mechanisms contained within it [25].

If breastfeeding continues until around two years of age, breast milk can help increase emotional intelligence in both the mother and child. A baby who remains close to their mother feels affection, security, and comfort, and can recognize their mother's heartbeat which they have known since they were in the womb [26]. The breastfeeding process creates emotional bonding between mother and baby, generating a sense of safety and comfort for the infant [27]. Skin-to-skin contact fosters a strong attachment between mother and baby. Attachment is an essential process in forming healthy and harmonious parent–child relationships. With strong attachment, children feel safe and protected, while parents experience a deep emotional bond with their child [27]. This creates a solid foundation for harmonious relationships in the future.

Previous research consistently confirms that exclusive breastfeeding provides broad benefits for the baby's health and development, protects against disease, supports maternal postpartum recovery, and also offers positive economic impact [28]. One of the obstacles to breastfeeding is insufficient breast milk production. Internal factors that influence milk production include the

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mother's physical condition, psychological state, knowledge, and physical characteristics of the baby. External factors include early initiation of breastfeeding and frequency of breastfeeding. To produce more breast milk, mothers must breastfeed frequently and regularly [29].

Two hormones influence breast milk production. The first is prolactin, produced by the pituitary gland, which stimulates the production of breast milk. The second is oxytocin, which stimulates the release of breast milk [30]. The synergy between oxytocin and prolactin supports the smooth production of breast milk. Oxytocin arises from feelings of happiness, calmness, relaxation, sincerity, and confidence [31]. Prolactin is stimulated from frequent breastfeeding—the more frequent breastfeeding occurs, the greater the milk production based on the supply–demand mechanism [32].

Factors that lead to inadequate breastfeeding include perceived insufficient milk supply, lack of knowledge, lack of family support, and hospital policies that do not support lactation [33]. Additionally, milk production is decreased due to maternal nutritional status before, during, and after pregnancy, as well as during breastfeeding. Family support plays an important role in the success of exclusive breastfeeding. Family support refers to emotional and psychological encouragement given to breastfeeding mothers [34]. This is closely related to thoughts, emotions, and sensations that facilitate milk production. This support may include breast milk boosters, lactation massage, material support, and psychological support from husbands, parents, in-laws, neighbors, colleagues, and others [35].

Furthermore, when mothers return to full-time work before the baby is six months old, exclusive breastfeeding often does not run as expected. Fatigue from working throughout the day, coupled with inadequate dietary intake, will affect the smooth production of breast milk [36].

The Islamic Perspective on Breastfeeding

The legal basis for breastfeeding in the Qur'an is found in Surah Al-Baqarah, verse 233. There are different interpretations among *mufassir* regarding the concept of breastfeeding in this verse. Imam Al-Qurthubi explained that the word *yurdi'na* is a declarative word with the meaning of command, implying obligation for some mothers and recommended (*sunnah*) for others due to possible valid excuses [37]. Some *fiqh* scholars argue that breastfeeding is not obligatory but recommended because if the mother cannot breastfeed, the father must seek a wet nurse. The duration of breastfeeding is two years [38].

Imam Ibn Kathir explained in the interpretation of Surah At-Talaq verse 6 that when there is disagreement between divorced spouses, it is permissible to breastfeed the child through another woman (a wet nurse). This disagreement relates to provisions of financial support from husband to wife and child. However, if the mother agrees with the financial support, she has the right to breastfeed her child. This also applies to married couples who are not divorced, where difficulties may occur, such as maternal health problems preventing breastfeeding directly. The main point is that breast milk should not be replaced with other foods and drinks for infants [38].

The concept of breastfeeding from the perspective of Child Protection *Fiqh*, as outlined by the Majelis Tarjih & Tajdid PP Muhammadiyah, states that the child's interest is the primary basis for decision-making related to them. This relates to Allah's command in Surah Al-Baqarah, verse 233. According to Muhammad Tahir ibn Asyur in *Tafsir At-Tahrir wa At-Tanwir*, the husband is obliged to provide for his wife who is breastfeeding as a form of guaranteeing the child's rights [39]. This is because breastfeeding is essential for the child as part of preserving lineage (*hifzh al-nasl*).

The quality of breast milk is also influenced by the nutritional intake of the breastfeeding mother [40]. Thus, the obligation of husbands to provide for their wives is part of the obligation to preserve the child's life. The obligation to provide support applies universally to the family, even though the verse contextually speaks of divorced parents [39].

Children have the right to receive adequate nutrition. This begins primarily with proper breastfeeding, as contemporary research also shows that the nutrients in breast milk are essential for a child's growth and development [41]. Islam emphasizes breastfeeding to the extent that the Qur'an explicitly mentions the duration of breastfeeding as two full years (*haulayni kamilayn*). Even if the

mother cannot breastfeed, the Qur'an provides guidance to appoint a wet nurse, or in modern practice, may refer to donor breast milk [37], [39].

Breastfeeding is so important that a breastfeeding mother is given dispensation to not fast if it may negatively affect the child she is breastfeeding [42]. The wisdom behind breastfeeding includes ensuring that children grow strong and healthy. The Prophet Muhammad (peace be upon him) stated that a firm believer is better and more beloved by Allah than a weak believer (Hadith narrated by Muslim). This also implies that Islam encourages adequate nutrition for children, so that they become firm believers capable of worshipping Allah with good physical condition [42].

Parents are obliged to provide the best care for their children. One of these caregiving behaviors is breastfeeding. Breastfeeding provides infants with opportunities for more stable emotional development and stronger social development. Aside from being the best food for babies, breastfeeding also creates love and affection between mother and child [3]. Breastfeeding fosters attachment and helps children feel calm and secure.

IV. CONCLUSION

Exclusive breastfeeding is the first source of nutrition given to infants during the first six months of life. The ideal duration for breastfeeding activities is two years. In Islam, breastfeeding is carried out as an act of obedience to Allah in preserving and maintaining lineage. Furthermore, the benefits of breastfeeding are extensive. These benefits can be seen from a health aspect, as previously mentioned, namely, fulfilling the child's nutritional needs. In addition to meeting nutritional needs, breastfeeding also supports the child's psychological development. This interdisciplinary study is expected to enrich scientific knowledge regarding the importance of exclusive breastfeeding from both health and religious perspectives.

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