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## The relationship between women's health literacy and traditional practices about infant care and breastfeeding in the postnatal period

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### Abstract

This research was conducted to identify the relationship between traditional practices about infant care and breastfeeding in the postnatal period and health literacy. The research was performed as a correlational and descriptive study. The research population was comprised of 410 women who applied to Sımapınarı and Sımapınarı No. 1 Family Health Centers from 31 March 2018 to 2 June 2019 and were in the first six months of the postnatal period. The Participant Information Form and the Turkish Health Literacy Scale - 32 were used in the collection of research data. The research data were evaluated via percentages, arithmetic means, and the Pearson correlation analysis. In the research, it was found that almost all participant women used traditional practices about infant care whilst four-fifths of them employed traditional practices about breastfeeding. It was ascertained that the number of traditional practices used by the participant women in relation to infant care had no statistically significant relationship with the means of scores obtained by the participant women from the overall Turkish Health Literacy Scale and its sub-scales ( $p>0.05$ ). It was identified that the number of traditional practices used by the participant women in relation to breastfeeding had no statistically significant relationship with the means of scores obtained by them from the overall Turkish Health Literacy Scale and its 'accessing information', 'understanding information', 'appraising information', 'using/applying information', and 'treatment and service' sub-scales ( $p>0.05$ ) whilst it had a very weak statistically significant relationship with 'protection from diseases and improvement of health' sub-scale ( $p<0.05$ ). In the research, it was discerned that the participant women heavily used traditional methods about infant care and breastfeeding and there was no statistically significant relationship between the practice of traditional methods and health literacy.

**Keywords:** Postnatal, traditional practice, health literacy, infant care

### Introduction

The postnatal period is a process when the women's sickness and health situations converge requiring that the women should be examined physiologically, psychologically, and socially as a whole [1,2]. In the postnatal process, the most significant factor that affects infant health is the attitudes adopted by the mothers, who assume primary responsibility in the postnatal period, toward infant care [3]. Postnatal care is comprised of practices that appertain to the infant's healthy growth as well as its psychosocial

and cognitive development [3,4]. Upon the review of the factors affecting infant care and breastfeeding, it was ascertained that the mother's age, education level, employment status, socioeconomic situation, whether the mother had adequate access to health services, whether the problems encountered in this period were perceived as a normal situation, mother's attitudes and behaviors toward breastfeeding, childbirth experience, and social, economic, and professional support received by the mother [1-6]. It was discerned that the women who experienced setbacks in infant care and breastfeeding in the postnatal period were more inclined toward using traditional practices [3-5,7].

In numerous research studies performed in Turkey and across the world about traditional practices, it is indicated that there are regional and individual differences and similarities, and also, the traditional practices are still performed today [7]. In the study carried out by Lafci and Erdem (2014), it was identified that 75% of the women who experienced problems in the postnatal period did not visit healthcare facilities as a response to their problems, rather, they applied the methods which they learned from their families [1]. Having knowledge about the traditional practices

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is particularly quite important to disclose the practices that are detrimental to health and eliminate them and assure the continuity of the practices that are not detrimental to health [1,2,7].

The traditional practices performed unconsciously in the postnatal period affect infant health and care adversely, can inflict harm on the infant, and end in disability, sickness, and even death [3,4].

Health literacy was defined as the manner in which human beings accessed, understood, appraised, and used health information necessary for making decisions about health in daily life, raising and maintaining the quality of life, improving their healthcare, and preventing diseases [8]. Health literacy can affect the control of health, quality of life, effective use of health services, rate of breastfeeding, and the application of traditional practices [9]. The woman's health literacy can serve as a significant determinant for her own health and her infant's health [1]. Attributing adequate importance to infant health ensures that public health is protected and improved [1].

The nurses should get acquainted with the sociocultural characteristics of the society that they will serve, identify the health-related expectations of the society, and appraise, in advance, the society's reaction to the service that aldirthey will provide and explore the reasons for the reaction. In this process, the nurses should provide training individually and serve as a consultant who has empathy skills and is capable of interpersonal communication. While fulfilling these roles, the nurses should be savvy about the traditional methods utilized by the women for themselves and their infants and the associated factors. In this manner, the nurses can guide the consultancy roles and provide evidence for their practices [10,11].

Hence, it is essential to evaluate the relationship between health literacy and traditional practices. No research study that explored the relationship between traditional baby care and breastfeeding practices and health literacy was found in the relevant literature. In this regard, this research study aims to identify the relationship between traditional practices about infant and breastfeeding in the postnatal period and health literacy.

## Materials and Methods

### Research type

The research was conducted as a correlational and descriptive study.

### Location and period of the research

The research was performed from March 2018 to June 2019 with the participation of women who applied to two family health centers in eastern Turkey and were in the first six months of the postnatal period.

### Research population and sample

The research population was comprised of women who were in the first six months of the postnatal period and applied to the family health centers in the period when the research took place. The research sample had 410 women to represent 98% of the population as per the power analysis conducted with 0.05 effect size, 5% margin of error, and 95% confidence interval. The women who applied to the family health center for any reason and satisfied

the criteria for being included in the research were selected for the research sample from the population through the non-probability sampling method until the sample size calculated via the power analysis was reached. The criteria for being included in the research were to be aged 18 years or above, to be literate at the minimum, and to have a healthy infant.

### Data collection tools and methods

The research data were collected by the researcher through the face-to-face interview method from 8:00 am to 5:00 pm during five business days. In the collection of research data, the 'Participant Information Form' that was prepared by the researcher in light of the relevant literature and the 'Turkish Health Literacy Scale - 32' were used.

### Participant information form

The form that was developed by the researcher in light of the relevant literature had a total of 33 questions, namely, 4 questions identifying the women's sociodemographic characteristics (age, education level, employment status, and income level), 6 questions addressing the women's obstetric characteristics (parity, gravidity, number of living children, number of stillbirths, number of miscarriages, and number of abortions), and 23 questions about the women's traditional practices (state of performing the practices, method used for performing the practices, number of performing the practices, whether the practices were useful, and their uses). To evaluate the comprehensibility of the form, a preliminary test was performed on 10 women. No change was made on the Participant Information Form following the preliminary application of the form, and the findings obtained from the preliminary test were not included in the research.

### Turkish health literacy scale - 32 (THLS-32)

The scale was developed by the European Health Literacy Research Consortium in 2012. In Turkey, the validity and reliability study for the scale was performed by Okyay et al. in 2016. The scale has 32 questions aiming to evaluate jointly the aspects of protection from diseases and improvement of health. All scale questions are scored through a five-point Likert scale (1= very easy, 2= easy, 3= difficult, 4= very difficult, 5= N/A). In the evaluation of the scale, the indices were standardized in a way to have values ranging from 0 to 50 through the following formula:  $(\text{Index} = (\text{mean} - 1) \times (50/3))$  [19]. The Cronbach's Alpha coefficient was calculated as 0.93 for the scale. Under this research, it was found as 0.94 for the scale.

### Evaluation of the research data

The research data were evaluated through SPSS 16.0 software. The percentages, arithmetic means, and Pearson correlation analysis were used in the statistical analysis. At a 95% confidence interval, the statistical significance was identified if the P-value was lower than 0.05 ( $p < 0.05$ ).

### Results

In the research, it was found that the participant women's mean age was  $29.16 \pm 5.24$  years, 34.9% of them were high school graduates, 79.3% did not work, and 58.1% had an income equaling expenses. Furthermore, it was identified that, of the participant women, 32.4% had one pregnancy before, 93.9% had 1-3 living children (Table 1).

**Table 1.** Breakdown of the participant women's sociodemographic and obstetric characteristics (N=410)

Characteristics	Number	%
<b>*Age</b>		
18-24 years	78	19.0
25-31 years	197	48.1
32 years or above	135	32.9
<b>Education level</b>		
Literate or primary school	134	32.7
High school	143	34.9
Undergraduate or graduate program	133	32.4
<b>Employment status</b>		
Working	85	20.7
Not working	325	79.3
<b>Income level</b>		
Income above expenses	64	15.6
Income equaling expenses	238	58.1
Income below expenses	108	26.3
<b>*Gravidity</b>		
1	133	32.4
2	132	32.2
3≥	145	25.4
<b>*Number of living children</b>		
1-3	385	93.9
4-6	25	6.1

The traditional practices about infant care and breastfeeding continue to be in effect with certain differences across regions, families, and persons virtually everywhere in the world. Also in Turkey, the traditional practices about infant care and breastfeeding are frequently performed by women [12]. This research aimed to identify the relationship between health literacy and traditional practices about infant care and breastfeeding in the postnatal period. In this research, it was ascertained that, of the participant women, 63.4% used a traditional method in relation to both the infant and breastfeeding, 97% employed a traditional method solely in relation to the infant, and 83% implemented a traditional method solely in relation to breastfeeding. The mean of the number of traditional methods practiced by the participant women in relation to both the infants and breastfeeding was  $1.37 \pm 0.48$  (Table 2).

In the research, the means of scores obtained by the participant women from the overall THLS-32 and its 'treatment and service', 'protection from diseases and improvement of health',

'accessing information about health', 'understanding information about health', 'appraising information about health', and 'using/applying information about health' sub-scales were successively  $35.41 \pm 7.82$ ,  $36.48 \pm 8.11$ ,  $34.33 \pm 8.35$ ,  $36.20 \pm 9.31$ ,  $37.63 \pm 8.18$ ,  $31.24 \pm 9.25$ , and  $36.55 \pm 8.00$  points (Table 3).

Table 4 displays the breakdown of the participant women's traditional practices about infant and breastfeeding. In the research, it was found that 36.6% of the traditional practices implemented in the context of the ritual of bathing the infant on the fortieth day of the postnatal period pertained to the addition of a solid material to the bathing water. It was discerned that the traditional practice used most frequently by the participant women for burping the infant was to massage the infant's back or its feet (72%). It was identified that the traditional practice used most frequently by the participant women to make the infant beautiful was to make the infant have salt baths (66.5%). It was ascertained that the traditional practice employed most frequently by the participant women against puerperal fever was to place certain materials in the newborn's bed or room (70.7%). It was found that the traditional practice utilized by the participant women to protect the newborn against jaundice was to have yellow materials on or around the infant (54.2%), and also, 58.4% of the participant women stored the stump of tissue falling off from the newborn's belly button or buried it in a location. It is discerned that the traditional practice applied most frequently by the participant women to protect the infant from evil eyes was to put a material on the infant's costume (92.5%). It was found that the traditional methods implemented by the participant women in relation to breastfeeding were successively to make the infant drink water after breastfeeding (46.1%), to make the infant drink water with sugar before breastfeeding (33.9%), and to make the infant drink zam-zam water and taste some date (15.7%) (Table 4).

In the research, it was ascertained that the number of traditional methods practiced by the participant women about infant had no statistically significant relationship with the means of scores obtained by the participant women from the overall THLS-32 and its sub-scales ( $p > 0.05$ ). It was discerned that the number of traditional methods practiced by the participant women about breastfeeding had no statistically significant relationship with the means of scores obtained by the participant women from the overall THLS-32 and its 'accessing information', 'understanding information', 'appraising information', 'using/applying information', and 'treatment and service' sub-scales ( $p > 0.05$ ) whereas it had a very weak statistically significant relationship with the mean of scores obtained from 'protection from diseases and improvement of health' sub-scale ( $p < 0.05$ ) (Table 5).

**Table 2.** Breakdown of the participant women's traditional practices about infant or breastfeeding (N=410)

	N	%	$\bar{X} \pm SS$
<b>Performing traditional practices about both the infant and breastfeeding</b>			
Yes	260	63.4	$1.37 \pm 0.48$
No	150	36.6	
<b>*Performing traditional practices solely about the infant (n=265)</b>			
Yes	257	97.0	
No	8	3.0	$1.38 \pm 0.48$
<b>*Performing traditional practices solely about breastfeeding (n=270)</b>			
Yes	224	83.0	$1.45 \pm 0.50$
No	46	17.0	

**Table 3.** Breakdown of the means of scores obtained by the participant women from the overall THLS-32 and its sub-scales (N=410)

Mean scores	$\bar{X} \pm SS$
<b>Treatment and service</b>	36.48±8.11
<b>Protection from diseases and improvement of health</b>	34.33±8.35
<b>Accessing information about health</b>	36.20±9.31
<b>Understanding information about health</b>	37.63±8.18
<b>Appraising information about health</b>	31.24±9.25
<b>Using/applying information about health</b>	36.55±8.00
<b>Overall THLS-32</b>	35.41±7.82

**Table 4.** Breakdown of the participant women's practices of traditional methods in relation to the infants and breastfeeding

Traditional practices in relation to the infant	N	%
<b>Traditional practices implemented in the context of the ritual of bathing the infant on the fortieth day of the postnatal period (n:377)</b>		
Adding some materials to the bathing water (40 stones, sticks, wheat kernels, gold coins, beads, and so on)	138	36.6
Saying prayers to the infant	131	34.7
<b>Bathing the infant</b>	108	28.7
<b>Traditional practices utilized to burp the infant (n:225)</b>		
Massaging the infant's back/feet	162	72.0
Making the infant drink herbal tea (cumin, fennel, aniseed, and so on)	41	18.2
Putting the infant on the soil	9	4.0
Rubbing the infant's body with oil (bitter apple oil, black cumin oil, coconut oil, and so on)	7	3.1
Making the infant drink water/water with sugar after breastfeeding	6	2.7
<b>Traditional practices employed to make the infant beautiful (n:212)</b>		
Making the infant have salt bath	141	66.5
+Applying manipulative practices to the infant's body	31	14.6
Rubbing the infant's face with breast milk	25	11.8
Rubbing the infant's body with olive oil	12	5.7
Putting an amulet on the infant	3	1.4
<b>Traditional practices utilized to protect the infant from puerperal fever (n:116)</b>		
Keeping a material near the infant (knife, mirror, bread, the Holy Qur'an, and so on)	82	70.7
Not leaving the infant alone	16	13.8
Keeping the infant's room well-lit	12	10.3
Putting red clothes on the infant	4	3.5
Not taking the infant outside in the first forty days of the postnatal period	2	1.7
<b>Traditional practices implemented to protect the infant from jaundice (n:142)</b>		
Having yellow materials on or around the infant (cover, gold, clothes, and so on)	77	54.2
Making the infant have water with sugar, molasses, and water with lemon	48	33.8
Turning on yellow light in the infant's room	14	9.9
Affixing garlic on the infant's costume	3	2.1
<b>Traditional practices used in relation to the stump of tissue on the newborn's belly button or utilized to help this stump fall off (n:89)</b>		
Storing or burying the stump in a place	52	58.4
Rubbing the infant's belly with alcohol, oil, and body powder	23	25.8
Putting some materials on the belly (coffee grounds, coin, ashes from the burnt paper or fabric, and so on)	14	15.8
<b>Traditional practices used against evil eyes (n:40)</b>		
Putting certain materials on the infant's costume (evil eye bead, the Holy Qur'an, needle, and so on)	37	92.5
Rubbing the back of infant's ears with coal	3	7.5
<b>Traditional practices in relation to breastfeeding</b>		
<b>Traditional practices used by the participant women during breastfeeding (s:115)</b>		
Making the infant drink water after breastfeeding	53	46.1
Making the infant drink water with sugar before breastfeeding	39	33.9
Making the infant drink zam-zam water and taste some date	18	15.7
Emptying the first milk from the mother's breast	5	4.3

**Table 5.** Relationships of THLS-32 and its sub-scales with the number of traditional practices about infant and breastfeeding

THLS-32	Practicing Traditional Methods About Infant		Practicing Traditional Methods About Breastfeeding	
	r	p	r	p
Accessing information	-.009	.890	-.061	.331
Understanding information	-.061	.333	-.099	.114
Appraising information	-.095	.127	-.116	.063
Using/applying information	-.065	.296	-.075	.231
Treatment and service	.015	.807	.060	.333
Protection from diseases and improvement of health	-.104	.094	-.124	.047
Overall THLS-32	-.064	.305	-.098	.116

## Discussion

The traditional practices about infant care and breastfeeding continue to be in effect with certain differences across regions, families, and persons virtually everywhere in the world. Also in Turkey, the traditional practices about infant care and breastfeeding are frequently performed by women [12].

In the study performed by Celik et al. in Erzurum province in eastern Turkey, it was ascertained that 52.3% of the women practiced traditional methods in relation to infant and breastfeeding [6]. Thus, the finding of this current research is in parallel to the finding of the study by Celik et al. In this current research, almost all participant women reported that they practiced a traditional method in relation to the infant. In the relevant literature, it was discerned that the prevalence of practicing a traditional method in relation to the infant ranged from 58.6% to 92.8% [6,12,13]. In this respect, the finding of this current study is analogous to the findings in the relevant literature. In this current research, it was found that four-fifths of the participant women practiced a traditional method in relation to breastfeeding. In the study conducted in Kayseri province of Turkey by Yaman and Balci, it was identified that 99.2% of the women practiced a traditional method about breastfeeding and increasing the breast milk supply. The reason for obtaining a smaller percentage for the practice of a traditional method in relation to breastfeeding under this current study can be that the importance attributed to breast milk and early breastfeeding increases with each passing day, and the hospitals promoting breast milk and early breastfeeding are characterized as baby-friendly hospitals and the health staff serving in the baby-friendly hospitals encourage and support the women on the topic of early breastfeeding [14].

In the study performed by Berberoglu et al. to identify the health literacy levels of the individuals aged 18-65 years registered to the family health centers, it was found that the mean of the women's general health literacy scores was 25.0±9.3 points [15]. Thus, the finding of the study by Berberoglu et al. differs from the finding of this current research. The difference is considered to have arisen from the fact that the women participating in this current study and the study by Berberoglu et al. had different sociodemographic characteristics and were from different age groups. The mean age of the participant women in this current study was 29.16±5.24 years whilst the mean age of the participant women in the study by Berberoglu et al. was 41.1±13.7 years. Moreover, in the study by Okyay and Abacigil, it was ascertained that the mean of the participants' THLS-32 scores was 29.7±8.0 points [16]. Hence, the

finding of the study by Okyay and Abacigil differs from the finding of this current research. The difference is considered to have stemmed from the fact that this current research was conducted solely on women while the study by Okyay and Abacigil was performed on both women and men.

In this current research, it was found that the traditional practices implemented by the participant women in the context of the ritual of bathing the infant on the fortieth day of the postnatal period were consecutively to add certain materials to the infant's bathing water, to say prayers to the infant, and to bath the infant. This finding is in parallel to the findings in the relevant literature [18].

In this current research, the traditional practices used most frequently by the participant women to burp the infant were consecutively to massage the infant, to make the infant drink herbal tea, and to put the infant on the soil. In the study performed by Deger in Kiziltepe district of Mardin province of Turkey, it was ascertained that the women used the traditional practices most frequently against gas pains. Thus, the finding of this current study differs from the finding of the study by Deger. The difference in the findings is considered to arise from the difference between the regions where the two studies took place, namely, from the differences in the socio-cultural and geographical factors [20].

It was identified that the traditional practices utilized by the women included in this current study to make their infants beautiful were consecutively to make the infant have a salt bath, to apply manipulative practices to the infant's body, and to rub the infant's face with breast milk. As per the review of the relevant literature, it was discerned that, to make the infants beautiful, the women most frequently made the infant have a salt bath, applied manipulative practices to the infant's body, and rubbed the infant's face with breast milk [10,11,19-22]. Hence, the finding of this current study is in parallel to the findings in the relevant literature.

In the relevant literature, it is put forward that the traditional practices employed most frequently by the women in Turkey to protect the infant from the puerperal fever were successively to keep certain materials in the infant's bed or room, not to leave the infant alone, and to ensure that the infant's room was well-lit [11]. In parallel to the relevant literature, in this current research, it was identified that the traditional practices employed most frequently by the participant women to protect the infant from puerperal fever were consecutively to keep certain materials in the infant's bed or room, not to leave the infant alone, and to make the infant's room well-lit.

In this current research, the traditional practices used by the participant women in relation to the infant jaundice were successively to have yellow materials on or around the infant, to make the infant have water with sugar, molasses, and water with lemon, and to turn on a yellow light in the infant's room. In the study conducted by Arabaci in Kastamonu province of Turkey, it was ascertained that the traditional practices implemented most frequently by the women against infant jaundice were to cover the infant with yellow muslin and to make the infant drink water with sugar [19]. In the relevant literature, it is indicated that the traditional practices utilized most frequently in relation to the infant jaundice were successively to have yellow materials on or around the infant, to make the infant drink water with sugar, and to turn on a yellow light in the infant's room [12,13,20-23]. Hence, the finding of this current study is in parallel to the findings in the relevant literature.

In this current research, it was found that the traditional practices employed by the participant women in relation to the stump of tissue falling off from the newborn's belly button were respectively to store or bury the falling stump in a place, to rub the infant's belly with alcohol, oil, and body powder, and to put certain materials on the infant's belly. The finding of this current research is in parallel to the findings in the relevant literature [10,16].

In this current research, it was identified that the traditional practices used most frequently by the participant women to protect the infant from evil eyes were successively to put certain materials on the infant's costume (evil eye bead, needle, a piece of wood, ring, the Holy Qur'an or the script of its verse, amulet), and to rub the back of infant's ears with coal. The finding of this current research is in parallel to the findings in the relevant literature [17,22,24-26].

In the relevant literature, no study that analyzed the relationship between the practice of traditional methods and health literacy was found. In this current research, it is considered that no statistically significant relationship was identified between the practice of traditional methods and health literacy because the traditional methods were internalized by the society to a great extent and also, the perception that they were useful in both this research and the relevant literature eliminated the thinking that they could be harmful. Hence, the concept of health literacy did not generate the adequate inner power to eliminate this perception [19]. Traditional practices are practices that originate in the past and are transferred from society to society. Changing these practices in a short period is hard due to the traits that these practices have [27,28]. As a matter of fact, health literacy is defined as an individual's capacity, competence, and motivation to acquire, interpret, and understand the basic health information and services in a manner to protect and improve his/her health and recover from the diseases [27-29]. As it is to be discerned from the definition, health literacy pertains to the individual's inner world and requires the individual to have a say over his/her health. However, acquiring this qualification requires time and effort [27-29]. It is thought that identifying no relationship between health literacy and the practice of traditional methods was essentially a consequence of the internalization of the traditional methods.

## Conclusion

It was found that the participant women heavily used the traditional methods about infant and breastfeeding and thus, within the context of the care service, the nurses should question the traditional practices used by the women in the postnatal period. It is recommended that the traditional practices detrimental to health be eliminated whilst the traditional practices beneficial or harmless to health be further developed.

## Conflict of interests

*The authors declare that they have no competing interests.*

## Financial Disclosure

*All authors declare no financial support.*

## Ethical approval

*Before launching the research, the written permission was received from the institutions where the research would take place, and the ethical endorsement was obtained from the Health Sciences Non-Invasive Clinical Trials Ethics Committee (2018/4-16).*

## References

1. Lafci D, Erdem E, Traditional practises regarding mother and infant care of 15-49 year old married women in the postpartum period. *Gaziantep Med J.* 2014;20:226-36.
2. Gölbası Z, Eğri G, Traditional practices to mother care in postpartum period. *Cumhuriyet Med J.* 2010;32:276-82.
3. Çalışkan Z, Bayat M, Baby care practices of mothers and affecting factors: a cappadocia example. *J Anatolia Nursing of Health Sci.* 2011;14:23-30.
4. Sülü UE, Bağbakkal Z, Dayılar H, et al. Examination of the traditional practices about child care of the mothers in odemis. *Gümüşhane University J Health Sci.* 2013;2:342-360.
5. Bozkus EG, Konak A, Traditional belief related to postpartum period and samples for practises from Turkey and the World. *Zeitschrift für die Welt der Türken.* 2011;3:143-55.
6. Çelik SA, Çapık A, Engin R, Determining the traditional practices during pregnancy and postpartum period in Erzurum. *J Anatolia Nursing of Health Sci.* 2012;15:262-7.
7. Yiğitalp G, Gümüş F, Traditional infant care practices of women aged 15-49 in Diyarbakır. *Turkish J Pediatr Dis.* 2017;3:188-96.
8. Sorensen K, Broucke SV, Fullam J, et al. Health literacy and public health: a systematic review and integration of definitions and models. *BMC Public Health.* 2012;12:80.
9. Copurlar KC, Kartal M, What is health literacy? How to measure it? Why is it important?. *Turkish Journal of Family Medicine and Primary Care.* 2016;10:42-7.
10. Işık MT, Akçınar M, Kadioğlu S, Traditional practices applied to mother and newborn during pregnancy, labor and postpartum periods in Mersin. *International J Human Sci.* 2010;7:63-84.
11. Koyun A, Çamuroğlu C, Korkmaz G, et al. Believes and traditional practices of women concerning pregnancy, labor and care of newborns. *J-SCS.* 2010;6:57-64.
12. Karabulutlu Ö, Determining of the traditional practices at postpartum period which is applied to maintenance of infant in Kars. *J Dokuz Eylul University Nursing Faculty.* 2014;7:295- 302.
13. Çınar İÖ, Aslan GK, Kartal A, et al. A study of mother's traditional infant care methods for infants less than a year old age. *TAF Prev Med Bull.* 2015;14:378-86.
14. Yaman S, Balcı E, Traditional applications increasing mother's milk. *Health Care Acad J.* 2019;6:230-6.
15. Berberoğlu U, Öztürk O, İnci MB, Ekerbiçer HÇ, Evaluation of the health literacy status among individuals aged 18-65 registered in a family health center. *Sakarya Med J.* 2018;8:575-81.

16. Okyay P, Abacıgil F, Harlak H. Turkey Health Literacy Scale-32. T.C. Sağlık Bakanlığı, 2016, Ankara. 43-61.
17. Akman G, Gözüyeşil E. Investigation of Studies Conducted on Traditional Practices in The Postpartum Period. JACSD. 2018;1:92-125.
18. Duong VT, Chang PW, Yang S, et al. A new comprehensive short-form health literacy survey tool for patients in general. Asian Nursing Research. 2017;11:30-5.
19. Arabacı Z, Yıldırım JG, Dündar BN, et al. Traditional Applications administered in infants. Çocuk ve Medeniyet Dergisi. 2016;1:61-86.
20. Arısoy A, Canbulat N, Ayhan F. Traditional methods applied in caring for infants of mothers in Karaman. J Anatolia Nursing of Health Sci. 2014;17:23-31.
21. Deger VB, Deveci E. Traditional methods and related factors about postnatal baby care known and/or applied by married women living in Kiziltepe subprovince of Mardin province. J Human Sci. 2016;13:5865-83.
22. Önen C, Masyon D. Traditional Infant Care Practices of the Women Aged 15-49 and Affecting Factors. J Health and Society. 2017;3:31-7.
23. Karahan N, Aydın R, Guven YD, et al. Traditional health practices concerning pregnancy, birth, and the postpartum period of women giving birth in the hospital. Southern Clin Istanbul Eurasia. 2017;28:190-8.
24. Yalçın H. Traditional practice related to pregnancy, the natal and postnatal period and baby care (Karaman sample). Çocuk Sağlığı ve Hastalıkları Dergisi. 2012;55:19-31.
25. Korgalı EU, Ozgurhan G, Yigit O, et al. Relationship between the traditional neonatal care practices and baby health and the socio-economic levels of families. Int J Human Sci. 2018;15:2322-40.
26. Aydın S, Oktay U. Transcultural nursing in perinatology. Int J Human Sci. 2013;10:1607-19.
27. Ghanbari S, Ramezankhani A, Montazeri A, Mehrabi Y. Health literacy measure for adolescent (HELMA): Development and Psychometric Properties. Plos One. 2016;11:1-12.
28. Yılmazel G, Çetinkaya F, The importance of health literacy for community health. TAF Prev Med Bull. 2016;15:69-74.
29. HLS-EU CONSORTIUM, Comparative Report of Health Literacy in Eight EU Member States. The European Health Literacy Survey HLS-EU. <http://www.health-literacy.eu>, 2012 access date: 23.12.2020