

INFANTS, PARENTS AND WET NURSES

# ISLAMIC HISTORY AND CIVILIZATION

STUDIES AND TEXTS

EDITED BY

ULRICH HAARMANN

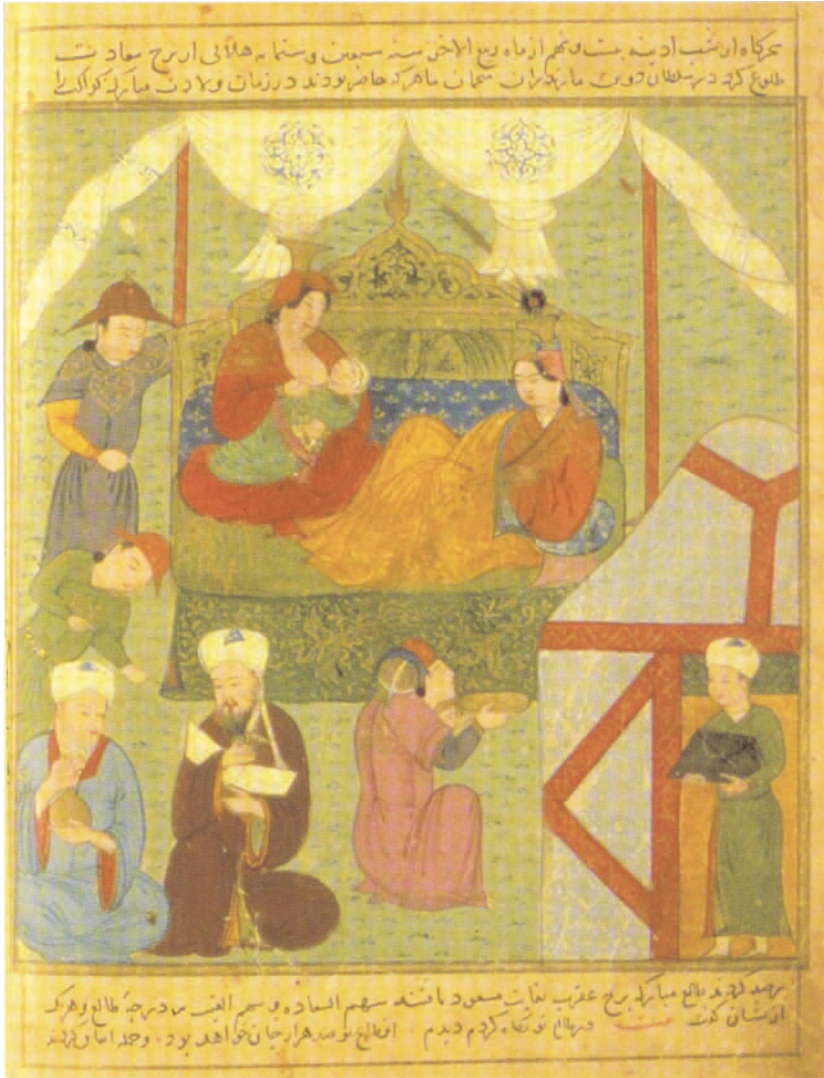
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WADAD KADI

VOLUME 25







Ghāzān Khān as a baby with his mother and nurse: by courtesy of the  
 Biblioth que Nationale, Paris, MS. Suppl. Pers. 1113, fol. 210<sup>o</sup>  
 [Rashid al-Din, *Jami' al-Tawārikh*]

# INFANTS, PARENTS AND WET NURSES

*Medieval Islamic Views on Breastfeeding and  
Their Social Implications*

BY

AVNER GILADI



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*For Inbal, Amotz and Ohad*



I have chosen to write about women because I am not one myself, and because I have always preferred to write about subjects which do not tempt me to be so arrogant as to believe that I can ever fully understand them...

Theodor Zeldin, *An Intimate History of Humanity*, London, 1994,  
pp. 18-19



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*Haifa, March 1999*



## INTRODUCTION: A “HISTORY OF BREASTFEEDING”

When we imagine how premodern societies conceived of motherhood and infancy, no behaviour will appear to us more characteristic of mother-child relationships than breastfeeding, that instinctive life-giving act humans share with all other mammals. That a mother could refuse to breastfeed her own child was viewed as going against nature: “Even the jackals give the breast and suckle their young, but the daughter of my people has become cruel, like the ostriches in the wilderness”<sup>1</sup>—“cruel”, one infers, not only for withholding vital sustenance from a powerless, helpless creature, but also for denying it maternal love.

Crucial for the survival of newborn infants and the way they develop, breastfeeding is far more than merely a biological fact: it is an aspect of “mothering”, the culturally constructed bonding between mother and child, “grounded in specific historical and cultural practices.”<sup>2</sup> Thus it is also a fundamental means of socialization. Not surprisingly, the way the physical and psychological functions of breastfeeding have been conceptualized differ from one society to another, or even from one social group to another.

An attempt at reconstructing the nature of infant feeding in the past and the prevalence of the methods involved helps to shed light on vital aspects of family life and in particular of the lives of women and children in premodern societies: women’s status within the family and their relationships with their husbands and infants, the physical treatment children received, the psychological relationships that evolved between children and their parents and nurses, and so on.

When looking at historical notions and practices of breastfeeding, it may be useful to bear in mind the importance modern psychology accords to the bond that is being formed during the breastfeeding period between a baby and its mother (or the

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<sup>1</sup> Lamentations 4/3. English translation: *The New Oxford Annotated Bible with the Apocrypha*, edited by A.G. May and B.M. Metzger, Oxford, 1977, p. 997.

<sup>2</sup> John Carmi Parsons and Bonnie Wheeler (eds.), *Medieval Mothering*, New York and London, 1996, p. X (Editors’ Introduction), quoting Nancy Scheper-Highes, *Death without Weeping: The Violence of Everyday Life in Brazil*, Berkeley and Los Angeles, 1992.

breast), which some see as perhaps the most powerful human relationship.<sup>3</sup> D.W. Winnicott has written: "The aim of infant care is not limited to the establishment of health, but includes the provision of conditions for the richest possible experience, with long-term results in increased depth and value in the character and personality of the individual."<sup>4</sup> Thus, "the breastfeeding experience carried through and terminated successfully is a good basis for life."<sup>5</sup> For Erik Erikson the mouth and the nipple are "the mere centers of a general aura of warmth and mutuality which are enjoyed and responded to with relaxation not only by these focal organs, but by both total organisms." And "the mutuality of relaxation thus developed is of prime importance for the first experience of friendly otherness. One may say... that in thus *getting what is given*, and in learning to *get somebody to do* for him what he wishes to have done, the baby also develops the necessary ego groundwork to *get to be a giver*."<sup>6</sup> If, indeed, "there are as many types of unconscious as there are ... types of society,"<sup>7</sup> then the psychological significance of the bond between nurse and nursling may change from one society to another; but as the first stage in the process of socialization it seems to be universally fundamental.

Anthropology, in the way it has revealed some of the cultural meanings of breastfeeding in the context of contemporary societies, can sensitize historians to questions they do not normally ask of the source materials within their field,<sup>8</sup> and help them apply to data from the past concepts elaborated in the study of contem-

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<sup>3</sup> D.W. Winnicott, *The Child, the Family, and the Outside World*, Harmondsworth, 1973, p. 51. See also Erik H. Erikson, *Childhood and Society*, London, 1984, pp. 62-63: "His [the newborn's] inborn and more or less coordinated ability to take in by mouth meets the breast's and the mother's and the society's more or less coordinated ability and intention to feed him and to welcome him. At this point he lives through and lives with his mouth; and the mother lives through and loves with her breasts. For her this is highly dependent on the love she can be sure of from others, on the self-esteem that accompanies the act of nursing and on the response of the newborn."

<sup>4</sup> Winnicott, *The Child, the Family*, p. 57.

<sup>5</sup> *Ibid.*, p. 81.

<sup>6</sup> Erikson, *Childhood and Society*, p. 66.

<sup>7</sup> Roger Bastide, *Sociologie et psychanalyse*, Paris, 1950, p. 277, as cited by Abdelwahab Bouhdiba, *Sexuality in Islam*, London, 1985, p. 228. On the particular Arabo-Muslim version of the Oedipus complex, for instance, see Bouhdiba, *ibid.*

<sup>8</sup> Tamara K. Hareven, "The History of the Family as an Interdisciplinary Field", *The Journal of Interdisciplinary History* 2 (1971), p. 414.

porary societies.<sup>9</sup> Vanessa Maher, in her “Breastfeeding in Cross-cultural Perspective,” argues that

infant feeding often entails not only the physical survival of the child but also complex forms of socialization of mother and child... [L]ike female sexuality and childbirth, [it] is the subject of considerable cultural elaboration in most societies... It is not only conditioned by cultural patterns but exerts a definite influence on them. The mode of breastfeeding may influence fundamental cultural coordinates such as those which define the concept of the person, or of closeness of relationship and thus the “structure of roles” within a society. It may serve to socialise the person to a given political and productive system, forging through this primary experience, for example, the socially accepted concept of time or more generally, the rules concerning the management of sexuality and emotion, on which the social order is founded.<sup>10</sup>

Particularly important for historical research are anthropological observations concerning the various “power structures” that find their expression in breastfeeding and the practices surrounding it. For instance, in many societies, it is men (fathers, wet nurses’ husbands) rather than women (mothers, wet nurses) who determine which and how much food women and children may consume. Seeking to control mother-child relationships, men set limits to a nursing woman’s lactation period, sometimes in ways that discriminate against female nurslings. Men also decide whether the mother herself will breastfeed her baby or whether this will be done by another woman, a wet nurse. In the latter case, it is the father, not the mother, who is responsible for selecting the wet nurse, which he does by paying attention to a number of physical, moral and mental characteristics and by following certain economic and social criteria.<sup>11</sup> As Maher points out, this is “not only as a means to promote or prevent the growth of mother-child relationships, but also as the condition for the creation of other kinds of social relationships, centered round neither the child nor the

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<sup>9</sup> Stephen Wilson, “The Myth of Motherhood a Myth: the Historical View of European Child-rearing”, *Social History* 9 (1984), p. 181.

<sup>10</sup> Vanessa Maher, “Breast-Feeding in Cross-cultural Perspective: Paradoxes and Proposals” in idem (ed.), *The Anthropology of Breastfeeding: Natural Law or Social Construct*, Oxford & Providence, 1992, pp. 9-10.

<sup>11</sup> *Ibid.*, pp. 6, 8, 18, 23.

mother, but rather designed to teach both of them their place in the patriarchal system of kinship and property."<sup>12</sup>

In societies where non-maternal breastfeeding has been common, not only are some of the basic physical and psychological needs of both infant and mother ignored, but also parents do not have the benefit of the effect lactation has as a contraceptive and in the way it can help space births.<sup>13</sup> Such societies "emphasise marriage and having children as institutions for the confirmation of wealth and status rather than as means to parenthood and the extension of kin ties."<sup>14</sup>

Since in many societies they are subordinate to the interests of men, women are burdened not only with frequent births and the task of feeding and rearing the infants, but also with many other kinds of work in and outside the home. As a result, women are more susceptible to illnesses and have a lower life expectancy than men. At the same time, we find women managing to mould practices of breastfeeding that deviate from the norms consolidated by men.<sup>15</sup>

In addition to the social factors that play a role in the creation of norms and practices of breastfeeding, anthropologists point up biological concepts that are sometimes conditioned by, and therefore serve, social interests. Such is the idea that intercourse with a nursing woman is harmful not only to the nursling she is breastfeeding but also, should she be pregnant, to the foetus she is carrying.<sup>16</sup> In certain societies this has helped to justify handing newborn babies over to wet nurses almost immediately, thus enabling a couple to resume sexual relations again soon after the woman has given birth.

As we learn from a variety of historical sources—the Bible, the Code of Hammurabi, Egyptian papyri, Greek and Roman litera-

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<sup>12</sup> Ibid., p. 25.

<sup>13</sup> When it comes to demographic changes, recent research on methods of infant feeding that were used in past societies, particularly in late medieval and early modern Europe, has proven to be indispensable in that it has been able to point out changes in birth intervals (and therefore fertility) as well as infant mortality; see, for instance, Carlo A. Corsini, "Breastfeeding, Fertility and Infant Mortality: Lessons from the Archives of the Florence Spedale degli Innocenti" in *Historical Perspectives on Breastfeeding*, Florence, 1991, pp. 63-87.

<sup>14</sup> Maher, pp. 10-11.

<sup>15</sup> Ibid., pp. 5-6, 7, 29.

<sup>16</sup> Ibid. pp. 14-16.

ture, and so on—the wet nurse was a familiar figure in ancient societies. Putting infants out with wet nurses seems to have been a widely prevalent form of institutionalized abandonment.<sup>17</sup> At times it was such a well-organized trade that we may speak of mercenary nursing. For instance, in ancient Rome, handing newborn children over to a wet nurse shortly after birth was a common practice, and wet nurses used to gather around the *Colonna Lactaria* to sell their services.<sup>18</sup>

In medieval Europe, mercenary wet nursing was common first of all among noble and wealthy families, and then, in the late Middle Ages and the Renaissance, spread to lower groups of urban society, particularly in Italy.<sup>19</sup> The practice was encouraged by various, sometimes contrary, motivations, depending on the social group and on personal, economic and social circumstances. Among rich and noble women it was health reasons and a desire to maintain their figure or to shorten intervals between pregnancies that made them avoid the “trouble” of breastfeeding (which, until the eighteenth century, was considered to be physically debilitating or even dangerous).<sup>20</sup> Among poorer women, by contrast, the practice was motivated by the necessity to return to work as soon as possible after giving birth.

Historical documents that have come to light in recent years make that research, in the European context, no longer has to be limited to dealing only with theoretical attitudes towards infant feeding, but can be extended to include daily practices. Contracts drawn up between the infant’s father and the wet nurse’s husband found in France and Italy, where “wet nursing was a highly organized industry controlled by the state as early as the thirteenth century”, are one example.<sup>21</sup> Then there are the papal and royal decrees

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<sup>17</sup> Paul Veyne, “From Mother’s Womb to Last Will and Testament (in the Roman Empire)” in idem (ed.), *A History of Private Life, I. From Pagan Rome to Byzantium*, Cambridge, Mass. and London, 1987, p. 14; Lloyd DeMause, “The Evolution of Childhood” in idem (ed.), *The History of Childhood*, New York, 1974, p. 34.

<sup>18</sup> Valerie Fildes, *Wet Nursing: A History from Antiquity to the Present*, Oxford, 1988, p. 18.

<sup>19</sup> See, for instance, Christiane Klapisch-Zuber, *Women, Family and Ritual in Renaissance Italy*, Chicago and London, 1985, pp. 133, 135.

<sup>20</sup> Sara F. Matthews Grieco, “Breastfeeding, Wet Nursing and Infant Mortality in Europe (1400-1800)” in *Historical Perspectives on Breastfeeding*, p. 17.

<sup>21</sup> Matthews Grieco, “Breastfeeding, Wet Nursing,” p. 33; Fildes, p. 37.

issued in several countries in the twelfth and thirteenth centuries, which prohibited the nursing of Jewish babies by Christian women,<sup>22</sup> family records of Tuscans, particularly Florentine merchants, and a few autobiographies.<sup>23</sup> However, by far the richest and

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<sup>22</sup> Fildes, pp. 39-40.

<sup>23</sup> Matthews Grieco, "Breastfeeding, Wet Nursing," p. 19; James Bruce Ross, "The Middle-Class Child in Urban Italy, Fourteenth to Early Sixteenth Century" in DeMause (ed.), *The History of Childhood*, pp. 183-228, esp. pp. 183-4, 189 (where the vast correspondence of the self-made merchant Datini, including letters he and his wife wrote in their efforts to find wet nurses for friends and clients, are mentioned as a source), pp. 191-194; Christiane Klapisch, "L'Enfance en Toscane au début du XV<sup>e</sup> siècle", *Annales de démographie historique*, 1973, pp. 99-122, especially p. 100, n. 4; idem, *Women, Family and Ritual*, p. 133.

Solid sources like these can also be enriched by indirect evidence based on belles lettres and poetry. A remarkable example is "The Nurse," a poem written by Luigi Tansillo, a sixteenth-century poet from Nola in the Kingdom of Naples, which shows how widespread the custom of mercenary wet nursing in the southern parts of Italy was and how sharply it was criticized. Following are a few extracts taken from the English translation by William Roscoe which was published in London in 1798 and a rare copy of which is held by the library of the Wellcome Institute for the History of Medicine, London:

p. 19:

"Gaunt is the wolf, the tyger fierce and strong,  
Yet when the safety of their helpless young  
Alarms their fears, deathful the war they wage  
With strength unconquer'd, and resistless rage.  
One lovely babe your fostering care demands'  
And can you trust it to an hireling's hands ?

p. 23:

Nor from a stranger let your offspring prove  
The fond endearments of a parent's love,  
So shall your child, in manhood's riper day  
With warm affection all your cares repay.

p. 25:

But if the pleasing task you still refuse,  
Ah deaf alike to nature and the muse !  
Or if the plenteous stream, to you denied  
Must from a richer fountain be supplied;  
Let prudence then th' important choice direct,  
Nor let your offspring mourn a new neglect.

p. 43:

O past all human tolerance the curse,  
The endless torments of a hireling nurse!  
If to your children no regard were due,  
For your own peace avoid the harpy crew...  
But wiser you with no such ills contend;  
Far from your sight your helpless young you send,  
And to your child, yourselves, your God, unjust,  
To others yield th' inalienable trust!

p.55:

most fruitful source is, of course, the archives of foundling hospitals. For instance, the archive of the hospital of Santa Maria degli Innocenti in Florence, founded at the beginning of the fifteenth century AD as a refuge for foundlings and needy infants,<sup>24</sup> contains detailed information on all infants ever admitted to the hospital, including data on the way they were fed, generally through wet nursing.<sup>25</sup>

These sources can provide at least partial answers—again, in the European context—to the following scala of questions:

What were the infant's first contacts with the world outside the womb? Without regular supervision, what kind of care would the surrogate mother give the newborn infant? If her own infant had just died, did she resent the newcomer or [did she] find in it physical relief and emotional consolation? Or if her own nursling was alive, could she feed both infants adequately or did she face a bitter choice? And what kind of treatment would the little intruder receive from the older children of the *balia* [mercenary wet nurse] or from her husband, the *balio*, who gained a profit from this arrangement but supposedly lost his conjugal rights for its duration? Was there ever enough milk for the little stranger? Could the complex process of swaddling ever be done "in a flash"? Were infants ever "changed" three times a day, and what actually was changed? How could an overworked country woman find time to do more than the minimum? How could she have eased his teething, taught him his first words, guided his first steps, protected him as he began to walk from all surrounding dangers (fire,

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Once exil'd from your breast, and doom'd to bring  
His daily nurture from a stanger spring,  
Ah who can tell the dangers that await  
Your infant? thus abandon'd to his fate.

p. 57:

What ceaseless dread a mother's breast alarms  
Whilst her lov'd offspring fills another's arms !  
Fearful of ill she starts at every noise,  
And hears, or thinks she hears, her children's cries,  
Whilst more imperious grown from day to day  
The greedy nurse demands increase of pay.

<sup>24</sup> Klapisch-Zuber, *Women, Family and Ritual*, p. 132, n. 1.

<sup>25</sup> For research studies based on the archives of the hospital of Santa Maria degli Innocenti in Florence, see, for instance, Philip Gavitt, *Charity and Children in Renaissance Florence. The Ospedale degli Innocenti (1410-1536)*, Ann Arbor, 1990, and Corsini's "Breastfeeding". Examples of works based on the archival documents of other foundling hospitals are Lucia Sandri, *L'Ospedale di S. Maria della Scala di S. Gimignano nel Quattrocento: Contributo alla Storia dell' Infanzia Abbandonata*, Florence, 1982; David L. Ransel, *Mothers of Misery: Child Abandonment in Russia*, Princeton, 1988.

tools, animals, darkness, wells, high places and so on)? And when and why would she have dressed him up in the variety of garments sent along? In intervals between swaddlings or as the heavy swaddling was reduced and finally ended? Did illegitimate infants die more frequently and earlier than legitimate babies in the care of a *balia*? How did the child adjust himself to his native home after some two years?<sup>26</sup>

With a near total lack of archival documentation, the historian of the family in premodern Muslim societies, however, is limited almost exclusively to sources of a normative-theoretical character, all written and compiled by men of upper-urban social strata.<sup>27</sup> For instance, foundling hospitals and similar institutions were rare in the lands of Islam (in any case no archives remain), since orphans and foundlings were generally given immediate shelter within their extended families or families of other members of their parents' community, even if not formally adopted—the Qur'ān (33/4-5) cancelled and forbade what had been a common practice in pre-Islamic Arabia, that of an adopted son taking the name of his adoptive father.<sup>28</sup> As Goitein puts it: "The notion that children belonged in a house with a family, even if it was only an adopted one, was too strong [amongst Muslims as well as Jews in Middle Eastern Muslim lands] to permit placing orphans in a barracks-like place... the so-called orphanages erected by [Mamluk and Ottoman] Muslim rulers in a later period were often nothing but training schools for future soldiers."<sup>29</sup>

<sup>26</sup> Ross, "The Middle Class Child", pp. 184, 190-91, 194, 195, 196. See also, e.g., Corsini, "Breastfeeding", pp. 63-86; Klapisch-Zuber, *Women, Family and Ritual*, pp. 132-164.

<sup>27</sup> On sources for the History of Family in premodern Muslim societies, see Thierry Bianquis, "The Family in Arab Islam" in André Burguière et al. (eds), *A History of the Family*, Cambridge, 1996, Vol. 1, pp. 601-605. On the sources for the History of Childhood in premodern Muslim societies, see Avner Giladi, *Children of Islam: Concepts of Childhood in Medieval Muslim Society*, Houndmills and London, 1992, pp. 1-15.

<sup>28</sup> Amira al-Azhary Sonbol, "Adoption in Islamic Society: A Historical Survey" in Elizabeth Warnock Fernea (ed.), *Children in the Muslim Middle East*, Austin, 1995, pp. 45-67, esp. 57-59.

<sup>29</sup> S.D. Goitein, *A Mediterranean Society*, Vol. 3: "The Family", Berkeley, Los Angeles and London, 1978, p. 304; also p. 248, on (informal) adoption of children as an act of piety. References to "orphanages" (*dār al-aytām*) in medieval Arabic sources probably indicate elementary schools for orphans (called also *maktab* or *kutāb sabīl*) rather than "total institutions". See Michael W. Dols, *Majmūn: The Madman in Medieval Islamic Society*, Oxford, 1992, p. 122 (referring to al-Maqrīzī's *Khīṭat*); see also Norman A. Stillman, "Charity and social service in medieval Islam", *Societas: A Review of Social History* 5(1975), pp. 111-12. Cf. Andrea B. Rugh,

Except for *fatāwā* (responsa)—some, as we shall see, highly illuminating for our purpose—and possibly *sijillāt* (records of *sharʿi* courts), legal writings, when they deal with questions concerning breastfeeding, generally do so on a more theoretical level. Thus, they hardly ever reflect nuances of local attitudes to and practices of breastfeeding in the different regions of the Muslim world. Of course, the discussions involved did not take place in a vacuum, but the question of how they related to daily life remains a complex one. The same is true for medical theories: Even where it is clear that these were popular, to what extent they were actually applied and how exactly they were implemented is difficult to unravel. However, describing the conceptions and ideas about breastfeeding as they can be distilled from many Islamic writings—abstract and static as these ideas may sometimes look—and analyzing their roots, on the one hand, and their possible social impact, on the other, are, in my view, necessary—and, as I hope to show, fruitful—steps towards a deeper understanding of the reality of children’s lives and parent-child relationships, as well as of the status and roles of women in premodern Muslim families. In the same way, we will be able to arrive at some answers to questions concerning family structure and demographic changes. “(A) theological idea, an artistic or literary theme, in short anything that seems to be the product of individual inspiration, can find form and style only if it is both very close to and slightly different from the general feeling of its age” observes Philippe Ariès in his *L’homme devant la mort*. “If it were very different, it would not even be conceivable by its author, or understandable by the elite any more than by the masses. If it were no different at all, it would pass unnoticed and would never cross the threshold of art.”<sup>30</sup>

It is, of course, impossible to underestimate the difficulties involved in the study of past attitudes, of modes of thought and feeling, particularly where intimate family matters are concerned.<sup>31</sup> Nevertheless, given the development of Women’s History and the History of Childhood in the Islamic context, both of which only

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“Orphanages in Egypt: Contradiction or Affirmation in Family-Oriented Society” in Fernea (ed.), *Children in the Muslim Middle East*, pp. 124-141.

<sup>30</sup> Philippe Ariès, *L’homme devant la mort*, Paris, 1977, here quoted from the English translation by Helen Weaver, *The Hour of our Death*, London, 1981 (repr. 1987), Preface, p. XIII.

<sup>31</sup> Wilson, “The myth of motherhood”, p. 198.

recently seem to be coming into their own as areas of study,<sup>32</sup> historical research on attitudes towards and practices of breast-feeding appears a promising direction to take, serving as a possible link between the two other fields and shedding light on both.

In this book I deal with three main aspects of the history of breast-feeding in Muslim societies. Chapter 1 traces the foundations of an Islamic “ethics” of breastfeeding as laid down in the seventh century AD by the Qur’ān, which then, during early Islamic history, were expanded by commentators on the Qur’ānic text (I use a sample of writings compiled during the tenth through thirteenth centuries AD), as well as by “oral” traditions attributed to the Prophet Muḥammad that were developed and collected during the seventh through ninth centuries AD. In Chapter 3 I address the detailed and sophisticated elaborations of these early materials that went on in the highly developed urban centres of the Middle East, North Africa, Spain, Iran and Central Asia during the ninth through sixteenth centuries AD, which jurists then organized in compilations of positive law (*furū’ al-fiqh*). Also taken into account here are responsa (*fatāwā*) of all Sunnite schools of law and a few references to—albeit not a systematic comparison with—Shī’ite law. Interposed between them is Chapter 2, in which I discuss medical theories of breastfeeding which originated mainly from the Greek Hippocratic and Galenic medicine and were adapted by Arabic-speaking Muslim physicians during the ninth through eleventh centuries AD (many of these later reappeared in medical writings of a more popular character). This discussion is placed here because it sheds light on another source that enriched the knowledge and helped consolidate the concepts of breastfeeding among Muslim religious scholars, i.e., medical theories. We accept that in

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<sup>32</sup> On the state of the art, sources and methodological problems involved in Women’s History in Middle Eastern Muslim societies, see Nikkie R. Keddie, “Problems in the Study of Middle Eastern Women”, *International Journal of Middle East Studies* 10 (1979), pp. 225-40; idem, “Introduction: Deciphering Middle Eastern Women’s History”, in Nikkie R. Keddie and Beth Baron (eds.), *Women in Middle Eastern History*, New Haven and London, 1991, pp. 1-22. For History of Childhood in Muslim societies see Franz Rosenthal, “Child Psychology in Islam”, *Islamic Culture* 26 (1952), pp. 1-22; Harald Motzki, “Das Kind und seine Sozialisation in der islamischen Familie des Mittelalters” in J. Martin and A. Nitschke (eds.), *Zur Sozialgeschichte der Kindheit*, Munich, 1986, pp. 391-441, and see Giladi, *Children of Islam*.

ancient and medieval times there existed a reciprocal relationship between gynaecological-“scientific” theories, on the one hand, and socio-religious attitudes towards women, on the other,<sup>33</sup> which means that religious scholars turned to medical theories, themselves created under the influence of images of women current in ancient times, in order to support, if not reinforce, their concepts of gender differences. Finally, the demographic and other social implications of the medieval Islamic theories of breastfeeding, particularly the way they influenced parent-child relationships and family structure, are outlined in Chapter 4 in terms of the ramifications these theories have in contemporary Muslim thought. This is exemplified in Appendix Two which includes two Arabic texts by medical doctors and a religious scholar dealing with the notion of milk banks in light of the Islamic rules of breastfeeding. A glossary of Arabic terms designating infant and child feeding is given in Appendix One.

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<sup>33</sup> See, for instance, Ron Barkai, *Les infortunes de Dinah: ou la gynécologie juive au Moyen-Age*, Paris, 1991, pp. 21-24.



## CHAPTER ONE

### THE FOUNDATIONS OF AN ISLAMIC “ETHICS OF BREASTFEEDING”

#### *Breastfeeding in the Qur’ān and in Qur’ān Commentaries*

Breastfeeding is mentioned in six Qur’ānic verses (2/233; 4/23; 22/2; 28/7,12; 65/6), all dating from the Medinan period.<sup>1</sup> In another verse, also from the Medinan period (but echoing the Meccan 31/14), 15 of sūra 46 (*al-Aḥqāf*—“The Sand Dunes”), we find a mention of weaning (*fiṣāl*), as part of the stages of life: “And we have charged man to show kindness to his parents; with trouble did his mother bear him, and with trouble did she bring him forth; his bearing and his weaning are thirty months (*wa-ḥamluhu wa-fiṣāluhu thalāthūna shahr(an)*)...”<sup>2</sup>

Of the five sūras that mention breastfeeding, three contain certain rulings that were to form the basis for the legal discussions we find in later Qur’ān commentaries, “oral tradition” (*ḥadīth*) and legal (*fiqh*) literature.

Other references in the Qur’ān are less explicit or even only sideways connected with breastfeeding. For example, that breastfeeding is a maternal instinct is implied in sūra 22 (*al-Ḥajj*—“The Pilgrimage”) which invokes the image of mothers refusing to breastfeed their own infants to portray the dramatic displacement that will shake the universe on the Day of Judgment: “On the day when ye see it, every suckling female will forget (forsake) what she has suckled (*tadhḥalu kull murḍi’a ‘amma arḍa’at*), and every pregnant female will cast her burden, and one will think the people drunk, though they are not drunk; but the punishment of Allāh is severe.”<sup>3</sup>

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<sup>1</sup> Though the story of Moses in sūra 28, may be based on earlier material; see below.

<sup>2</sup> Richard Bell, *The Qur’ān: Translated with critical re-arrangements of the sūras*, Edinburgh, 1939, (2 vols.), II, p. 509.

<sup>3</sup> Qur’ān 22/2; English translation: Bell, I, p. 316. For the theme of the dramatic events involved, according to the Qur’ān, in the Day of Judgement see, for instance, sūra 81 (*al-Takwīr*—“The Overthrowing”). Maḥmūd b. ‘Umar al-Zamakh-

Maternal love finds emphatic expression in sūra 28 (*al-Qaṣaṣ*, “The Recounting”) which tells the story of Moses. Unlike the rather dry, almost matter-of-fact way in which the Bible reports the events surrounding the rescue of the infant Moses,<sup>4</sup> the Qur’ān goes into great detail as to his mother’s emotions:

...So We suggested to Moses’ mother: Suckle him (*arḍi’ihī*) and when thou fearest for him, cast him into the sea, neither fearing nor grieving (*wa-lā takhāfi wa-lā tahzanī*); for We are going to restore him to thee, and to make him one of the envoys... On the morrow the heart of Moses’ mother was empty (*wa-aṣbaḥa fu’ād umm Mūsā fārigh(an)*)... She said to his sister: “Follow him”; so she watched him from afar, without their being aware. Now before this We had put a ban upon the breasts (nurses) for him, so she (Moses’ sister) said (to Pharaoh’s daughter): “Shall I direct you to a household who will take charge of him for you, and be to him good counsellor? So We

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shari (d. 1144 AD) suggests fear as the reason why mothers will stop nursing their infants on the Day of Judgement; see his commentary on the above-mentioned verse in *al-Kashshāf ‘an ḥaqā’iq ghawāmiḍ al-tanzīl wa-’uyūn al-aqāwīl fī wujūh al-ta’wīl*. (I used two editions: Cairo 1343/1924-5 and 1373/1953).

<sup>4</sup> “And there went a man of the house of Levi and took to wife a daughter of Levi And the woman conceived, and bare a son; and when she saw him that he was a goodly child she hid him three months.

And when she could no longer hide him, she took for him an ark of bulrushes, and daubed it with slime and with pitch, and put the child therein; and she laid it in the flags by the river’s brink.

And his sister stood afar off, to wit what would be done to him.

And the daughter of Pharaoh came down to wash herself at the river; and her maidens walked along by the river’s side; and when she saw the ark among the flags, she sent her maid to fetch it.

And when she had opened it, she saw the child: and behold, the babe wept. And she had compassion on him, and said, This is one of the Hebrews’ children.

Then said his sister to Pharaoh’s daughter, Shall I go and call to thee a nurse of the Hebrew women, that she may nurse the child for thee?

And Pharaoh’s daughter said to her, Go. And the maid went and called the child’s mother.

And Pharaoh’s daughter said unto her, Take this child away, and nurse it for me, and I will give thee thy wages. And the woman took the child and nursed it.” Exodus 2/1-9; English translation: *The Holy Bible*, London: British and Foreign Bible Society, n.d.

That the Exodus account is so matter-of-fact may have something to do with the practice that seems to have been common in ancient Egypt and Mesopotamia of abandoning unwanted babies in certain places at river banks; women watched from nearby observation spots what their subsequent fate would be while others would come there and pick up such an abandoned baby for adoption; see Michael Heltzer, “Two Ancient Oriental Notes on Biblical Issues,” in M. Heltzer et al. (eds.), *Studies in the Archaeology and History of Ancient Israel in Honour of Moshe Dotan*, Haifa, 1993, pp. 61-62.

restored him to his mother, that she might be comforted and not grieve (*fa-radadnāhu ilā ummihi kay taqarra ‘aynuhā wa-lā taḥzana*)...<sup>5</sup>

Qur’ān commentators also reveal much empathy with Umm Mūsā. Thus, of the five possible explanations Fakhr al-Dīn al-Rāzī (d. 1210 AD) offers in his *Mafātīḥ al-ghayb* for the phrase “the heart of Moses’ mother was empty” only one suggests that Moses’ mother was so confident God’s promise to protect her son would be fulfilled that her heart was empty of sorrow—the other four interpretations explain this emptiness of the heart as a state of horror and anxiety verging on madness.<sup>6</sup>

Verse 12 of sūra 28 shows that, as in other societies where wet nursing is an accepted practice, the Arabs of the early seventh century were well aware infants sometimes reject the milk of women other than their own mothers: “We had put a ban upon the breasts for him” means here that God made Moses refuse the breast of other women so as to ensure he would be returned to his mother.<sup>7</sup>

Two of the three Qur’ānic chapters that deal with legal aspects of breastfeeding touch upon the question of nursing in the context of divorce. The aim here is to protect repudiated wives while they are still in their lactation period and their nurslings. This emphasis becomes understandable if we take into account the long-term impact on Muḥammad’s preaching of the process of sedentism his tribe, the Quraysh, was undergoing. The new economic conditions that followed upon the tribe’s increasing involvement in trade were generally harsher for repudiated women as they no longer were taken back into their parental families, who previously had always guaranteed shelter and nourishment in return for the help they would give by tending and milking the herds. In town, repudiated wives of merchants could end up with no assistance whatsoever

<sup>5</sup> Qur’ān 28/7-12; English translation: Bell, II, pp. 374-375. See also sūra 20 (*Tāhā*), verses 38-40.

<sup>6</sup> Fakhr al-Dīn al-Rāzī, *Mafātīḥ al-ghayb*, Cairo, 1278/1862, commentary on Qur’ān 28/10.

<sup>7</sup> *Mafātīḥ al-ghayb*, commentary on Qur’ān 28/12: *Innahu ta’ālā ma’a ḥājatihī ilā ‘l-laban aḥdatha fīhī niṣār(a)‘l-ṭab’ ‘an laban sā‘ir(i)‘l-nisā’ ja-lī-dhālika lam yarḍa’. Aw aḥdatha fī labanihinna min(a) ‘l-ṭa’m mā yanṣuru ‘anhu ṭab’uhu aw waḍa’a fī laban ummihi ladhdha ja-lammā ta’awwadahā lā jurma kāna yakrahu laban ghayrihā.... kānat ummuhu qad arḍa’athu thalāthat ashhur ḥattā ‘arafa riḥahā. See also the commentary on the same verse in al-Zamakhsharī’s *al-Kashshāf*.*

where they then faced the stark choice between prostitution and starvation.<sup>8</sup>

Verse 233 of sūra 2 (*al-Baqara*—"The Cow") reads:

Those (amongst divorced women) who bear children suckle their children two full years for whosoever wishes the period of suckling to be complete (*Wa-l-wālidāt yurđī'na awlādahunna ḥawlayni kāmīlayni li-man arāda an yutimma'l-raḍā'a*); it is the duty of him to whom the child is borne to provide reputably for their food and clothing; no one is to be charged beyond his means, the mother is not to be oppressed by her child (or: she should not harm her former husband on account of her child<sup>9</sup>) nor he to whom the child is borne by his child (or: the father should not harm the mother on account of his child); the like duty rests upon the heir. But if the two, by mutual agreement and consultation desire [weaning] (earlier), there is no fault upon them (*fa-in arādā fiṣāl(an) 'an tarād(in) minhum wa-tashāwur fa-lā junāḥa 'alayhimā*); and if ye desire to seek nursing for your children, there is no fault upon you when ye hand over what ye have given reputably (*wa-in aradtum an tastarđī'ū awlādakum fa-lā junāḥa 'alaykum idhā sallamtum mā ātaytum bi-l-ma'rūf*)...<sup>10</sup>

In a different wording this ruling reoccurs in verse 6 of sūra 65 (*al-Ṭalāq*—"Divorce") where the nursling's mother, after she has been repudiated by the father, is explicitly referred to in terms of a potential mercenary nurse:

Lodge them (your divorced wives) where ye lodge according to your circumstances and do not put pressure upon them so as to straiten them; if they are pregnant, bear their expenses until they are delivered of what they bear; and if they then suckle (the child) for you, give them their hires, and consult together reputably; but if ye find mutual difficulties, some other woman will suckle (the child) for him (*fa-in arḍa'na lakum fa-ātūhunna ujūrahunna wa-'tamirū baynakum bima'rūf wa-in ta'āsartum fa-saturđī'u lahu ukhrā*).<sup>11</sup>

Although both these verses deal with nursing within the specific context of divorce, they must have been relevant to many couples in medieval Muslim societies, where it was common for a man to take recourse to divorce by repudiation when, for instance, the

<sup>8</sup> Bianquis, "The Family in Arab Islam," p. 614. See also W. Montgomery Watt, *Muhammad at Medina*, Oxford, 1956, pp. 272-289.

<sup>9</sup> See al-Zamakhshari's commentary on Qur'ān 2/233.

<sup>10</sup> English translation: Bell, I, p. 33.

<sup>11</sup> English translation: Bell, II, p. 587. See also "Raḍā' (In Arabian society)", *Encyclopaedia of Islam* (new ed.) (hereafter *El<sup>2</sup>*), Vol. 8, p. 362 (J. Chelhod).

woman he had married remained barren or gave birth to female children only.<sup>12</sup> Furthermore, Muslim exegetes, especially those for whom Qur'ān 2/233 extended beyond divorcees to include parents in general, went on to distill from this verse a number of general rules on how nurslings and nurses ought to be treated.<sup>13</sup>

What clearly emerges from both Qur'ān 2/233 and 65/6 is that the institution of non-maternal nursing, as it was known at the time of Muḥammad, received the sanction of the new religion of Islam. Indeed, from medieval Qur'ānic commentaries one gleans the impression that, later on, wet nursing was practiced in vast areas of the Muslim world. For example, in commenting on "...if you desire to seek nursing for your children..." (2/233) Muḥammad b. Jarīr al-Ṭabarī (d. 923 A.D.) in what is generally regarded as the most comprehensive and complete representation of all early Qur'ānic exegesis, his *Jāmi' al-bayān*, describes under what circumstances infants could be handed over to wet nurses:

If their mothers (the divorced wives of the children's father) refuse to suckle them for the same wages demanded by others (i.e., wet nurses) (*idhā abat ummahātuhum an yurḍi'nahum bi-'lladhī yurḍi'nahum bihi ghayruhunna min(a) l-ajr*),<sup>14</sup> or in case the mother has no milk any more and you (the father) fear the life of your children is in danger (*aw min khīfat ḍay'a minkum 'alā awlādikum bi-'nqī'a' albān ummahātihim*).<sup>15</sup>

Fakhr al-Dīn al-Rāzī is even more specific in his commentary:

If the woman married another and the fulfilling of her duties toward that husband (namely, her duties to have sexual relations with him and to bear him children) prevents her from suckling (*idhā tazawwajāt ākhar fa-qiyāmuḥā bi-ḥaqq dhālika l-zawj yamna'uhā 'an(i) l-radā'*); if her husband divorced her and she is averse to suckling in order [to remain attractive enough so] that another man will marry her (*waminḥā annahu idhā ṭalaqahā l-zawj(u) l-awwal fa-qad takrahu l-radā' hattā yatazawwaja bihā zawj ākhar*); if she refuses to accept the child

<sup>12</sup> Bianquis, "The Family in Arab Islam," pp. 610, 618, 620, 623.

<sup>13</sup> Al-Rāzī's commentary on Qur'ān 2/233: *l'lam anna fi qawlihi ta'ālā "wa-l-wālidāt"—thalāthat aqwāl: al-awwal anna l-murād minhu mā ash'ara zāhir(u) l-lafz bihi wa-huwa jamī'(u) l-wālidāt sawā' kunna muzawwajāt aw muṭlaqāt... Wa-l-qawl(u) l-thānī l-murād minhu l-wālidāt(u) l-muṭlaqāt...*

<sup>14</sup> A mother cannot claim her right to refuse suckling, and suckling is enforced upon her, when the child rejects other nurses; see Muḥammad b. Jarīr al-Ṭabarī, *Jāmi' al-bayān 'an ta'wīl āy al-Qur'ān*, commentary on 2/233 (I used two editions: Cairo 1302/1884-1321/1903 and 1374/1955) and below, Chapter 3.

<sup>15</sup> *Jāmi' al-bayān*, commentary on Qur'ān 2/233.

with the intention to hurt her former husband for having divorced her and to vex him (*wa-minhā an ta'bā 'l-mar'a qabūl(a) 'l-walad idhā'(an) li-l-zawj(i) 'l-muṭliq wa-ihāsh(an) lahu*); if she becomes ill or the flow of her milk stops (*wa-minhā an tamraḍa wa-yanqati'a labanuhā*). In each of these cases, it is permissible to turn from the mother to another woman (*jāza 'l-'udūl 'an(i) 'l-umm ilā ghayrihā*) on condition that a wet nurse can be found and that the child accepts her milk. If not, it is the mother's duty to suckle him (*fa-ammā idhā lam najid murḍi'a ukhrā aw wajadnāhā wa-lākinna 'l-ṭifl lā yaqbalu labanahā fa-hāhunā 'l-irḍā' wājib 'alā 'l-umm*).<sup>16</sup>

Thus, divorce seems to have contributed significantly to why infants were handed over to wet nurses. Moreover, the above quotations seem to indicate that instances of children being badly treated, even neglected and abandoned, by their mothers after they were divorced may not have been so rare.

That the Qur'ān approved of mercenary nursing was understood to mean that no mother could be forced to suckle her baby unless this meant the nursling's health would be endangered (see below, Chapter 3). Still, the Qur'ān and, more explicitly, Qur'ān commentators continue to present maternal nursing as always the most natural and therefore preferable way of feeding infants. This tallies fully with the general image in early Islamic sources of mothers as affectionate and full of care towards their children.<sup>17</sup> As al-Rāzī puts it:

Suckling is not imposed on the mother. This injunction ("Those who bear children suckle their children...") was intended to urge [rather than oblige mothers to suckle] since it is more proper for the child to be fostered with his mother's milk than with milk of other women and since a mother's concern (for his well-being) is always more complete than that of others can ever be (*Inna 'l-irḍā' ghayr wājib 'alā 'l-umm fa-hādhā 'l-amr maḥmūl 'alā 'l-nadb min haythu anna tarbiyat(a) 'l-ṭifl bi-laban(i) 'l-umm aṣlah lahu min sā'ir(i) 'l-albān wa-min haythu anna shafaqat(a) 'l-umm 'alayhi atamm min shafaqat ghayrihā*).<sup>18</sup>

<sup>16</sup> Al-Rāzī's commentary on Qur'ān 2/233.

<sup>17</sup> See Aliyah Schleifer, *Motherhood in Islam*, Cambridge, 1986, pp. 47-48, 70.

<sup>18</sup> Al-Rāzī, on Qur'ān 2/233. The reward assured, according to a *ḥadīth* report, for nursing mothers ("And when she delivers, not a mouthful of milk flows from her and not an instance of the child's suck, but that she receives, for every mouthful and for every suck, the reward of one good deed. And if she is kept awake by her child at night, she receives the reward of one who frees seventy slaves for the sake of Allāh", Schleifer, pp. 52-53) is another means to encourage mothers to themselves breastfeed their infants.

In the same vein, Qur’ān commentators inveigh against fathers who take infants away from their mothers (i.e., from wives they divorced but who agree to continue suckling their babies), as well as against mothers who are able, yet refuse, to suckle, and other women who want to stop breastfeeding and ask the nursing’s father to look for a wet nurse after their infants had already clearly grown attached to them.<sup>19</sup> In spite of the fact that children, as in all patrilineal societies, are attributed to the father (who is therefore held responsible for their welfare, including their nursing),<sup>20</sup> and that the mother is often thought of as a “vessel,” her womb a “place of safekeeping” (*aw’iya, mustawda’āt*) at the discretion of her husband,<sup>21</sup> mothers always have the prior claim to breastfeeding.<sup>22</sup> This, according to al-Rāzī, explains why they are mentioned first in Qur’ān 2/233 (“Those who bear children suckle their children...”):

God, may He be exalted, recommended firstly that the mother show regard to her infant and [only] secondly recommended that fathers do so (*Innahu ta’ālā waṣṣa l-umm bi-ri’āyat(i) l-ṭifl awwal(an) thumma waṣṣa l-ab bi-ri’āyat(i) thāniy(an)*). This indicates that the infant’s need for its mother’s attention is stronger than the need for its father’s. For no mediator whatsoever comes between the infant and its mother’s care, whereas the care of its father reaches him through mediation... This is to prove that the mother’s right (to nurse the infant and foster it) is greater than the father’s (*Wa-hādihā yadullu ‘alā anna ḥtiyāj(i) l-ṭifl ilā ri’āyat(i) l-umm ashadd min(i) ḥtiyāj(i) ilā ri’āyat(i) l-ab li-annahu laysa bayna l-ṭifl wa-bayna ri’āyat(i) l-umm wāsita l-battata ammā ri’āyat(u) l-ab fa-innamā taṣilu ilā l-ṭifl biwāsita... wa-dhālika yadullu anna haqq(a) l-umm akthar min haqq(i) l-ab*).<sup>23</sup>

When, in 2/233, it defines the period of nursing as “two full years”, the Qur’ān may have helped consolidate a norm that already existed in Middle Eastern societies.<sup>24</sup> As we saw above, the verse was

<sup>19</sup> See al-Ṭabarī’s, al-Zamakhsharī’s and al-Rāzī’s commentaries on Qur’ān 2/233.

<sup>20</sup> See: “Ṣaghīr,” *ET*, Vol. 8 (A. Giladi), pp. 821-27, esp. p. 824.

<sup>21</sup> Al-Zamakhsharī’s commentary on Qur’ān 2/233: *Fa-in qulta: li-mā qila “al-mawūd lahu” dūna l-wālid ? Qultu: li-yu’lama anna l-wālidāt innamā waladna lahum li-anna l-awlād li-l-ābā’ wa-li-dhālika yunsabūna ilayhim, lā li-l-ummahāt*. Cf. Athalya Brenner, *The Intercourse of Knowledge: On Gender, Desire and ‘Sexuality’ in the Hebrew Bible*, Leiden, 1997, p. 35.

<sup>22</sup> See, for instance, al-Ṭabarī’s commentary on Qur’ān 65/6.

<sup>23</sup> Al-Rāzī’s commentary on Qur’ān 2/233.

<sup>24</sup> For Islamic medical theories concerning the nursing period, see below, Chapter 2. A nursing period of around two years was common in Jewish societies,

originally revealed and then generally interpreted within the context of divorce. Qur'ān commentators see the main purpose of the verse as lying in the time framework it establishes for nursing in order to prevent (or to help solve) conflicts between divorced parents, not in the least because of the economic significance these could have: "The verse supplies proof concerning the time limit of nursing in case the infant's parents are divided on this issue" (*innahu dalāla 'alā 'l-ghāya 'llatī yuntahā ilayhā fī raḍā'(i) 'l-mawlūd idhā 'khtalafa wālidāhu fī raḍā'ihī*).<sup>25</sup>

How to harmonize Qur'ān 2/233 and 46/15 is a question also raised in this context. According to 46/15, pregnancy and nursing last altogether thirty months (*wa-ḥamluhu wa-fiṣāluhu thalāthūna shahr(an)*). Does this mean that only infants born after a six-month pregnancy should be suckled for two full years, as it says in 2/233, and that those born after seven, eight or nine months be suckled for twenty-three, twenty-two or twenty-one months, respectively? Al-Ṭabarī, in his commentary on 2/233, argues that two years are the minimal formal period of nursing for all children, regardless of their time of birth. Important for our purpose is that when discussing this part of the verse, many commentators take the opportunity to raise questions and draw conclusions of a more general character. For instance, following certain legal authorities, they regard suckling up to two years, and two years only, as creating an impediment to marriage (see below in this chapter and Chapter 3). This is not to say that a woman may not suckle individual children for longer periods, but rather that these two years are to be seen as the crucial time for a child's physical formation, and

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including Middle Eastern communities, and there are indications that in medieval Europe Jewish children were nursed for two to three years; see S. Kottke, "Childhood in Medieval Jewry as Depicted in Sefer Hasidim (12-13th Century): Medical, Psychological and Educational Aspects," *Koroth* 8(1984), p. 380; Goitein, *A Mediterranean Society*, Vol. 3, p. 233. In medieval Europe, weaning after a nursing period of about two years was also common; see, for instance, Mary Martin McLaughlin, "Survivors and Surrogates: Children and Parents from the Ninth to Thirteenth Centuries," in Lloyd DeMause (ed.), *The History of Childhood*, New York, 1974, p. 116.

<sup>25</sup> Al-Ṭabarī's commentary on Qur'ān 2/233. See also al-Rāzī on the same verse: *...Inna 'l-maqṣūd minhu qat'(u) 'l-tanāzu' bayna 'l-zawjayni idhā tanāza'ā fī muddat(i) 'l-raḍā' fa-qaddara Allāh dhālika bi-'l-ḥawlayni ḥattā yarjī'ā ilayhi 'inda wuqū'(i) 'l-tanāzu' baynahumā.*

thus count as the formal limit as far as impediments to marriage are concerned.<sup>26</sup>

The Qur’ān mentions milk mothers and milk sisters amongst those with whom a man may not have sexual relations—“Forbidden to you are your mothers, your daughters, your sisters, your parental aunts, brothers’ daughters, sisters’ daughters, *those who are your mothers by having suckled you, those who are your sisters by suckling (wa-ummahātukum(u) ‘llātī arḍa’nakum wa-akhawātukum min(a) ‘l-raḍā’a)...*” (sūra 4, *al-Nisā’*—“The Women”, verse 23).<sup>27</sup> In so doing, the Qur’ān adds a unique element—which may have been rooted in pre-Islamic Arabic custom<sup>28</sup>—to a long Semitic tradition of prohibitions of marriage, actually extending the range of incest much beyond the way it is defined in Judaism and Christianity.<sup>29</sup> Implicit here is the notion, also found in Greek medical thought, that the milk of a nursing woman is formed from the blood of her womb, and therefore ties created by suckling are like ties of kinship.<sup>30</sup> As we shall see below, there are *ḥadīth* reports which develop this idea even further, postulating a connection between the nurse’s milk and her husband’s semen. However, nowhere in the Qur’ān, nor for that matter in Qur’ān commentaries, do we find an explanation of why this prohibition of marriage created by breastfeeding was established. Though exemplifying how this Qur’ānic injunction was

<sup>26</sup> See al-Ṭabarī’s commentary on Qur’ān 2/233: ‘*An Ibn ‘Abbās qāla: laysa yuḥarramu min(a) ‘l-raḍā’ ba’da al-tamām, innamā yuḥarramu mā anbata ‘l-laḥm wa-ansha’a ‘l-‘izzām.* Al-Rāzī, quoting al-Shāfi’ī in his commentary on the same verse, says: *Innahu laysa ‘l-maqsūd min qawlihi “li-man arāda an yutimma ‘l-raḍā’a” huwa ‘l-tamām bi-ḥasb ḥājat(i) ‘l-ṣabiyy ilā dhālika idh min(a) ‘l-ma’lūm anna ‘l-ṣabiyy kamā yastaghni ‘an(i) ‘l-laban qabla tamām(i) ‘l-ḥawlayni fa-qad yaḥtāju ilayhi ba’da ‘l-ḥawlayni li-ḍu’f fi tarkibihi li-anna ‘l-atfāl yatafawātūna fī dhālika. Wa-idhā lam yajuz an yakūna ‘l-murād bi-‘l-tamām hādihā ‘l-ma’nā wajaba an yakūna ‘l-murād huwa ‘l-ḥukm(u) ‘l-makḥṣūṣ(u) ‘l-muta’allaq bi-‘l-raḍā’.*

<sup>27</sup> English translation: Bell, I, pp. 71-72 (emphasis added).

<sup>28</sup> Watt (*Muhammad at Medina*, p. 281) suggests that “the retention—and indeed extension—of the principle that milk-relationship is on the same level as blood-relationship may be regarded as a concession to matrilineal groups. Possibly some of those which practised forms of polyandry avoided undue endogamy by making certain degrees of milk-relationship a barrier to marriage.” See also “Raḍā”, *EF*, Vol. 8 (J. Schacht and J. Burton), p. 362.

<sup>29</sup> Françoise Héritier, *Les deux sœurs et leur mère: Anthropologie de l’inceste*, Paris 1994, pp. 87-91; Fildes, *Wet Nursing*, p. 29.

<sup>30</sup> See W. Robertson-Smith, *Kinship and Marriage in Early Arabia*, London, 1907, p. 176.

later dramatically widened, Qur'ān exegetes leave us without any clue as to the social and intellectual developments which could have motivated the complex elaborations we encounter in *ḥadīth* and *fiqh* writings. Says al-Rāzi:

Allāh specified in this verse the prohibition to marry milk mothers and milk sisters (*al-ummahāt wa-l-akhawāt min jihat(i) 'l-radā'a*), but He did not mean to limit it to them only. That can be derived from the Prophet's saying: "What is forbidden as a result of blood relationships is forbidden as a result of milk relationships as well (*fa-innahu yuḥarramu min(a) 'l-radā' mā yuḥarramu min(a) 'l-nasab*)."<sup>31</sup> The Prophet clarified that Allāh, by using the term *ukht* (lit. blood sister) to designate a milk sister, subjected suckling to the same rules of blood relations (*annahu ta'ālā ajrā 'l-radā' majrā 'l-nasab*). God prohibited marriage with women of seven categories of blood relationship, divided into two groups: The first consists of one's mother and daughters—one's relatives by birth; the second consists of sisters, paternal aunts, maternal aunts, brothers' daughters and sisters' daughters, all related to one through brotherhood. Now, when He laid down the rules regarding suckling, God mentioned only one (representative) category for each group, namely, the milk mother, on the one hand, and the milk sister, on the other, thus drawing attention to the rest of (the members of) these groups and equating blood with milk relations. The content of the above-mentioned prophetic saying therefore corresponds with the content of the Qur'ānic verse.<sup>31</sup>

### *Breastfeeding in Early "Oral Tradition"*

*Aḥādīth* (sing. *ḥadīth*) are the formal "traditions" that, according to the Muslim view, go back to the Prophet Muḥammad and his companions. A rich and highly diversified source, they may be said to mirror the problems that engaged the early Muslim communities, that is, those of about the first two centuries and a half of Islamic history, while also telling us which were the religious solutions they found for these problems. "Ultimate authority resided in the Qur'ān as God's word, but *ḥadīth* transmission provided the primary mechanism for answering the questions and responding to the spiritual needs of a growing community of

<sup>31</sup> Al-Rāzi's commentary on Qur'ān 4/23.

Muslims spread from Spain to Pakistan."<sup>32</sup> Most of the questions that *ḥadīth* responded to "deal with personal matters of ritual and behaviour, exactly those areas of greatest concern to new Muslims trying to integrate themselves into the community."<sup>33</sup>

To a large extent, Qur'ān commentaries and, as we will see below, biographies of the Prophet Muḥammad are also made up of sayings attributed to the Prophet himself or of accounts of events that took place during his life which were then transmitted, so it is understood, by those who were his close companions. In this they are similar to many other genres of early Arabic Islamic prose literature. If we assume that *ḥadīth* collections of the *sunan* or *ṣaḥīḥ* type are representative of the wide scope of ritual and social topics that preoccupied the early Muslim communities, a systematic survey of these collections may tell us something about the relative importance questions related to breastfeeding held for them.

Among the compilers of the six canonical collections of *ḥadīth* dating from the ninth century AD, only two, Muslim b. Ḥajjāj (d. 875 AD) and Abū 'Īsā al-Tirmidhī (d. 883-4, 888-9 or 892-3 AD), dedicated a separate chapter (*kitāb*)—and then only a short one—to breastfeeding (*raḍā'*).<sup>34</sup> The same is true of one earlier collection, not included in "The Six Books (*al-kutub al-sitta*)", namely, *al-Muwatta'* by Mālik b. Anas (d. 795 AD). In all other collections there are only scattered references to breastfeeding, often appearing within the context of marriage (*nikāḥ*). In other words, breastfeeding itself does not seem to have been very prominent among the problems that called for clarification when the new socio-religious norms of Islam were being codified. This may well have been because Islam hardly introduced any changes where breastfeeding was concerned but left existing practices more or less intact, at the most lending them religious sanction. Wet nursing is an illuminating example. As demonstrated in the Prophet's biographies, this pre-Islamic Arabic institution was adopted by Islam without much discussion, almost taken for granted we might say.<sup>35</sup> At the same

<sup>32</sup> Richard W. Bulliet, *Islam: The View from the Edge*, New York, 1994, p. 36.

<sup>33</sup> *Ibid.*, p. 32.

<sup>34</sup> *Kitāb al-raḍā'* in *Sunan al-Tirmidhī* contains, in its last part, *ḥadīth* reports on other themes, particularly reports on marriage.

<sup>35</sup> Terms like *mustarḍa'*, "one for whom a wet nurse has been sought or demanded" (E. Lane, *Arabic-English Lexicon*, London and Edinburgh, 1874, Part 3, p. 1098), also show that wet nursing existed. See, for instance, Aḥmad b. Ḥanbal, *Musnad*,

time, if, as we assume, mercenary, “professional” nursing was never as widespread as either maternal or voluntary non-maternal nursing during the first centuries of Muslim history, this may explain the almost total silence towards the practice in *ḥadīth* collections, including chapters dedicated to questions of hire (*ijāra*).<sup>36</sup> Telling is also that when it comes to the arrangements to be made according to the Qur’ān between divorced parents for the nursing of their infants, none of the chapters on breastfeeding mentioned above offers anything by way of further elaboration.

There is, however, one significant aspect in which the new religion represented a deviation from or, rather, went beyond monotheist traditions, and that is non-maternal suckling as an impediment to marriage. And it is here that we begin to find growing efforts to lay down rulings or establish uniform practices.

Although in 4/23 the Qur’ān explicitly mentions only milk mother and milk sisters, Qur’ān commentators, as we already saw, on the whole explain the verse as intended to duplicate for milk relationships the list of those blood relatives with whom a Muslim man is forbidden to contract marriage.<sup>37</sup> Following are some of the common versions of the ruling as found in *ḥadīth* collections: *Yahrumu min(a) ’l-riḍā’a ma yahrumu min(a) ’l-wilāda; al-Riḍā’a tuḥarrimu mā tuḥarrimu ’l-wilāda; Inna Allāh ḥarrama min(a) ’l-riḍā’a mā ḥarrama min(a) ’l-nasab*.<sup>38</sup> Viewed in the light of Qur’ān 4/23, the ruling is understood to mean that to the list of women a man is forbidden to marry because of milk kinship are now added his milk niece (maternal and paternal), milk aunt, milk daughter, and the milk

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Cairo, 1312-13/1894-5, Vol. 4, p. 73 (...*Kāna* [Rabī’a b. al-Ḥirth b. ‘Abd al-Muṭṭalib] *mustarḍa’(an) fi Banī Layth*); p. 74 (...*Wa-kāna li-Abī Bakr ’indānā bint mustarḍa’a*), Vol. 6, p. 320 (...*Fa-akhadhahā ju-’starḍa’a lahā...*).

<sup>36</sup> See A.J. Wensinck, *A Handbook of Early Muhammadan Tradition*, Leiden, 1960, p. 178 (s.v. “nursing”).

<sup>37</sup> See “Raḍā’,” *EF*<sup>2</sup>, Vol. 8, p. 361. Gertrude Stern (*Marriage in Early Islam*, London, 1939, p. 98) assumes that “while it may have been a pre-Islamic custom in Makkah for a man not to marry his foster [milk]-mother or sister, it was apparently permissible for him to marry any of his foster [milk]-relatives.” This means that while the Qur’ān confirmed an existing usage, it was the *ḥadīth* which added a new Islamic element to the legislation in regard to impediments to marriage stemming from breastfeeding.

<sup>38</sup> See, for instance, *Sunan al-Tirmidhī*, Cairo, 1956, Vol. 3, p. 452; *Ṣaḥīḥ Muslim*, Cairo, 1955, Vol. 2, pp. 1068-69; *Ṣaḥīḥ al-Bukhārī*, Cairo, 1958, Vol. 3, p. 222.

mother of his wife. It was also forbidden for a man to be married to or own simultaneously two women who were milk sisters.<sup>39</sup>

Testimony that this ruling was unanimously accepted and implemented by the religious authorities at the time is given by al-Tirmidhī: *Wa-l-‘amal ‘alā hādhā ‘inda ‘āmmat ahl(i) l-‘ilm min aṣḥāb(i) l-nabiyy ṣallā Allāh ‘alayhi wa-sallama wa-ghayrihim, lā na‘lamu bay-nahum fī dhālika khtilāf(an)*. However, he adds that when the relationships creating an impediment to marriage were extended to include also those between certain in-laws, the situation proved more problematic and gave rise to disputes: *Wa-l-‘amal ‘alā hādhā ‘inda ba‘d (!) ahl(i) l-‘ilm... karihū laban(a) l-faḥl*.<sup>40</sup> Justification for widening the application of the rule in this way came from a *ḥadīth* account which tells how the Prophet had allowed his wife, ‘Ā’isha, to meet, unveiled, a man named Aflaḥ, even though the Qur’ān ordered “believing women” to “throw their scarves over their bosoms and not show their ornaments except to their husbands or their fathers or the fathers of their husbands or to their sons or the sons of their husbands, or their brothers or the sons of their brothers, or the sons of their sisters”, etc.<sup>41</sup> The explanation given was that he had become ‘Ā’isha’s (milk) uncle —‘amm—because, as Aflaḥ himself put it, “my brother’s wife suckled you (‘Ā’isha) with my brother’s milk” (*arḍa’atki ‘mra’at akhī bi-laban akhī*).<sup>42</sup> That this new ruling was accepted not without hesitation, or even with reservation, emerges from the immediate protest another *ḥadīth* in the same collection attributes to ‘Ā’isha: “Oh, Messenger of God, a woman suckled me, not a man!” (*arḍa’atnī l-mar’a wa-lam yurḍi nī l-rajul*).<sup>43</sup> There is also a *ḥadīth* account in which ‘Ā’isha is found as actually narrowing down the number of in-law relationships to which the rule is meant to apply when she refrains from appearing unveiled in the presence of men who had been suckled by her

<sup>39</sup> See “Raḍā’,” *EF*<sup>2</sup>; Héri-tier, *Les deux sœurs*, p. 11: Sexual relations between, e.g., a man and two (strange, i.e. not his own) sisters, two brothers and two (strange) sisters, a man with a woman and her (not his own) daughter, all involve contact between the identical humors of two relatives through the mediation of a third person and are therefore forbidden.

<sup>40</sup> *Sunan al-Tirmidhī*, Vol. 3, pp. 452, 454. On *laban al-faḥl*, see below, pp. 79-81.

<sup>41</sup> Qur’ān 24/31, English translation: Bell I, p. 339. However, uncles are not mentioned here in the category of men allowed to meet women unveiled although Qur’ān 4/23 prohibits marriage with nieces; see “Raḍā’,” *EF*<sup>2</sup>.

<sup>42</sup> *Ṣaḥīḥ al-Bukhārī*, Vol. 3, p. 222.

<sup>43</sup> *Ibid.*, Vol. 7, p. 49; see also Stern, *Marriage in Early Islam*, p. 100.

brothers' wives, while treating those who had been suckled by her sisters and sisters' daughters like blood relatives.<sup>44</sup>

This concept of "sire's milk" (*laban al-fahl*) as developed in *hadīth* literature was apparently inspired by ancient popular ("instinctive") ideas about generation, gestation, nursing and breeding, which held that it was the man's semen which causes the flow of breast milk. The ties this created not only between the nursling and the woman who breastfed him or her, but also between the nursling and the woman's husband were similar to blood ties. This made the man the actual "owner" of the milk, while the woman was seen merely as the milk's "hostess" (*hôte de passage*).<sup>45</sup>

The notion of sire's milk is behind yet another ruling: a woman and a man who separately suckled in their infancy from two women unrelated to one other but married to the same husband are not allowed to get married since "the semen... which impregnated both [wet nurses] and which was the source of the milk of both was one (*al-liqāḥ wāḥid*) and ... the two sucklings had thus become as though they were the children of the two women's husband."<sup>46</sup>

If, as Françoise Héritier has suggested, this concept of *incest du deuxième type* originates in a notion of fluids circulating from one body to another, creating the risk, in certain instances, that "identical humours" may come into contact,<sup>47</sup> then this, too, may help us understand why Islam included milk relationships among those that formed impediments to marriage. The question still to be answered is: Why did Islam remain unique in this regard, at least among the main monotheistic cultures?<sup>48</sup>

<sup>44</sup> Mālik b. Anas, *al-Muwatta'*, Cairo (?), Dār al-Nafā'is, 1977, p. 415.

<sup>45</sup> G.H. Bousquet, *L'Éthique sexuelle de l'Islam*, Paris 1990, appendix I: "De la parenté de lait selon la loi musulmane," especially pp. 232, 233-4; Héritier, *Les deux sœurs*, pp. 312-13.

<sup>46</sup> *Al-Muwatta'*, p. 414, and see Lane, *Arabic-English Lexicon*, Part 7, p. 2668.

<sup>47</sup> Héritier, *Les deux sœurs*, p. 11.

<sup>48</sup> For Abdelwahab Bouhdiba, the Islamic recognition of kinship through suckling is another confirmation of his view of *nikāḥ* (marriage) "as an instigator of taboos and as a specific form of relation with the sacred through the sexual... [B]y virtue of the various prohibitions that accompany it, *nikāḥ* is as much a magical operation. It implies a veritable sacralization of man, who has become conscious of his body and of his soul and of the mystical links that unite him, beyond the human community, with nature and with God." Abdelwahab Bouhdiba, *Sexuality in Islam*, London, 1985, pp. 17, 18.

The social impact and significance of the milk bonds created by suckling were remarkable and, to a great extent, are still so today.<sup>49</sup> As other societies used such mechanisms as adoption and *Blutbrüderschaft* when they wanted to create legal pseudo-familial relations with certain people (or groups) outside the original framework of kinship, Islam emphasized the importance of milk relationships.<sup>50</sup> As we see from the *ḥadīth* literature, almost from the very beginning breastfeeding was practiced in the Islamic community so as to broaden the network of relatives on whom one could rely for assistance and cooperation.<sup>51</sup>

As I already briefly indicated above, milk relationships also functioned as a mechanism to enlarge the family, so as to extend the realm of permissible behaviour, for example, "when it [was] impossible to achieve the physical and visual separation between strangers." Janet Abu Lughod has described the *ḥāra* passage, the "blind alley or dead-end court street", as a "semi-private space" created in those parts of big cities like today's Cairo where "densities are high and houses too small to contain the manifold activities women are supposed to do in them." May not the agelong Middle Eastern Islamic practice of non-maternal breastfeeding be playing a role in establishing such spaces even in times and places where settlements were less crowded?<sup>52</sup> The following *ḥadīth* may serve as an illustration: When he was still a baby, 'Ā'isha is said to have arranged for Sālim b. 'Abdallāh Ibn 'Umar (b. al-Khaṭṭāb) to be suckled by her sister, Umm Kulthūm, clearly with the idea that when he grew up, she would be allowed to have free and open social contact with him.<sup>53</sup> For this to be valid, the boy should have been suckled for at least five (according to others, ten) sessions (see below), but Umm Kulthūm fell ill after only the third session and the scheme had to be abandoned. Ḥafṣa, another of the

<sup>49</sup> See below, Chapter 4.

<sup>50</sup> Bousquet, *L'Éthique sexuelle*, p. 225; Héritier, *Les deux sœurs*, pp. 18-22; Stern, *Marriage in Early Islam*, p. 103. Cf. also Jane Khatib-Chahidi, "Milk Kinship in Sh'ite Islamic Iran," in Maher (ed.), *An Anthropology of Breast-Feeding*, pp. 110-112.

<sup>51</sup> Soraya Altorky, "Milk-Kinship in Arab Society: An Unexplored Problem in the Ethnography of Marriage," *Ethnology* 19 (1980), p. 243.

<sup>52</sup> Janet L. Abu Lughod, "The Islamic City—Historic Myth, Islamic Essence and Contemporary Relevance," *International Journal of Middle East Studies* 19 (1987), pp. 167-169.

<sup>53</sup> Qur'ān 33/53,55; see also Barbara Freyer-Stowasser, *Women in the Quran, Traditions and Interpretations*, New York and Oxford, 1994, pp. 90-91.

Prophet's wives, and a daughter of 'Umar b. al-Khaṭṭāb, is reported to have been more successful when she had 'Aṣim b. 'Abdallāh b. Sa'd sent as an infant to her sister Fāṭima, guaranteeing that she would have free access to him in years to come.<sup>54</sup>

In the same vein, creating milk relationships offered a way out of difficulties that arose when Islam abolished formal adoption (Qur'ān 33/5).<sup>55</sup> An allegedly disputed case speaks of a young ("bearded", *dhū liḥya*) man (Sālim the adopted son of Abū Ḥudhayfa, one of the Prophet's companions) whose presence in the home of his now "former" foster parents became problematic because of the intimate mother-son relationship that had naturally developed over the years between Abū Ḥudhayfa's wife and Sālim. The solution offered by the Prophet was that she should "suckle him five times" (*arḍi'ihī khams raḍa'āt*)—symbolically, for there is no reason to assume that she had any milk—whereafter "Sālim became forbidden to her (for marriage) through her (symbolic) milk, and she regarded him as her milk son (*Wa-yaḥrumu bi-labanihā. Wa-kānat tarāhu 'bn(an) min(a) 'l-riḍā'a*)."<sup>56</sup> It was this precedent, we are told in Mālik's *al-Muwatta'*, that 'Ā'isha made frequent use of when she asked those with whom she wished to have informal social contacts (grown-up children? young men?) to suckle from her sister Umm Kulthūm. Other wives of the Prophet disagreed sharply: That, in regard to Sālim, Muḥammad had allowed milk relationships to be created with a grown-up child or even a mature man and had been satisfied with a minimum of five sucklings, whereas in all others he had insisted on at least ten, meant for them that his ruling in this particular case could only be viewed as a one-time exception.

It happened more than once, as reported in *ḥadīth*, that Muslims—the Prophet himself among them—had to cancel marriage plans, or even break off existing marriage ties post factum, because a milk relationship was found to exist between the couple<sup>57</sup>—situations not unfamiliar to modern Muslim societies either, as we

<sup>54</sup> Mālik b. Anas, *Al-Muwatta'*, pp. 414-15.

<sup>55</sup> Amira al-Azhary Sonbol, "Adoption in Islamic Society: A Historical Survey" in Warnock Fernea (ed.), *Children in the Muslim Middle East*, p. 47.

<sup>56</sup> Mālik b. Anas, *Al-Muwatta'*, pp. 416-17; *Ṣaḥīḥ Muslim*, Vol. 2, pp. 1077-78.

<sup>57</sup> See, for instance, *Ṣaḥīḥ Muslim*, Vol. 2, p. 1072; *Ṣaḥīḥ al-Bukhārī*, Vol. 3, p. 222, and below.

shall see.<sup>58</sup> In such cases, the testimony of the nursing woman herself, "even (be she) a black slave", is generally sufficient.<sup>59</sup>

Creating milk kinship with neighbours, who often would be members of the same extended family, reduced the range of marriage options with members within that family, in any case limited by the Qur'ān to paternal cousins only.<sup>60</sup> Thus, this group of *ḥadīth* reports more clearly reflects the emerging strategy whereby early Muslim believers were encouraged to seek their marriage partners beyond the boundaries of their own patrilineal-patrilocal extended families—or perhaps, if one accepts that some of the reports indeed go back to the first generations of Muslims, even beyond the boundaries of the tribe of Quraysh—so as to consolidate a community that would be not only larger than one based solely on blood ties but also inspired by a shared world view and common aims.<sup>61</sup>

By showing that the early religious authorities made such keen efforts to delineate exactly what milk kinships could be created through breastfeeding, these *ḥadīth* reports underline the unique direction that the "great tradition" of Islam was taking in this regard. The diversity of opinions they harbour, at the same time, may be representative of a variety of local customs that continued to prevail, thus bypassing the new Islamic rules or at least reducing their practical implications.

There is a dominant trend in *ḥadīth* literature which excluded *riḍā'at al-kabīr*, "suckling a grown-up", claiming that as far as impediments to marriage are concerned only the suckling of infants not

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<sup>58</sup> See Altorky, p. 241, and below, Chapter 4.

<sup>59</sup> For cases of untying marriage contracts on the basis of an isolated testimony of a nurse (including a black female slave) who breastfed both husband and wife while they were infants, see *Ṣaḥīḥ al-Bukhārī*, Vol. 3, pp. 226-27, Vol. 7, p. 13. For the dispute about whether the testimony of a single woman in this regard should be accepted, see *Sunan al-Tirmidhī*, Vol. 3, pp. 457-58.

<sup>60</sup> In the course of time Muslims stuck to the custom of cousin marriages to such an extent that to abandon them for extrafamilial unions was regarded as part of the social aberrations and moral decay that signal the "signs of the hour" (portents of the beginning of the end of the world); see Jane Idleman Smith and Yvonne Yazbeck Haddad, *The Islamic Understanding of Death and Resurrection*, Albany, 1981, p. 66.

<sup>61</sup> That marriage between close relatives may result in physical and mental deficiencies in their offspring is an awareness also reflected in some early Muslim sources; see Qāsim Shihāb Ṣabbāh, *ʿIlm al-nafs al-nabawiyy*, Beirut, 1995, p. 119.

older than two years (*dūna 'l-hawlayni*),<sup>62</sup> that is, suckling intended to “stave off hunger” (*fa-innamā 'l-riḍā'a min(a) 'l-majā'a*),<sup>63</sup> is effective: *Lā riḍā'a illā li-man urḍi'a fī 'l-ṣighar wa-lā riḍā'a li-kabīr*.<sup>64</sup> Two years, the formal minimal period of nursing (according to Qur'an 2/233, see above), is regarded as crucial for the physical development of the child. However, from accounts that show the Prophet reacting angrily when this rule was ignored, we can learn that not all members of early Muslim communities were adhering to it or accepted it as normative. Muḥammad is found warning his wives to verify carefully whether men they regarded as their milk brothers, and consequently met unveiled, really passed the test of the two-year rule.<sup>65</sup> 'Umar b. al-Khaṭṭāb reaffirmed that “the suckling of infants, and infants only, creates milk bonds” (*fa-innamā 'l-riḍā'a—riḍā'at(u) 'l-ṣaghīr*)<sup>66</sup> when he ruled in favour of a man whose wife had suckled a female slave with the express purpose of preventing her husband from having a sexual relationship with the woman.

Establishing the minimum number of suckling sessions which, within the first two years of a nursling's life, would guarantee milk kinship was another source of discord. Strictest in this regard was an interpretation that grounded itself in a literal understanding of Qur'an 4/23 and uncompromisingly identified blood with milk. This meant that a single suck of even one drop of milk was enough to create an impediment to marriage between the nursling, on the one hand, and its nurse and her relatives, on the other.<sup>67</sup> This attitude is rejected by another group of *ḥadīth* reports (e.g., *Lā tuḥarrimu 'l-maṣṣa wa-'l-maṣṣatāni* and others)<sup>68</sup> which claim that no less than five, or even ten, successive sucklings are required to create milk bonds. 'Ā'isha is said to be the source of the argument

<sup>62</sup> See, for instance, *Sunan al-Tirmidhī*, Vol. 3, p. 459.

<sup>63</sup> See, for instance, *Ṣaḥīḥ Muslim*, Vol. 2, p. 1078. See also “Raḍā',” *El'*, pp. 361-62.

<sup>64</sup> See, for instance, Mālik b. Anas, *al-Muwaṭṭa'*, p. 414.

<sup>65</sup> See, for instance, *Ṣaḥīḥ Muslim*, Vol. 2, p. 1078.

<sup>66</sup> Mālik b. Anas, *al-Muwaṭṭa'*, p. 417.

<sup>67</sup> *Ibid.*, pp. 414, 415: *Mā kāna fī 'l-hawlayni wa-in kāna maṣṣa wāḥida fa-huwa yuḥarrimu; kulku mā kāna fī 'l-hawlayni wa-in kānat qaṭra wāḥida fa-huwa yuḥarrimu; yuḥarrimu qatīl(u) 'l-raḍā' wa-kathīruhu idhā waṣala ilā 'l-jawf*, *Sunan al-Tirmidhī*, Vol. 3, p. 456.

<sup>68</sup> See, for instance, *Ṣaḥīḥ Muslim*, Vol. 2, pp. 1073-74; *Musnad Ibn Hanbal*, Vol. 4, p. 4.

that the limiting number of ten, then five, suckling sessions was initially laid down by the Qur'ān and only later abrogated. However, five sucklings remained legally valid even without explicit textual support (*naskh(u) 'l-tilāwa dūna 'l-hukm*).<sup>69</sup>

A number of important social implications follow from provisions that the *aḥādīth* entail concerning sexual relationships with a nursing woman. In Europe, the prohibitions that governed conjugal relations from the Middle Ages until early modern times were one reason why many husbands discouraged maternal breastfeeding and were in favour of handing their newborn infants over to wet nurses. Sexual intercourse was forbidden for the entire nursing period (16-24 months), since it was believed that it would "weaken and corrupt" breast milk.<sup>70</sup> This was a notion that dated back to Hellenistic medical theories and that, as we shall see in Chapter 2, was also adopted by medieval Muslim doctors.

However, the *ḥadīth* literature also offers legitimation for the opposite attitude, whereby arguments in favour of non-maternal breastfeeding are pushed aside (though, here too, the matter is not unequivocal). The Prophet is claimed to have hesitated before making up his mind: "I was about to prohibit the *ghīla* (sexual intercourse with lactating women), but I observed the Byzantines and the Persians, and saw them do it, and their children suffered no harm."<sup>71</sup> We could read into this that Muḥammad was aware that different, even contradictory, notions and practices existed.<sup>72</sup> Moreover, there is a supplementary remark to another version of this *ḥadīth* in which coitus interruptus (*'azl*) is denounced as "minor infanticide" (*wa'd khafīyy*),<sup>73</sup> possibly intended to encourage

<sup>69</sup> See, for instance, *Ṣaḥīḥ Muslim*, Vol. 2, p. 1075; Mālik b. Anas, *al-Muwatta'*, p. 418. See also "Raḍā'", *EF*<sup>2</sup>, p. 362.

<sup>70</sup> Mathews Grieco, "Breastfeeding, Wet Nursing and Infant Mortality," pp. 18-19. See also McLaughlin, "Survivors and surrogates," p. 115; Shulamith Shahar, "Infants, Infant Care and Attitudes towards Infancy in Medieval Lives of Saints," *The Journal of Psychohistory* 10 (1983), p. 183.

<sup>71</sup> Mālik b. Anas, *Al-Muwatta'*, p. 418; see also Basim F. Musallam, *Sex and Society in Islam*, Cambridge, 1983, pp. 15-16.

<sup>72</sup> Stern (*Marriage in Early Islam*, pp. 96-97) suggests that Muḥammad's hesitations were caused by contradictory attitudes towards this question prevalent in Mecca, on the one hand, and Medina, on the other.

<sup>73</sup> *Ṣaḥīḥ Muslim*, Vol. 2, p. 1067.

the view that men could have full sexual relations (i.e., without using contraceptive methods) with nursing women.

Still, there are also indications in *ḥadīth* reports of early Muslim parents who, probably influenced by pre-Islamic local traditions, had sufficiently strong reservations about *ghīla*—themselves supported by prophetic sayings<sup>74</sup>—to look for alternatives to maternal breastfeeding.<sup>75</sup> The Prophet is said to have married Umm Salama while she was still nursing the infant she had conceived by her late husband, Abū Salama (who had died three months earlier), but to have been incapable of consummating the marriage as long as his new wife was nursing her baby daughter—consummation only followed after the nursling had been handed over to a wet nurse.<sup>76</sup> However, whether this was because the Prophet was aware sexual relations with a nursing woman could cause harm to the nursling or because the very presence of the baby suckling at her mother's breast formed some kind of obstacle remains unclear.

As we shall see below, biographies of the Prophet contain a number of striking illustrations of long-term relationships between nurses and their nurslings. A *ḥadīth* report responding to the question “what would free one from one's debt to his wet nurse?” (*mā yudhhibu madhammat(a) 'l-radā'*) offers a more formal expression, in material terms, of how greatly wet nurses were valued by suggesting “the best and most precious: a male or female slave” (*ghurra: 'abd aw amma*).<sup>77</sup>

Central to Islamic legal and medical thought is the idea that breastfeeding is essential, not just physically but also psychologically, for an infant's well-being. Instances of this we will encounter further below, but I wish to mention here briefly that in a number of *ḥadīth* reports the notion appears from a unique angle: that of children's fate in the Hereafter. Bereaved parents are comforted with the

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<sup>74</sup> See, e.g., *Musnad Ibn Hanbal*, Vol. 6, pp. 453, 457, 458: *Lā taqtulū awladākum sirr(an) fa-inna 'l-ghayl yudriku 'l-fāris fa-yad'athiruhu 'an farasihi* (“Do not kill your children secretly, for the milk of a pregnant mother overtakes the horseman while he is on horseback and throws him”, as translated by G.H.A. Juynboll, “The *ḥadīth* in the Discussion on Birth Control,” *Actas do IV Congresso de Estudos Arabes e Islamicos*, Leiden, 1971, p.379, and see also p. 378).

<sup>75</sup> Cf. Fildes, *Wet Nursing*, pp. 6, 8, 9.

<sup>76</sup> *Musnad Ibn Hanbal*, Vol. 6, p. 320.

<sup>77</sup> *Sunan al-Tirmidhī*, Vol. 3, p. 459.

promise that the suckling period of an infant they lost will be completed in Paradise. Upon the death of his son at the age of sixteen months, the Prophet expresses this as follows: "My son Ibrāhīm died as a nursling (lit.: at [his nurse's] breasts), but he has two nurses who will complete his nursing period in Paradise (*Ibrāhīm(u) 'bnī fa-innahu māta fī 'l-thady fa-inna lahu zi'rayni yukam-milāni raḍā'ahu fī 'l-janna*)."<sup>78</sup> In a somewhat different guise, the same motif can be found in one of the consolation treatises for bereaved parents compiled in the fourteenth century.<sup>79</sup> In his *Tasliyat ahl al-maṣā'ib [fī mawt(i) 'l-awlād wa-'l-aqārib]* ("Consolation for Those in Distress on the Death of Children and Relatives"), Muḥammad al-Manbijī (d. 1383 AD) cites an existing but further unidentified narration which tells of breasts hanging from a certain tree in Paradise for infants to suckle (*Inna fī 'l-janna shajara taḥmilu 'l-thadā yartaḍi'u minhā 'l-wildān*).<sup>80</sup>

Though perhaps limited as a historical source, the vivid description of the Prophet Muḥammad's infancy as found in *Sīrat Rasūl Allāh* ("Biography of God's Messenger"), a branch of the vast *ḥadīth* literature, can be useful from at least two points of view.<sup>81</sup> First, hagiographic literature often places miraculous events within or against the background of as ordinary and normal a setting as possible so as to make them stand out as all the more unique. In other words, in some of its details the following account may well reflect reality as it existed in the eighth and ninth centuries, the time of the *sīra's* authors, if not in the time of the Prophet Muḥammad himself (d. 632 AD). Second, and more importantly, regardless of their historicity, traditions like this played a significant role in consolidating the "Islamic ethics of breastfeeding" as established by the Qur'ān and other branches of *ḥadīth*:

<sup>78</sup> *Musnad Ibn Hanbal*, Vol. 3, pp. 112, 297; Vol. 4, p. 304.

<sup>79</sup> On the Arabic-Islamic genre of consolation treatises for bereaved parents, see Giladi, *Children of Islam*, pp. 11-13; idem, "The child was small... not so the grief for him' Sources, Structure and Content of al-Sakhāwī's Consolation Treatise for Bereaved Parents," *Poetics Today* 14 (1993), pp. 367-86; idem, "Islamic Consolation Treatises for Bereaved Parents: Some Bibliographical Notes," *Studia Islamica* 81 (1995), pp. 197-202.

<sup>80</sup> Abū 'Abdallāh Muḥammad al-Manbijī, *Tasliyat ahl al-maṣā'ib [fī mawt(i) 'l-awlād wa-'l-aqārib]*, Medina 1380/1960, p. 111; see also Idleman-Smith and Yazbeck-Haddad, *The Islamic Understanding of Death and Resurrection*, p. 173.

<sup>81</sup> See, for instance, Michael Cook, *Muḥammad*, Oxford, 1983, pp. 61-67.

Jahm b. Abū Jahm... on the authority of ‘Abdallāh b. Ja‘far b. Abū Ṭālib... informed me that Ḥalīma, the Apostle’s foster-mother, used to say that she went forth from her country with her husband and little son whom she was nursing, among the women of her tribe, in search of other babies to nurse (*taltamisu l-ruḍa‘ā*). This was a year of famine when they were destitute. She was riding a dusky she-donkey of hers with an old she-camel which did not yield a drop of milk. They could not sleep the whole night because of the weeping of her hungry child. She had no milk to give him, nor could their she-camel provide a morning draught, but we were hoping for rain and relief.

[Ḥalīma tells:] I rode upon my donkey which had kept back the other riders through its weakness and emaciation so that it was a nuisance to them. When we reached Mecca, we looked out for foster children, and the Apostle of God was offered to every one of us, and each woman refused him when she was told he was an orphan [i.e. a fatherless infant], because we hoped to get payment from the child’s father (*innamā kunnā narjū l-ma‘rūf min abī l-ṣabiyy*). We said, “an orphan! and what will his mother and grandfather do?” and so we spurned him because of that. Every woman who came with me got a suckling except me, and when we decided to depart I said to my husband: “By God, I do not like the idea of returning with my friends without a suckling; I will go and take that orphan.” He replied, “Do as you please; perhaps God will bless us on his account.” So I went and took him for the sole reason that I could not find anyone else. I took him back to my baggage, and as soon as I put him in my bosom, my breasts overflowed with milk which he drank until he was satisfied, as also did his foster-brother. The both of them slept, whereas before this we could not sleep with him. My husband got up and went to the old she-camel and lo, her udders were full; he milked it and I drank of her milk until we were completely satisfied, and we passed a happy night. In the morning my husband said: “Do you know Ḥalīma, you have taken a blessed creature?” I said, “By God, I hope so.” Then we set out... Then we came to our dwellings in Banū Sa‘d country, and I do not know a country more barren than that. When we had him with us, my flock used to yield milk in abundance. We milked them and drank while other people had not a drop, nor could they find anything in their animals’ udders... We ceased not to recognize this bounty as coming from God for a period of two years when I weaned him (*ḥattā maḍat sanatāhu wa-ḥaṣaltuhu*). He was growing up as more of the other children grew and by the time he was two, he was a well-made child. We brought him to his mother, though we were most anxious to keep him with us because of the blessing which he brought us. I said to her: “I should like you to leave my little boy with me until he becomes a big boy (*law tarakti bunayya ‘indī ḥattā yaghluza*), for I am afraid on his account of the pest of Mecca (*fa-innī akhshā ‘alayhi wabā’ Makka*).” We persisted until

she sent him back with us... [After *sharḥ al-ṣadr*—the opening of the Prophet's bosom and the purification of his heart by two angels of human appearance, an event alluded to in Qur'ān, 94/1] his [foster] father said to me: “I am afraid that this child has had a stroke, so take him back to his family before the result appears.” So we picked him up and took him to his mother who asked why we had brought him when I had been anxious for his welfare and desirous of keeping him with me. I said to her: “God has let my son live so far and I have done my duty. I am afraid that ill will befall him, so I have brought him back to you as you wished...” The Apostle of God used to say to his companions: “I am the most Arab of you all. I am of Quraysh and I was suckled among the Banū Sa'd b. Bakr (*Anā a'rabukum: anā Qurashīyy wa-'sturḍi'tu fī Banī Sa'd b. Bakr*).”<sup>82</sup>

As we can infer from this narration, wet nursing was not unknown in Arabic-Muslim societies during the first centuries of Islam, although in its mercenary form (“We hoped to get payment from the child's father”<sup>83</sup>) it was probably less common than in medieval and early modern Europe and significantly different on a number of other points.<sup>84</sup> The nursing story in Muḥammad's early biographies may have served to underscore the high social status of his family, as perceived by Muslim city dwellers of the eighth/ninth centuries. According to later versions, Muḥammad was suckled by several (eight, even eleven) wet nurses.<sup>85</sup> Be that as it may, the *sīra* reflects the belief of sedentary Arabs in pre-Islamic times and

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<sup>82</sup> ‘Abd al-Mālik Ibn Hishām (d. 823 AD), *Sīrat Rasūl Allāh* (ed. F. Wüstenfeld), Göttingen, 1858, pp. 103-106, English translation: Alfred Guillaume, *The Life of Muḥammad: A Translation of Ishāq's Sīrat Rasūl Allāh with Introduction and Notes*, Oxford, 1955, pp. 70-72.

<sup>83</sup> See also Abū al-Fidā' Ismā'il b. 'Umar Ibn Kathīr (d. 1373 AD), *Mawlid Rasūl Allāh ṣal'am wa-raḍā'uhu* (ed. Maḥmūd al-Arna'ūt and Yāsīn Muḥammad al-Sawās), Damascus and Beirut, 1987, p. 34: ...*Wa-dhālika anna ahl Makka kānū yab'athūna bi-atfālihim ma'a nisā'(i) 'l-bawādī yurḍi'nahum bi-'l-uḡra li-ṣiḥhat bilādihim*; p. 35: *Qālat Ḥalīma: fa-mā minnā 'mra'a illā wa-qad 'urīḍa 'alayhā Rasūl Allāh ṣal'am fa-ta'bāhu li-kawnihī yatīm wa-kunnā innamā naṭlubu 'l-birr min abī 'l-ṣabiyy*.

<sup>84</sup> For medieval Europe, see, e.g., Shulamit Shahar, *Childhood in the Middle Ages*, London and New York, 1990, Chapter 4, pp. 53-76. Wet nursing, generally by non-Jewish nurses, is mentioned in ancient Jewish sources, such as the Bible (e.g., Genesis 24/59, 2 Kings 11/2), Mishnah, Midrash and Talmud; see Kottke, “Childhood in Medieval Jewry,” pp. 380-81. Goitein suggests, however, that in Jewish communities of the medieval Arab world, nursing was invariably done by the mother. Goitein, *A Mediterranean Society*, Vol. 3, p. 233.

<sup>85</sup> ‘Alī b. Burhān al-Dīn al-Ḥalabī (975/1567-8 - 1044/1635), *Insān al-'uyūn fī sīrat al-amīn wa-l-ma'mūn*, Cairo, n.d., p. 100.

perhaps also of city dwellers in the medieval Muslim Middle East, that putting children out to nurse with the desert tribes was a healthy thing to do; at the very least, it protected them from plagues (“for I am afraid on his account of the pest of Mecca”).<sup>86</sup> Furthermore, in medieval and early modern Europe, country women were preferred as wet nurses because their milk was believed to be more abundant and healthier.<sup>87</sup> The conviction that through her milk the infant absorbs the physical as well as mental features of its nurse—*inna ’l-laban yu’dī* (“the milk passes [natural dispositions]”)<sup>88</sup>—while sometimes used as an argument against wet nursing, often served to support it. As we have seen, Ibn Hishām’s account ends with the Prophet declaring that, owing to his Qurashi origin, on the one hand, and his nursing period with a Bedouin woman, on the other, “I am the most Arab of you all”, that is, of his followers, the city dwellers, who had not had the privilege of being sent to the desert for wet-nursing.<sup>89</sup>

Seeing to it that the infant was properly fed was the responsibility of the father. He too was in charge of looking for a wet nurse when the need arose (“We said, ‘an orphan [a fatherless infant]! and what will his mother and grandfather do?’”).

Understandably, the nurse-child bond was often stronger than the mother-child bond and could even replace it,<sup>90</sup> witness the way in which the Prophet’s biographies describe the relationship between Muḥammad and Ḥalīma: The wet nurse regards Muḥammad as her own son (“I should like you to leave my little boy with me until he becomes a big boy”) and, while finally returning him to his mother, mentions with satisfaction that due to her proper treatment (and, of course, God’s blessing) the infant managed to survive—a remarkable achievement given the high mortality rates of infants and children at the time in general and of children who

<sup>86</sup> See also the quotation from Ibn Kathīr’s *Mawlid Rasūl Allāh*, above, n. 83 (...*li-siḥhat bilādihim*). Later Muslim jurists, in contrast, are found to insist that infants should not be separated from their mothers (see below, Chapter 3).

<sup>87</sup> Matthews Grieco, “Breastfeeding, Wet Nursing and Infant Mortality,” p. 28.

<sup>88</sup> Abū ‘Alī Faḍl Allāh al-Ṭabarsī (d. 1153 A.D.), *Makārim al-akhhlāq*, Cairo, n.d., p. 176. See also al-Rāghib al-İṣfahānī (d. 1108 A.D.), *Muḥāḍarāt al-udabā’ wa-muḥāwarāt al-shu’arā’ wa-l-bulaghā*, Cairo, 1287/1870, p. 207: *Ta’thīr al-raḍā’ fī ’l-walad*, and cf. Shāhar, *Childhood in the Middle Ages*, pp. 53-54; see also below, Chapter 2.

<sup>89</sup> Ibn Hishām, *Sīrat Rasūl Allāh*, p. 106, English translation, p. 72.

<sup>90</sup> Matthews Grieco, “Breastfeeding, Wet Nursing and Infant Mortality,” pp. 36-7.

were put out with wet nurses in particular ("God has let my son live so far and I have done my duty").<sup>91</sup>

On the part of the Prophet, who, according to his biographers, lost his mother at the age of six (or eight),<sup>92</sup> the relationship with Ḥalīma is said to have been a warm and long-lasting one, as between mother and son: "When she entered (his place), he called out 'my mother, my mother' and reached for his cloak which he then spread for her to sit on (*Fa-lammā dakhalat 'alayhi qāla: ummī, ummī wa-'amada ilā ridā'ihī fa-basaṭahu lahā faqa'adat 'alayhi*)."<sup>93</sup> The one mention we have of intimate physical contact between them may relate to a ceremonial act intended to show the Prophet's support of Ḥalīma: "The Prophet's wet nurse came to his place. He spread his cloak out for her, inserted his hand into her gown and placed it on her chest until he had fulfilled her wish (*Jā'at zi'r(u) 'l-nabiyy ilā 'l-nabiyy ṣallā Allāh 'alayhi wa-sallama fa-basaṭa lahā ridā'ahu wa-adkhala yadahu fī thiyābiha wa-waḍa'ahā 'alā ṣadrihā. Qāla: wa-qaḍā ḥājatahā*)."<sup>94</sup> Interestingly enough, this ceremonial act involving Ḥalīma is repeated (probably on the same occasion) with Abū Bakr and 'Umar as well,<sup>95</sup> as if Muḥammad's future heirs, as leaders of the Muslim community, promise to keep his pledge to his wet nurse.

It is said that the Prophet supported Ḥalīma in her old age (with the help of his first and well-to-do wife, Khadija) and that he wept when the sad news of her death reached him: *Fa-akhbarathu* (Ukht Ḥalīma) *bi-mawtiḥā fa-dharafat 'aynāhu*.<sup>96</sup> The sources also depict caring and warm relations on the part of Muḥammad towards his milk sister (Ḥalīma's daughter), as well as towards Thuwayba (a freed slave of Abū Lahab, Muḥammad's uncle) who, albeit for a short period, is said to have been the Prophet's first wet nurse.<sup>97</sup>

<sup>91</sup> Cf. *ibid.*, esp. pp. 39-47; Shahar, *Childhood in the Middle Ages*, pp. 67-68.

<sup>92</sup> Aḥmad b. Yahyā al-Balādhūrī (d. 302/892 ?), *Ansāb al-ashraf* (ed. Muḥammad Ḥamidullāh), Cairo, 1959, p. 94.

<sup>93</sup> Abū 'Abdallāh Muḥammad Ibn Sa'd (d. 845), *Kitāb al-ṭabaqāt al-kabīr* (ed. E. Sachau), Vol. 1, Leiden, 1904, p. 71. See also Ibn Hishām, *Sīrat Rasūl Allāh*, pp. 106, 107, where Ḥalīma is called *ummuhu* (i.e., *Umm Muḥammad*) *al-Sa'diyya*.

<sup>94</sup> Ibn Sa'd, *Ṭabaqāt*, pp. 71. I would like to thank Professor Albert Arazi, of the Hebrew University of Jerusalem, for helping me in interpreting this passage.

<sup>95</sup> Ibn Sa'd, *Ṭabaqāt*, p. 72.

<sup>96</sup> Al-Balādhūrī, *Ansāb al-ashraf*, p. 95.

<sup>97</sup> *Ibid.*, pp. 93, 96.

By describing such familiarity between the adult Muḥammad, the Prophet of Islam, and his former wet nurses, the biographers may have meant implicitly to strengthen the legitimization given by the Qur'ān to the pre-Islamic institution of wet nursing. Through the living example of the Prophet they further consolidate the Qur'ānic rules concerning the impediments to marriage between any man and his milk mother or milk sister (Qur'ān 4/23; see above, and below, Chapter 3). For instance, detailed information is given about the ancestry of Muḥammad's milk parents, Ḥalīma and her husband, as if they were his blood parents. In addition, all the children suckled by Thuwayba, who therefore had to be regarded as the Prophet's brothers and sisters, are named.<sup>98</sup> The new lineage thus created through milk kinship was not only the source of the responsibility that Muḥammad felt towards his wet nurses and their relatives,<sup>99</sup> it also limited his marriage options in an important way: When the Prophet is asked whether the rumours are true about his planned marriage to Durra Bint Abī Salama, he denies them by saying: "How can I do that? Did not Thuwayba suckle me as well as her [i.e. Durra's] father? (*Fa-kayfa? wa-qad arḍa'atnī wa-abāhā Thuwayba!*)."<sup>100</sup> When, at one point, Muḥammad refrains from marrying the beautiful daughter of Ḥamza, we find that the explanation ascribed to the Prophet contains the actual formulation of a clear legal ruling (echoing Qur'ān 4/23): "She is the daughter of my milk brother. Do you not know that God prohibited in the domain of milk kinship what He prohibited in the domain of blood kinship? (*Innahā 'bnat akhī min(a) 'l-riḍā'a. Amā 'alimta anna Allāh ḥarrama min(a) 'l-riḍā'a mā ḥarrama min(a) 'l-nasab?*)."<sup>101</sup>

Another detail in the stories of Muḥammad's nursing that may have its roots in a common usage, but certainly is used to support a Qur'ānic recommendation (2/233, see above), is at what age a child ought to be weaned: "We ceased not to recognize this bounty

<sup>98</sup> Ibn Hishām, *Sīrat Rasūl Allāh*, p. 103 (English translation, p. 70); al-Ḥalabī, *Insān al-'uyūn*, p. 102.

<sup>99</sup> Al-Balādhūrī, *Ansāb al-ashrāf*, p. 96: After the death of Thuwayba, Muḥammad is described as trying to gather information on surviving relatives of hers (whom he regards as his own relatives as well).

<sup>100</sup> *Ibid.*

<sup>101</sup> Ibn Sa'd, *Ṭabaqāt*, p. 68.

as coming from God for a period of two years, when I weaned him."<sup>102</sup>

Again, leaving aside the question of the historical authenticity of the Prophet's early biographies, it seems reasonable to assume that the descriptions of Muḥammad's childhood reflect a number of aspects that make up the real lives of children in the Middle East during the first three centuries of Islam. And, as we have seen, in all these the biographies mirror, and at the same time help establish, certain social norms that may have their origin in nursing but whose importance extends far beyond the mere act of breastfeeding.

Having embraced breastfeeding as obviously springing from a deep maternal instinct and as beneficial to mother and child alike, on the normative level the Qur'ān acknowledges and deals with only two kinds of problems. First are the arrangements that ought to guarantee the well-being of the nursling in case of divorce. Responsibilities of each of the parents are defined, as is the period of breastfeeding, while mercenary wet nursing receives sanction as an option when maternal breastfeeding proves impossible. Second are impediments to marriage originating through breastfeeding which, at this early stage of Islamic legislation, were limited to marriage between a man and his milk mothers or milk sisters.

As we have seen, *ḥadīth* literature then expanded this narrow normative foundation laid down by the Qur'ān, as did Qur'ān commentaries throughout the Middle Ages. This meant that some of the Qur'ānic provisions originally drafted within the limited context of split families were now applied to nurslings in general. Furthermore, the range of the prohibitions of marriage was extended as far as it would go, with the result that a whole series of questions which had never before arisen in the Qur'ān became urgent and were argued about in detail, not only in terms of breastfeeding proper, but also regarding broader issues such as whether a man was allowed to have sexual relations with a nursing woman, etc.

In other words, Qur'ān and *ḥadīth* supplied the early normative foundations which, as we will see in Chapter 3, jurisconsults in

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<sup>102</sup> See also Ibn Sa'd, *Ṭabaqāt*, p. 70; al-Balādhūrī, *Ansāb al-ashraf*, p. 94; al-Ḥalabī, *Insān al-'uyūn*, p. 108.

general and *muftīs* in particular—those “specialists in religious law” who were looked upon to “give an authoritative opinion”<sup>103</sup>—further embroidered in their legal discussions and arguments. First, we turn to examine some learned as well as popular medical-gynaecological theories prevalent in the pre-modern Muslim world—another source of inspiration for jurists when dealing with the question of breastfeeding and its various ramifications.

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<sup>103</sup> Joseph Schacht, *An Introduction to Islamic Law*, Oxford, 1964, p. 301 (Glossary).

## CHAPTER TWO

### BREASTFEEDING IN ARABIC-ISLAMIC MEDICINE

Maternal breastfeeding or wet nursing? And which is the more beneficial, not just for the baby but also for the mother? When is it advisable to begin adding other kinds of food, if at all? Is breast-milk best just because it is highly nourishing or also because the way it affects an infant's development may extend beyond the merely biological? What is the actual "source" of the milk, i.e., where in the female body is it produced and what produces it? What way is there to check, or even improve, the quality of human breastmilk? What traits should one look for in a wet nurse and how can one guarantee she will maintain good health? What kind of harm, if any, can be done by the sexual activities a nursing woman may engage in? How often should a baby be breastfed, and what are the optimal methods? Until what age should an infant be nursed and how should it be weaned? These are some of the many questions Muslim doctors raise in the medical encyclopaedias they compiled and deal with more particularly in the treatises they dedicated to gynaecology, obstetrics and pediatrics.<sup>1</sup>

The Arabic-"Islamic" medicine we find in these works is more or less a reformulation, starting in the ninth century AD, of the medicine that had been handed down from late Antiquity. For the Arabs, Galen and, to a lesser extent, Hippocrates, were their most significant sources of inspiration,<sup>2</sup> while for gynaecology we also find the influence of Soranus.<sup>3</sup> The Islamic Middle Ages are therefore

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<sup>1</sup> Giladi, *Children of Islam*, pp. 4-8.

<sup>2</sup> Manfred Ullmann, *Islamic Medicine*, Edinburgh, 1978, pp. XI, 10, 11; Monica Helen Green, *The Transmission of Ancient Theories of Female Physiology and Disease through the Early Middle Ages* (unpublished Ph.D dissertation), Princeton, 1985, pp. 116, 117.

<sup>3</sup> Although Soranus's writings, compiled at the beginning of the second century AD, were never translated into Arabic, some of his theories found their way into the Muslim works; see Ullmann, *Islamic Medicine*, p. 15; idem, *Die Medizin im Islam*, Leiden, 1970, p. 77; Michael W. Dols, "Syriac into Arabic: The Transmission of Greek Medicine", *Aram* 1 (1989), pp. 45-52; Gerrit Bos, "Ibn al-Jazzār on Women's

a period in which the question of originality does not arise... there was no real scientific research and there was no desire for empirical knowledge of reality... the doctor, too, when dealing with the phenomenon of illness was not trying to discover new knowledge, or to reinterpret the processes which go on in the human body, or to develop new and more adequate therapies. For him, the literature of the ancients is both example and authority; he believes that in it a certain natural truth is laid down which he can only think about, develop, and comment on. His standpoint in regard to antiquity is not critical or reflective but naive and accepting.<sup>4</sup>

Yet, it remains difficult to assess to what extent Muslim doctors actually applied Greek medical theories in their everyday medical practice and what impact practical medicine may have had on the consolidation of theory. That some of the writers of “Islamic” Arabic treatises on pediatrics were also practitioners, not merely theoreticians, that they were active in training younger generations of physicians, and that their writings sometimes enjoyed wide circulation<sup>5</sup> means that at least part of their theories were put into practice, that is among well-to-do city dwellers: “The urban poor and the rural population were practically deprived of all medical help, and in these areas when anyone offered aid to a sick person, he was either a quack or a very ignorant doctor.”<sup>6</sup> Since Muslim physicians generally tended to entrust midwives with the task of treating women’s diseases, the gap between theory and practice might have been wider in gynaecology. At the same time, jurists decreed that when their intervention was absolutely necessary, physicians were allowed to observe and check a woman’s “forbidden parts”.<sup>7</sup>

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Diseases and their Treatment”, *Medical History* 37 (1993), pp. 298-299; Green, *The Transmission of Ancient Theories*, p. 116; Barkai, *Les infortunes de Dinah*, pp. 117-119.

<sup>4</sup> Ullmann, *Islamic Medicine*, pp. 23-24; see also Françoise Micheau, *Savoir médical et société dans le Proche-Orient arabe du IIe/VIIIe au VIIIe/XIIIe siècle* (Habilitation à diriger des recherches), Paris, 1995, p. 181.

<sup>5</sup> See, for instance, Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-sibyān wa-tadbīruhum* (ed. Maḥmūd al-Ḥabīb al-Hīla), Tunis, 1968, p. 28 (Editor’s Introduction). On the wide circulation of Ibn al-Jazzār’s medical writings in Egypt and Syria, see Micheau, *Savoir médical et société*, pp. 189, 191-2.

On Aḥmad b. Muḥammad b. Yaḥyā al-Baladī, the author of *Kitāb tadbīr al-ḥabālā wa-l-atfāl*, see Muwaffaq al-Dīn Ibn Abī Uṣaybi’a, *‘Uyūn al-anbā’ fī ṭabaqāt al-aṭibbā’*, Cairo, 1882, Vol. 1, p. 247.

<sup>6</sup> Ullmann, *Islamic Medicine*, p. 49; see also Micheau, *Savoir médical et société*, p. 171.

<sup>7</sup> Bos, “Ibn al-Jazzār on Women’s Diseases”, pp. 305, 312.

Still, quite a few notions of “learned medicine” on breastfeeding found their way into other branches of writing where they were adduced to support moral-legal rulings.<sup>8</sup> Following are a few examples.

*Tuhfat al-mawdūd bi-ahkām al-mawlūd* (“A Present for the Beloved on the Rules Concerning the Treatment of Infants”) compiled by Ibn Qayyim al-Jawziyya, a fourteenth-century Ḥanbali theologian and jurisconsult, is a remarkable instance of how Islamic writings could weave popularized medical theories into legal discussions. Relying on the writings of earlier Arabic doctors, Ibn Qayyim al-Jawziyya, albeit in a somewhat simplistic way, seeks to elaborate the relevant materials in a Muslim spirit.<sup>9</sup> When it comes to instructions such as how often a baby should be breastfed and when and how an infant should be weaned, the inspiration of Muslim doctors of the tenth and eleventh centuries AD, and through them the influence of Greek medical theories, are particularly felt.<sup>10</sup>

But even much earlier we find how learned medical notions had made their way into other branches of a more popular character. In his *Kitāb al-ḥayawān* (“The Book of Animals”), al-Jāḥiẓ (d. 869 AD), “the archetypal representative of *adab* literature”,<sup>11</sup> quotes the mother of a Jāhili poet, Ta’abbata Sharran, boasting how well she had always treated her son as she had, among other things, refrained from intercourse for the entire period that she had breastfed him. Following a common medical concept, the author explains that the milk of a pregnant woman can cause harm to the nursling.<sup>12</sup> Al-Jāḥiẓ subscribes here to another notion well rooted in the early Islamic worldview, i.e., that a nurse’s breastmilk can influence the physical as well as psychological development of the

<sup>8</sup> See above, Introduction, and Barkai, *Les infortunes de Dinah*, pp. 21-23.

<sup>9</sup> On the development of a popular trend in medical writing in the Muslim Arab world from the twelfth century onward, see Micheau, *Savoir médical et société*, pp. 184-87; Haskell D. Isaacs, “Arabic medical literature”, in M.J.L. Young et al. (eds), *Religion, Learning and Science in the ‘Abbasid Period*, Cambridge, 1990, p. 348.

<sup>10</sup> See Giladi, *Children of Islam*, pp. 20, 24-27.

<sup>11</sup> Franz Rosenthal, “Literature”, in J. Schacht and C.E. Bosworth (eds.), *The Legacy of Islam*, Oxford, 1974, p. 325.

<sup>12</sup> Amr b. Baḥr al-Jāḥiẓ, *Kitāb al-ḥayawān*, Cairo, 1938, Vol. 1, p. 286. Al-Qurṭubī, the Andalusian physician of the tenth century AD, cites the same narration within his discussion of sexual relations with nursing women; see ‘Arīb b. Sa’īd al-Qurṭubī, *Khalq al-janīn wa-tadbīr al-ḥabāla wa-l-mawlūdīn* (eds. Nūr al-Dīn ‘Abd al-Qāder and Henri Jahier), Algier, 1965, p. 55, and see below.

infant she is feeding. To illustrate this he relates how, soon after its mother had been bitten by a viper, the baby camel she was suckling died even before she herself succumbed to the poison that had entered her bloodstream (*Athar(u) 'l-murđi' fi 'l-rađi'*).<sup>13</sup> Al-Jāhīz concludes his short discussion with the observation that this profound influence of the nurse's milk on her nursling's traits stems from the connection that exists between breastmilk and the blood of the uterus, a notion we find running through all Islamic medical (and, for that matter, many legal) writings. This explains why, according to al-Jāhīz, the *hukamā'* ("wise, learned men" and also "medical men") made sure to choose healthy nurses for their infants.<sup>14</sup>

It may very well be that when, in the context of a discussion on rearing and educating children, Ibn Sīnā (980-1037 AD) also claimed that milk transmits physical, mental and moral characteristics from the nurse to the nursling (*fa-inna 'l-laban yu'dī*), this did much to disseminate the notion as a medical "scientific truth" among a probably wider circle of readers than the professional users of his medical encyclopaedia, *al-Qānūn fi 'l-ṭibb*<sup>15</sup>—it soon became very common in Muslim ethical writings. Al-Ghazālī, one of the great religious authorities in the medieval Muslim world (d. 1111 AD), urges fathers to put their infants out with a pious nurse (*imra'a ṣāliha mutadayyina*) who consumes lawful food only (*ta'kulu 'l-ḥalāl*), since "there is no blessing (i.e., no benefit) in milk produced from unlawful food" (*fa-inna 'l-laban(a) 'l-ḥāṣil min(a) 'l-ḥarām lā baraka fihi*). Moreover, the impurity the nurse absorbs through the food that she consumes and then transmits through her milk to her nursling is likely to be "kneaded" into the substance of the latter's steadily growing body (*fa-idhā waqa'a 'alayhi ['alā 'l-ḥarām] nushū'(u) 'l-ṣabiyy in'ajanat fīnatuhu min(a) 'l-khubth*), the damage it causes being irreversible.<sup>16</sup> Physicians were largely in favour of

<sup>13</sup> See also al-Rāghib al-Iṣfahānī, *Muḥāḍarāt al-udabā' wa-muḥāwarāt al-shu'arā' wa-'l-bulaghā'*, pp. 207-208.

<sup>14</sup> Al-Jāhīz, *Kitāb al-ḥayawān*, Vol. 5, pp. 366-67.

<sup>15</sup> Abū 'Alī al-Ḥusayn b. 'Abdallāh Ibn Sīnā, "Kitāb al-siyāsa" (ed. Lewis Ma'lūf), *al-Mashriq* 9 (1906), p. 1073; cf. idem, *al-Qānūn fi 'l-ṭibb*, Būlāq, 1877, p. 152.

<sup>16</sup> Abū Ḥāmid Muḥammad al-Ghazālī, *Ihyā' 'ulūm al-dīn*, Cairo, 1967, Vol. 3, p. 92. On this question in other ethical writings, see, e.g., al-Ṭabarsī, *Makārim al-akh-lāq*, p. 176; Muḥibb al-Dīn Aḥmad b. 'Abdallāh al-Ṭabarī (d. 694/1295), *Ḥuqūq al-awlad wa-ta'dibuhum wa-wiqāyatuhum al-nār wa-'l-ahl*, MS, Library of the University of Leiden, Or. 2427(2), fol. 40a: *Wa-qāla 'l-'ulamā' wa-'l-hukamā': yanbaghī ḥifz(u) 'l-ṭifl*

maternal nursing, a preference also shared by many jurists, as we will see below.

*By the Mother or A Wet Nurse?*

Maternal breastfeeding and wet nursing were, in fact, the only options recommended by Muslim doctors. In this, too, they followed their Greek predecessors. A third option was, of course, animal milk, but, with sterilization and pasteurization non-existent, Muslim physicians were well aware of the danger there was in feeding newborns the milk of female animals.<sup>17</sup> As in rural societies till today, infants with no access to breastmilk stood little or no chance of survival.<sup>18</sup> That they thought the milk a baby was given influenced its personality traits partly explains their attitude, but they also acted upon the intuitive and, of course, correct observation that human milk had a high nutritive value and was immunogenic as well. In this respect, too, ancient and medieval doctors seem to hold that as a substitute for human milk, animal milk was far inferior.

On the other hand, recent studies show (what past societies certainly will have observed) that infants fed only with breastmilk for longer than six months are less healthy and at greater risk to

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*min taghthiyatihi wa-tarbiyatihi bi-'l-ḥarām fa-inna dhālika lā baraka fīhi wa-yazharu atharuhu 'alayhi fī a'mālihi wa-aqwālihi wa-akhlāqīhi.* On the notion of milk as transmitting traits as it appears in the Prophet's biographies, see above, Chapter 1.

Of the pious religious scholar, al-Ḥasan al-Baṣrī (d. 728 AD), one of the most prominent figures in the first century of Islam, it is told that "when he was a child it happened occasionally that his mother [a slave belonging to Umm Salama, one of the Prophet's wives] was kept away by some occupation, and Umm Salama would give him the breast to prevent him crying and quiet him till her return; to the blessed influence of that milk are attributed the wisdom and eloquence for which he was afterwards distinguished", *Ibn Khallikān's Biographical Dictionary*, New York and London, 1842, Vol. 2, p. 370. I wish to thank my former student, Mr. Eran Arigi, for drawing my attention to this reference. See also 'Abd al-Karīm al-Qayrawānī, *al-Mumnti' fī ṣan'at al-shi'r*, Beirut, 1983, p. 201 (my thanks to Professor Albert Arazi for bringing this reference to my attention).

<sup>17</sup> Cf. Shahar, *Childhood in the Middle Ages*, pp. 53-54.

<sup>18</sup> G.J. Ebrahim, "Cross-cultural Aspects of Breast-feeding," *Breast-feeding and the Mother*, Ciba Foundation Symposium 45, Amsterdam, Oxford, New York, 1976, pp. 196-197.

fall ill than those who also receive other food.<sup>19</sup> In Europe, the negative attitude towards animal milk we find reflected in both medical theories and popular beliefs until the late eighteenth century was one of the causes of malnutrition and starvation among infants.<sup>20</sup> It was not until 1894 that the first centre for distributing (pasteurized) animal milk to infants (*Goutte de lait*) opened its doors in Paris.<sup>21</sup> It is reasonable to assume that both the difficulty of keeping it fresh and the belief that it transmits traits discouraged Muslims from feeding infants with animal milk. Nevertheless, when they had no choice people did resort to it, as evidenced in Islamic legal sources.<sup>22</sup> Milk of cows, goats, camels, and even mares was used and, while the infant would often simply be put right to the teat of the animal to suck, all kinds of feeding vessels are known to have been in use since 2000 BC.<sup>23</sup>

Al-Sarakhsī, the most prominent Ḥanafī jurisconsult in Transoxania in the eleventh century AD, opens the chapter on the hiring of wet nurses in his *Kitāb al-mabsūṭ* (“The Extended Book [of Law]”) with the assumption—also shared, as we saw, by contemporary medical doctors—that babies are able to grow up on human milk only (*li-anna ’l-ṣighār lā yatarabbūna illā bi-laban(i) ’l-ādamiyya*),<sup>24</sup>

<sup>19</sup> Maher, “Breast-Feeding in Cross-cultural Perspective”, pp. 5-6; idem, “Breast-Feeding and Maternal Depletion: Natural Law or Cultural Arrangements”, in idem (ed.), *The Anthropology of Breastfeeding*, pp. 152-153, 167, 168-169; Marie-Louise Creighton, “Breastfeeding and *Baraka* in Northern Tunisia”, in *ibid.*, p. 51; Dana Raphael and Flora Davis, *Only Mothers Know: Patterns of Infant Feeding in Traditional Cultures*, Westport, London, 1985, p. 141.

<sup>20</sup> Matthews Grieco, “Breastfeeding, Wet Nursing and Infant Mortality in Europe”, pp. 21-22; cf. Lawrence Stone, *The Family, Sex and Marriage in England 1500-1800*, London, 1990, p. 59.

<sup>21</sup> I am grateful to Dr Rosemarie Beir-de Haan of the Deutsches Historisches Museum, Berlin, for bringing this information to my attention.

<sup>22</sup> For Europe there is evidence of the same in didactic literature, particularly confessors’ manuals; see Shahar, *Childhood in the Middle Ages*, pp. 53-54.

<sup>23</sup> DeMause, “The Evolution of Childhood”, p. 36; see also Robert Etienne, “Ancient Medical Conscience and the Life of Children”, *The Journal of Psychohistory* 4 (1976), pp. 149-150 and figures 7-10, opposite p. 145. Soranus (*Gynecology*, p. 117, within the chapter on “When and How to Wean the Infant”) mentions “artificial nipples, for out of these it draws the fluid little by little as from the breasts without being harmed”; cf. Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 67 (*wa-yakūnu mā yusqā min dhālika fī kūz—*an earthen jug with a handle—*li-yakūna shurbuhu lahu maṣṣ(an)*); al-Baladī, *Tadbīr al-ḥabālā wa-l-atfāl*, p. 211.

<sup>24</sup> Shams al-Dīn al-Sarakhsī, *Kitāb al-mabsūṭ*, Cairo, 1905-1906, Vol. 15, p. 118, and see also p. 129: *fa-’l-ādamiyy lā yatarabbā tarbiya ṣāliha illā bi-laban(i) ’l-jins*.

ostensibly excluding the option of animal milk or even other foods. However, in the course of the detailed discussion that then follows, al-Sarakhsī mentions cases of wet nurses who had been feeding their nurslings with animal milk, even for as long as the whole nursing period of two years, and then, in light of the Islamic prohibitions of marriage stemming from breastfeeding, raises the question of whether two babies fed by the same animal become relatives.<sup>25</sup> Yaḥyā b. Sharaf al-Nawawī, the Syrian Shāfi'ite juriconsult of the thirteenth century AD, in the commentary he wrote on al-Shīrāzī's *Sharḥ al-muhadhdhab* (compiled in the eleventh century AD), holds that animal milk is ineffective in creating foster relationships between two nurslings on the grounds that this sort of milk is less beneficial for the infant's body than human milk (*Wa-'l-bahīma dūna 'l-ādamiyya fī 'l-ḥurma wa-labanuhā dūna laban(i)'l-ādamiyya fī iṣlāḥ(i) 'l-badan*).<sup>26</sup> The very fact that such questions were raised, as well as the clear idea jurists had concerning the relative value of both sorts of milk, indicate that at least when human milk was unavailable, animal milk was resorted to after all, albeit as second best. This is understandable if we also take into account that the early Arabs (like all other nomads) considered animal milk (mainly from camels, goats and sheep) as a basic foodstuff, highly appreciated for its nutritious value, not to mention that as a literary symbol milk stands for the purity of Islam.<sup>27</sup>

<sup>25</sup> Al-Sarakhsī, *Kitāb al-mabsūt*, Vol. 15, p. 129, Vol. 30, p. 297; cf. al-Jāḥiẓ's report on an infant suckled by a bitch (*Ṣabiyy arḍa'uthu kalba*) in *Kitāb al-ḥayawān*, Vol. 2, pp. 155-156.

<sup>26</sup> Yaḥyā b. Sharaf al-Nawawī, *al-Majmū'—sharḥ al-muhadhdhab*, Beirut, 1991, Vol. 18, p. 221.

<sup>27</sup> Jalāl al-Dīn al-Suyūṭī collected *ḥadīth* reports in praise of animal milk in his short treatise, *Zubdat al-laban*, MS Leiden, Or. 474 (38), fols. 361b-363b. See also Josef Sadan, "Vin—fait de civilisation", in Myriam Rosen-Ayalon (ed.), *Studies in Memory of Gaston Wiel*, Jerusalem, 1977, pp. 146-158 ("Le vin et le lait aux yeux de l'Islam et de l'arabisme"). See also "*Ghūdḥā*", *Et*<sup>2</sup>, Vol. 2, p. 1057 (M. Rodinson); "*Mashrūbāt*", *Et*<sup>2</sup>, Vol. 6, p. 722 (J. Sadan). For milk as a literary symbol of the purity of Islam see, e.g., *Ṣaḥīḥ al-Bukhārī*, "Kitāb al-ashriba", *Bāb 11: Bāb shurb al-laban*. Dozens of Arabic terms designate milk and its various characteristics; see Abū Zayd Sa'īd b. Aws al-Anṣārī, *Kitāb al-liba' wa-'l-laban* (ed. L. Cheikho) in L. Cheikho and A. Haffner, *Dix anciens traités de philologie arabe*, n.p., 1908, pp. 141-145, and the supplement (*mulḥaq*) attributed to Ibn Qutayba, *ibid.*, pp. 146-151; al-Suyūṭī, *Zubdat al-laban*, fols. 361b-363a.

Medical doctors, when assessing the advantages for therapeutic purposes of the various parts and secretions of the human and the animal body (*manāfi' al-ḥayawān wa-l-insān*), praise the nutritious value and therapeutic merits of human milk and then grade the milk of the she-ass and the goat as its most appropriate substitutes. This can be seen as another instance of (indirect) approval of the use of certain kinds of animal milk in infant feeding.<sup>28</sup>

Since we may assume that medical manuals had at least some impact on the ways infants were in effect raised, their position on whether to favour maternal or non-maternal breastfeeding can help shed light not just on theoretical attitudes but also on what was common practice among certain social groups. As has been shown for Europe, the custom of handing infants over to wet nurses, sometimes supported by medical doctors as well as religious scholars, though by no means the rule, had far-reaching consequences for the survival prospects and health status of infants, parent-child and husband-wife relationships, family planning, and the like.<sup>29</sup>

Approval of maternal breastfeeding seems to have been unanimous among Muslim doctors. They accepted the Galenic notions, corroborated in principle by modern medicine, that “nature herself planned for children, providing them mother’s milk as a moist sustenance”, and that “mother’s milk is equally best for all

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<sup>28</sup> See Abū al-Walīd Muḥammad b. Aḥmad Ibn Rushd, *Kitāb al-kullīyyāt fī 'l-ṭibb* (ed. J.M. Forneas Besteiro and C. Alvarez de Morales), Madrid, 1987, Vol. 1, p. 323 (within *Kitāb al-adwīya wa-l-aghḥīya*): *Wa-min(a) 'l-aghḥīya 'l-ṭabī'īyya—al-albān wa-l-bayd. Wa-afḍal albān(i) 'l-ḥayawān—laban(u) 'l-nisā' wa-yalihi laban(u) 'l-utun wa-yalihi laban(u) 'l-ma'z wa-dhālika anna hādhihi 'l-albān fī ghāyat(i) 'l-laṭāfa*. Similar notions are also to be found in *Kitāb manāfi'(i) 'l-ḥayawān wa-l-insān li-l-ra'īs al-fāḍil wa-l-ḥabr al-kāmīl mālik al-aṭibbā' Jālinūs*, attributed to Burhān al-Dīn Nafīs b. 'Iwāḍ al-Kirmānī (d. 853/1449), MS, the Bodleian Library, Oxford, Huntington 358, fols. 9a, 19a. I am grateful to Dr Emilie Savage-Smith of the Wellcome Unit for the History of Medicine, University of Oxford, for supplying me with details on the manuscript. See also 'Abd al-Mālik b. Ḥabīb (d. 238/853), *Mukhtaṣar fī 'l-ṭibb* (ed. Camilo Alvarez de Morales and Fernando Giron Irueste), Madrid, 1992, pp. 36 (on a she-ass milk as remedy), 42 (on the nutritional and medical advantages of cow milk and meat). On the religious sanction of the use of mare milk in general see *Ṣaḥīḥ al-Bukhārī*, “Kitāb al-ṭibb”, *Bāb 57 (Bāb albān(i) 'l-utun)...*: *fa-ammā albān(u) 'l-utun fa-qad balaghanā anna Rasūl Allāh ṣal'am nahā 'an luḥūmihā wa-lam yablughnā 'an albānihā amr wa-la nahy*.

<sup>29</sup> See above, Introduction, and Shahar, *Childhood in the Middle Ages*, pp. 55-57.

children, provided it be not by chance diseased, and not least for the child of the best constitution.”<sup>30</sup> As al-Baladī puts it: “There is much benefit for both mother and infant in the [natural] suitability of maternal milk to the [needs of the] latter; this enables the very act of nursing and keeps both of them healthy” (*Wa-fī mulā’amat laban(i) ’l-umm li-’l-tifl naf’ lahu wa-naf’ lahā fī ’l-radā’ minhā wa-ḥifz li-ṣiḥḥatihi wa-ṣiḥḥatihā*).<sup>31</sup> The physiological explanation offered by Galen was that “while in the uterus we are wont to be nourished by blood, and the source of milk is from blood undergoing a slight change in the breasts”<sup>32</sup> (or, as a modern physician puts it metaphorically: “the breast has evolved as the umbilical cord of the newborn”<sup>33</sup>). This notion is then repeated in Muslim medical writings as, for instance, in those of al-Majūsī (d. sometime between 982 and 995 AD):

It is due that the newborn infant sucks its mother’s milk since this is the most appropriate milk for it and most suitable for its nature [*fa-inna dhālika awfaqu(u) ’l-albān wa-awfaquhā li-ṭab’ihī*], provided that there is no disease in the mother to corrupt her milk. This is so because the embryo is fed, while in its mother’s womb, by her menstrual blood (*Wa-dhālika li-anna ’l-janīn yaghtadhī fī baṭn ummihi min*

<sup>30</sup> *A Translation of Galen’s Hygiene (De Sanitate Tuenda)* by Robert M. Green, Springfield, 1951, p. 24, cf., for instance, Clark E. Grosvenor et al., “Hormones and Growth Factors in Milk”, *Endocrine Reviews* 14/6; (1992), pp. 710-728.

<sup>31</sup> Aḥmad b. Muḥammad b. Yaḥyā al-Baladī, *Tadbīr al-ḥabālā wa-’l-atfāl wa-’l-ṣibyān wa-ḥifz ṣiḥḥatihim wa-mudāwāt al-amrād al-’arīḍa lahum* (ed. Maḥmūd al-Ḥājj Qāsim Muḥammad), Baghdad, 1987, p. 187.

<sup>32</sup> *Galen’s Hygiene*, *ibid.* For the anatomical setting which allegedly makes the connection between the uterus and the breasts possible, see *Galen on the Usefulness of the Parts of the Body* (translated from the Greek with an introduction and commentary by Margaret Tallmadge May), Ithaca, New York, 1968, Vol. 2, p. 638: ...“Since she [Nature] prepared both these parts [the uterus and the breasts] to be of service in a single work, she has joined them by means of vessels... In fact, these are the only vessels in the animal which, arising from regions above the diaphragm, descend to the lower parts of the body, and the only ones which begin below and pass upward. For the parts that I mentioned earlier are the only ones needing to be connected by vessels, in order that whenever an embryo is being formed and is growing in the uteri, it alone may be flooded with nutriment from both parts by the common veins, and in order that when the child has been born, all the nutriment may in turn flow to the breasts.” An echo of this anatomical concept is to be heard in Ibn Rushd’s *Kitāb al-kullīyyāt fī ’l-ṭibb*, Vol. I, p. 75: ...*Wa-ammā ’l-thady... wa-ḥiya min(a) ’l-a’ḍā’(i) ’l-mushrika li-’l-raḥim. Wa-li-dhālika najidu ’l-raḥim matā ’nṣarafat ’anhā ’l-mawādd ṣārat ilā ’l-thadyayni ka-’l-ḥāl fī ’llawātī yurḍī’na.*

<sup>33</sup> R.V. Short, “Lactation—The Central Control of Reproduction”, in *Breast-feeding and the Mother*, p. 73.

*damm(i) 'l-ṭamth*). When the infant is born, nature moves the blood to the breasts, changing it into milk with which it is nourished so as to ensure that the aliment it is being fed will be similar to what it was given in the womb (*Wa-idhā wulida 'l-mawlūd šarafat(i) 'l-ṭabī'u dhālika 'l-damm ilā 'l-thadyayni fa-šāra laban(an) yaḡhtadhī bihi 'l-junīn li-yakūna ḡhīdhā'uhu mushākīl(an) mulā'im(an) li'l-ḡhīdhā'(i) 'lladhī kāna yaḡhtadhī bihi wa-huwa fī 'l-raḡīm*). Thus a (harmful) change in its nourishment is prevented. This is why a mother's milk is more suitable for her newborn than the milk of any other woman; it is most like what the infant was used to.<sup>34</sup>

Medical theory in this regard, though it may not have got the facts right, fell into line with what mothers, for whom childbearing and breastfeeding are so integral to the whole process of reproduction, will have known intuitively.<sup>35</sup> However, the psychological argument in favour of maternal breastfeeding, which Soranus briefly refers to (“the mothers become more sympathetic towards the offspring”<sup>36</sup>) and modern psychologists lay so much stress on,<sup>37</sup> plays no role with Muslim doctors. Instead it is the conviction we encountered above, that through her milk a nurse transmits to her nursling her own physical, moral and mental traits, that becomes much more central to Muslim medicine: “By nature the nursling becomes similar to the nurse and accordingly grows sullen if the nurse is ill-tempered, but of mild disposition if she is even-tempered.”<sup>38</sup>

One of the first Muslim doctors to adopt this idea was Muḡammad b. Zakariyyā' al-Rāzī (865-923 AD): “The moral character of a nursling resembles that of its nurse and it becomes like her” (*Inna 'l-murḡī'a idhā radḡa'at ḡhulām(an) fa-innahu yanzi'u ilā akhlāḡihā fa-yushbihuhā*).<sup>39</sup> Other physicians, from Bukhara to Cordova, among

<sup>34</sup> Abū al-'Abbās al-Majūsī, *Kāmil al-šinā'a 'l-ṭibbiyya*, Būlāq, 1877, Vol. 2, p. 56; see also Ibn Sinā, *al-Qānūn fī 'l-ṭibb*, Vol. 1, p. 151; al-Qurṭubī, *Khalq al-janīn*, p. 54.

On the (positive) medieval Arabic attitude towards menstrual blood (compared with the negative view adopted by European doctors), see William F. MacLehose, “Nurturing Danger: High Medieval Medicine and the Problem(s) of the Child”, in Carmi Parsons and Wheeler (eds), *Medieval Mothering*, pp. 5-6.

<sup>35</sup> See Ebrahim, “Cross-cultural Aspects of Breast-feeding”, p. 197.

<sup>36</sup> *Soranus' Gynecology*, translated with an introduction by Owsei Temkin, Baltimore, 1956, p. 90.

<sup>37</sup> See, for instance, Winnicott, *The Child, the Family, and the Outside World*, esp. pp. 51-57.

<sup>38</sup> *Soranus' Gynecology*, p. 93.

<sup>39</sup> Abū Bakr b. Zakariyyā' al-Rāzī, *Man lā yaḡḡuruhu ṭabīb*, MS, the British Library, Or. 5620, fol. 173a.

them 'Alī b. Rabban al-Ṭabarī (d. probably after 855 AD), 'Arīb b. Sa'īd al-Qurṭubī (d. c. 980 AD), Aḥmad b. Muḥammad al-Baladī (d. c. 990 AD), Sa'īd b. Hibat Allāh (d. 1154 or 1165 AD), and Abū al-Faraj b. Ya'qūb Ibn al-Quff (d. 1286 AD),<sup>40</sup> included such observations in their writings (as did European doctors from the Middle and Late Middle Ages<sup>41</sup>).

A divergent view is that of Ibn al-Jazzār al-Qayrawānī (d. 979 or 980 AD), who saw the impact on the nursling of the moral atmosphere in the nurse's home as more important than that of any physical contact and transmission of milk: a wet nurse should ideally be chosen from families known for traits similar to those of the nursling's family, such as intelligence, good manners, chastity, health, generosity, and courage, ensuring that it will be raised in an environment of the same sort.<sup>42</sup>

For Ibn Sīnā maternal breastfeeding, together with all its other advantages, was also highly effective in "repelling harms" (*Inna ilqā-mahu ḥalmat ummihi 'azīm(u) 'l-naf 'jidd(an) fī daf' mā yu'adhdhīhi*<sup>43</sup>), an insight which is remarkably compatible with what we know today of the immunogenic quality of maternal milk.<sup>44</sup>

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<sup>40</sup> 'Alī b. Rabban al-Ṭabarī, *Firdaus al-ḥikma*, (ed. M.Z. Siddiqi), Berlin, 1928, p. 97; al-Qurṭubī, *Khalq al-janīn*, p. 54; al-Baladī, *Tadbīr al-habālā wa-'l afāl*, pp. 186-187; Abū 'l-Ḥasan Sa'īd b. Hibat Allāh, *Khalq al-insān*, MS, The Bodleian Library, Oxford, Pococke 66, fol. 62b; Abū 'l-Faraj b. Ya'qūb b. Ishāq al-Masīḥī Ibn al-Quff, *Jāmi' al-gharad fī ḥifz al-ṣiḥḥa wa-daf' al-amrād*, MS, the Wellcome Institute, London, WMS Or. 116, fol. 66 (on the latter, see Sami K. Hamarneh, "Ibn al-Quff's Writings on Hygienic Regulations and the Preservation of Health", *Studies in the History and Archaeology of Jordan* [edited by Adnan Hadidi] 1 [1982], pp. 373ff.). See also Cyril Elgood, *Safawīd Medical Practice*, London, 1970, p. 274, and cf. Shahar, *Childhood in the Middle Ages*, pp. 55-56.

<sup>41</sup> For the theoretical aspect, see, e.g., Shahar, *ibid.*; McLaughlin, "Survivors and Surrogates", p. 115. For the practical aspect, see, e.g., Emmanuel Le Roy Ladurie, *Montaillou*, Harmondsworth, 1984, p. 208; Barbara A. Hanawalt, "Childrearing Among the Lower Classes of Late Medieval England", *Journal of Interdisciplinary History* 8 (1977), p. 14.

<sup>42</sup> Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 71: *Wa-qad amara ba'd(u) 'l-awā'il an tukhtāra 'l-murḍī'a min ahl bayt 'aql wa-adab wa-'iffa wa-ṣiḥḥa wa-sakhā' wa-najda. Wa-kāna yaqūlu: qad ya'riḍu li-l-ṭifl min ahl bayt(i) 'l-murḍī'a mā ya'riḍu lahu min ahl bayt abīhi wa-ummihi. Wa-qad ajma'at(i) 'l-umma wa-lam takhtalif anna Allāh tabāraka wa-ta'ālā ḥarrama min al-radā' mā ḥarrama min(a) 'l-nasab. Cf. Hsiung Ping-Chen, "To Nurse the Young: Breastfeeding and Infant Feeding in Late Imperial China", *Journal of Family History* 20 (1995), pp. 224-226.*

<sup>43</sup> Ibn Sīnā, *al-Qānūn fī 'l-ṭibb*, Vol. 1, p. 151.

<sup>44</sup> See, for instance, R.G. Whitehead, "Nutritional Aspects of Human Lactation", *The Lancet*, January-June 1983, p. 168; Cesar G. Victora et al., "Evidence for Protec-

There is, however, one significant exception to the rule that maternal breastfeeding should have first priority and that is the advice found in Muslim medical writings that a mother should wait with giving the breast to her newborn for at least two or three days after delivery when, because of the yellowish colour and the viscous texture of the colostrum (the first milk) the quality of her milk was thought to be too poor and the temporary services of a wet nurse were required: *Wa-yajibu an yakūna raḍā'(u) 'l-mawlūd min ghayr ummihi yawmayni wa-thalātha fa-huwa 'l-ajwad li-mā fi labanihā min(a) 'l-khilā'*.<sup>45</sup> Ibn Qayyim al-Jawziyya repeats this medical recommendation in his *Tuḥfat al-mawḍūd*, claiming that "all Arabs are anxious about this and (consequently) seek nurses for their infants amongst desert women."<sup>46</sup>

With the colostrum (Ar. *liba'*) infants in Islamic lands, as in other areas, were of course denied the highly protective and nutritive substances it contains against infections, thus giving them a poorer chance of survival during their first week of life.<sup>47</sup> On the other

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tion by Breast-Feeding Against Infant Deaths from Infectious Diseases in Brazil", *The Lancet*, July-December 1987, pp. 319-321.

<sup>45</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-mawlūdīn*, p. 206. According to Ibn al-Quff (*Jāmi' al-gharad*, fol. 66), during these days the milk is supposed to "subside" after having been shaken by the movements of the woman in confinement (...*ḥattā yaskuna labanuhā bi-sabab(i) 'dīrāb ḥarakatihā fi waqt(i) 'l-wilāda*); cf. Elgood, *Safavid Medical Practice*, p. 276. For a similar practice in contemporary Cairo, see Homa Hoodfar, "Child Care and Child Health in Low-Income Neighborhoods of Cairo", in Fernea (ed.), *Children in the Muslim Middle East*, p. 151: "All of the women delay breast-feeding for one to three days after birth because it is believed that the early milk, which is yellow and thick, is not good for the child. During this time, children are fed sugared water. Since it is light it washes the baby's stomach and prepares the infant to suckle the mother's breast."

<sup>46</sup> Shams al-Dīn Muḥammad b. Abī Bakr Ibn Qayyim al-Jawziyya, *Tuḥfat al-mawḍūd bi-ahkām al-mawlūd*, Bombay, 1961, p. 137. By implicitly referring to the biography of the Prophet Muhammad, Ibn Qayyim al-Jawziyya tries to harmonize between a medical theory and Muslim tradition, ignoring, however, the fact that according to this tradition, children, including the Prophet, used to be handed over to wet nurses for the whole nursing period, not merely for the first few days as recommended by doctors.

<sup>47</sup> Matthews Grieco, "Breastfeeding, Wet Nursing and Infant Mortality in Europe", p. 22; Marilyn Yalom, *A History of the Breast*, New York, 1997, pp. 207, 213. The argument that "colostrum has no value for infant feeding" used to be raised even by Western doctors until a few dozen years ago (see, e.g., F. Charlotte Naish, *Breast Feeding: A Guide to the Natural Feeding of Infants*, London, 1956). For the popular belief that colostrum is bad milk because it is yellow, see Ebrahim, "Cross-cultural Aspects of Breast-feeding", p. 202. Recent research has proven the

hand, the majority of Islamic medical manuals do not adopt such Greek medical instructions as “to let (the baby) rest and, in most cases, abstain from all (!) food up to as long as two days” which, from the point of view of modern medicine, are even more harmful. Warnings found in the most important gynaecological treatise of Antiquity,<sup>48</sup> such as that “as for twenty (!) days the maternal milk is in most cases unwholesome, being thick, too caseous, and therefore hard to digest, raw, and not prepared to perfection,”<sup>49</sup> seem also to be absent from the writings of Muslim doctors. Al-Majūsi recommends feeding infants during the first two days after birth with “pounded delicate sugar together with oil of sesame” (*Wa-yughadhhdhā yawmayni bi-sukkar madqūq na’im(an) ma’a duhn shayraj*), which may seem to have made sense under the circumstances but which, to modern ears, does not sound very innocuous either.<sup>50</sup>

### *Wet Nursing*

Besides the warm endorsement Muslim doctors gave to maternal breastfeeding because of the advantages they knew it had for babies and mothers alike,<sup>51</sup> we find many detailed chapters in Islamic medical writings discussing how to choose a wet nurse, what desirable traits to look for in a wet nurse and even what her conduct of life should be like. The two attitudes seem to contradict one another. Yet, for this there is a two-fold explanation. On a theoretical level, as Muslim doctors were inspired by Greek theories which have wet nursing as one of their main themes, they took over the ambivalent attitude found there towards the role of the mother. For instance, Soranus, who by no means denies the merits maternal breastfeeding has, particularly for the infant, nevertheless acknowledges that from the viewpoint of the woman things may be less unequivocal: “[T]he woman who nurses the infant... grows prema-

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opposite; see, for instance, Grosvenor et al., “Hormones and Growth Factors in Milk”, p. 710.

<sup>48</sup> See above, n. 3.

<sup>49</sup> Soranus’ *Gynecology*, pp. 88-89; see also Etienne, “Ancient Medical Conscience”, p. 147.

<sup>50</sup> Al-Majūsi, *Kāmil al-sinā’a*, vol. 2, p. 52.

<sup>51</sup> See Ebrahim, “Cross-cultural Aspects of Breast-feeding”, p. 197.

turely old having fed one child, or the expenditure for the nourishment of the offspring necessarily makes her own body quite emaciated. Consequently, the mother will fare better with a view to her own recovery and to further childbearing, if she is relieved of having her breasts distended too." Furthermore, wet nursing has its benefits for the infant: "the newborn... is apt to become more vigorous if borne by one woman but fed by another."<sup>52</sup>

On a practical level, premodern medicine generally failed to cope effectively with disease and malnutrition which were one reason why often enough mothers who had survived childbirth could not nurse their babies themselves.<sup>53</sup> Moreover, though they refrain from commenting upon the social circumstances that may impel parents to hand their infants over to wet nurses, Muslim physicians were certainly aware not only of the high mortality rates of women during or shortly after delivery and the common health problems that prevented breastfeeding, but also of the prevalence of divorce<sup>54</sup> and the tendency among women of the higher social strata to disfavour breastfeeding.<sup>55</sup> Even more than their theoretical views, these practical considerations seemed compelling enough for Muslim doctors to focus to such a large extent on the only safe alternative to maternal breastfeeding, namely, wet nursing.<sup>56</sup>

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<sup>52</sup> Soranus' *Gynecology*, p. 90; see also Etienne, "Ancient Medical Conscience", p. 148; Luke Demaitre, "The Idea of Childhood and Child Care in Medical Writings of the Middle Ages", *The Journal of Psychohistory* 4 (1976), p. 474; Shahar, "Infants, Infant Care", p. 283; Giladi, *Children of Islam*, p. 24.

<sup>53</sup> On the lack of hygienic precautions in childbirth in thirteenth-fourteenth century Egypt, see Giladi, *Children of Islam*, p. 77, and cf. Stone, *The Family, Sex and Marriage in England 1500-1800*, p. 64. For references to specific gynecological diseases which make breastfeeding difficult or impossible, see, for instance, Abū Sa'īd b. Hibat Allāh, *al-Mughni fi tadbir al-'ilal wa-'l-amrāq*, MS, the Wellcome Institute, London, WMS Or. 93, fol. 70b. Among the diseases which occur and affect women's breasts (*al-amrād(u) 'l-hādītha fi 'l-thady*), Ibn Hibat Allāh mentions swelling caused by her milk becoming curdled, which can happen either when the milk is too thick or when her body is too cold. It can also be caused by a nursing who sucks too weakly. A medicine to treat the coagulation of milk in a woman's breasts (*in'iqād(u) 'l-laban fi 'l-thady*) is also offered by the anonymous author of *Kitāb manā'ij 'l-aghdhīya* ("The Usefulness of Various Sorts of Food"), MS, the Bodleian Library, Oxford, Huntington 358, fol. 100a.

<sup>54</sup> See above, Chapter 1.

<sup>55</sup> See below, Chapter 3.

<sup>56</sup> Interestingly enough, Ibn Qayyim al-Jawziyya, for reasons unclear to me, does not include the selection of a wet nurse among the themes he discusses in Chapter 16 of *Tuhfat al-mawdūd*, a chapter which is wholly devoted to childrearing.

The guiding principle Muslim doctors adopted for selecting wet nurses seems, again, to have been the child's welfare. Since a nurse's milk was thought to have such great influence on the formation of the child's physical and moral character, it was almost a prerequisite that a wet nurse resemble as much as possible the baby's mother. As al-Baladī puts it, "the child and his nurse should be of the same genus" (*Man yajma'uhā wa-'l-mawlūd jins wāhid min(a) 'l-ajnās(i) 'l-wāhida*).<sup>57</sup> Yet, the characteristics mentioned in instructions on how to select the wet nurse often seem to reflect not a real but some ideal type of mother. Ibn Sīnā lists seven such characteristics: (1) age (*sinn*—from twenty-five to thirty-five; (2) appearance (*saḥna*)—good colour, strong neck and chest, muscular body, neither too fat nor too thin; (3) moral character (*akhlāq*); (4) shape of the breasts (*hay'at(u) 'l-thady*)—moderate, neither too hard nor too soft; (5) qualifications of milk (*kayfiyyat labanihā*)—right proportions of all its elements, moderate quantity, good colour, smell, taste and the like; (6) time elapsed between delivery of her own infant and the beginning of wet nursing (*miqdār muddat mā baynahā wa-bayna waḍ'ihā*)—six to eight weeks; (7) the sex of her own (last born) child (*jins mawlūdihā*)—male.<sup>58</sup>

Minor variations, generally going back to different trends within the Greek medical tradition, can be identified in writings of other Muslim physicians. While Ibn Sīnā (like al-Baladī before him) argues that a good wet nurse should herself be the mother of a male infant (who ought to be her second or third child), Ibn al-Jazzār and al-Qurṭubī, in the wake of the Galenic tradition, recommend, albeit without any explanation, mothers of females.<sup>59</sup> Also following Galen, Muslim doctors prefer wet nurses in the age range of twenty-five to thirty-five.<sup>60</sup> Their common assumption is that this age limit guarantees not only "natural health"—both the too young and the too old suffer from "cold temper"—and quality of milk,<sup>61</sup> but also

<sup>57</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-afāl*, pp. 187-188.

<sup>58</sup> Ibn Sīnā, *al-Qānūn*, vol. 1, pp. 151-153; see also al-Rāzī, *al-Manṣūrī fī 'l-ṭibb*, p. 233; cf. Yalom, *The History of the Breast*, pp. 208-212.

<sup>59</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-afāl*, p. 188; Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 72; al-Qurṭubī, *Khalq al-janīm*, p. 55; cf. MacLehose, "Nurturing Danger", p. 13.

<sup>60</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-afāl*, p. 188; Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 70; 'Alī b. Aḥmad b. 'Alī b. Hubal, *Kitāb al-mukhtārāt fī 'l-ṭibb*, Haydarabad, 1362/1943, p. 190.

<sup>61</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-afāl*, p. 188-189.

experience and psychological maturity. As Soranus puts it: “Younger women are ignorant in the rearing of children and their minds are still somewhat fickle and childish.”<sup>62</sup> If, as we saw, a wet nurse was expected to be the mother of at least two or three children, then a minimal age of twenty-five years seems a natural requirement. On the other hand, given that women in Muslim societies generally married young, often as soon as the first signs of physical maturity were there or even earlier, then this age limit must have excluded many young candidates from the circle of potential wet nurses with already two or three children. Some Greek and Arabic doctors seem to have accepted this reality and readily compromised by reducing the required minimal age to twenty.<sup>63</sup>

### *The Nurse and Her Milk*

Without the benefit of bio-chemical laboratory analysis, ancient Greek as well as later Muslim physicians, when they wanted to create standards for the quality breast milk ought to display, relied of course largely on external characteristics, such as smell, colour and density. Says Galen:

For to those tasting and smelling it, the best milk is sweet, looks white, and is midway between thin and thick. But poor milk is either thick and cheesy, or watery, thin and livid, variable in consistency and color, and sour to the taste, and will give the impression of brine or some other extraneous quality, and is not sweet to the smell.<sup>64</sup>

Soranus, who is much more detailed in his description of the physical characteristics of the milk, furthermore suggests taking into account some indirect pointers as well: “...the fact that the wet nurse is of the kind we have described as the best” and “...the fact that the child being nursed by her [now] is in good physical condition.”<sup>65</sup>

Ibn al-Jazzār al-Qayrawānī identifies three substances in milk, namely, watery (*al-jawhar(u) l-māʿi l-laṭīf*), cheesy (*al-laṭīf(u) l-jubniyy*), and oily (*al-duhniyy(u) l-dasim*), and observes that the propor-

<sup>62</sup> Soranus' *Gynecology*, p. 91.

<sup>63</sup> Ibid.; al-Qurṭubī, *Khalq al-janīn*, p. 55.

<sup>64</sup> Galen's *Hygiene*, p. 30. Cf. Soranus' *Gynecology*, pp. 94-97 (“On Testing the Milk”).

<sup>65</sup> Soranus' *Gynecology*, p. 94.

tion between them differs from one species to another. According to him the best human milk is that which has the right balance between the three elements (*fa-li-dhālika ḥamidnā min(a) 'l-laban mā kāna mu'tadil(an) fī jamī' jihātihī*) so that it is neither too thick (or stiff) nor too moist, does not change colour or rapidly become sour, is not frothy, and has no bitter or salty taste.<sup>66</sup>

As for ways of checking quality, 'Arīb b. Sa'īd al-Qurṭubī quotes a Hippocratic method whereby the milk is left overnight in a sea-shell or horn put in a high place away from dust. The milk is bad when in the morning it is found to be too watery or too thick, but good when its texture is "in the middle, between lightness and thickness" (*wasat(an) bayna 'l-khiffa wa-'l-ghilaz*), its watery and cheesy elements even.<sup>67</sup> A similar and faster "laboratory" test is that of Ibn Sīnā and al-Baladī, mixing milk with myrrh in a glass and observing the relation between the watery and the solid elements.<sup>68</sup> An even simpler way found also in *Kāmil al-ṣinā'a* is to put a drop of milk on a nail or a mirror and see whether or not it spills easily.<sup>69</sup>

Ancient Greek physicians already were well aware that there was a connection between a nurse's physical condition and the quality and quantity of her milk. The milk is of the best quality, says Galen, when the nurse's blood is "in its best condition", by which he means that it "has no excess of yellow bile or black bile or phlegm and is not mixed with serous or aqueous fluid. And such blood is produced by moderate exercise, by food well-flavored and taken at the proper time and in necessary amount, and by timely and moderate beverages."<sup>70</sup> Consequently, Muslim medical and hygienic manuals devote much space to questions like "how to conduct the regimen of the nurse" and "what one should do if the milk stops, or becomes spoiled or thick or thin", which are then discussed in terms of diet, periods of sleep, exercise, and general living

<sup>66</sup> Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 74. Similar observations are to be found in other medical writings in Arabic; see, e.g., al-Baladī, *Tadbīr al-ḥabālā wa-'l-atfāl*, p. 196; al-Qurṭubī, *Kitāb khalq al-janīn*, p. 55; Ibn Hubal, *Kitāb al-mukhtārāt*, p. 190.

<sup>67</sup> Al-Qurṭubī, p. 55; see also al-Majūsī, *Kāmil al-ṣinā'a*, Vol. 2, p. 57.

<sup>68</sup> Ibn Sīnā, *al-Qānūn*, Vol. 1, p. 152; al-Baladī, *Tadbīr al-ḥabālā wa-'l-atfāl*, p. 195.

<sup>69</sup> Al-Majūsī, *Kāmil al-ṣinā'a*, vol. 2, p. 57; al-Baladī, *Tadbīr al-ḥabālā wa-'l-atfāl*, p. 195.

<sup>70</sup> Galen's *Hygiene*, p. 29; cf. al-Baladī, *Tadbīr al-ḥabālā wa-'l-atfāl*, p. 187. See also MacLehose, "Nurturing Danger", pp. 14-15; Yalom, *A History of the Breast*, p. 208.

conditions.<sup>71</sup> That thereby, as we saw, the nursling's benefit is always at the centre of attention is reflected, for instance, in the title of one of the chapters of al-Balādi's *Tadbīr al-ḥabālā wa-l-atfāl. Fī dhikr mā yajibu an tasta'milahu 'l-murdi' min(a) 'l-taḥaffuz fī ṭa'āmihā wa-shurbihā li-allā yuṣība 'l-tifl min dhālika ḍarar wa-makrūh...* ("The nurse's obligation to guard herself in regard to her food and drink in order not to cause the infant any harm...").<sup>72</sup>

Particularly interesting are a number of specific recommendations one encounters in this context. For example, Ibn al-Jazzār al-Qayrawānī suggests that the nurse adjust her food to the changing stages of the infant's development and that she be encouraged to do a lot of exercises with her hands, including ball games.<sup>73</sup> Ibn al-Quff looks at the general living conditions of the nurse, claiming that proper accommodation is important, that her clothes should suit her complexion and fit the changing seasons, and that she should maintain good relations with the servants of the house, since he is well aware of the way these can influence her psychological state. Ibn al-Quff's emphasis on the importance of the nurse's peace of mind (*Wa-tatajannab(i) 'l-ghaḍab wa-l-faza' wa-l-hamm wa-l-ghamm*)<sup>74</sup> so that she may give of her very best is especially striking in light of anthropological findings that in many cultures women are discouraged from breastfeeding when they are under stress.<sup>75</sup>

Unlike the *ḥadīth*, where we find an ambivalent attitude towards sexual relations with a nursing woman (see Chapters 1 and 3), Muslim physicians are unanimous in their categorical rejection of these. They follow Galen who "order[ed] all women who are nursing babies to abstain completely from sex relations"<sup>76</sup> (*Lā tujā-*

<sup>71</sup> Soranus' *Gynecology*, pp. 97-103. Cf. al-Rāzī, *al-Manṣūri fī 'l-ṭibb*, p. 233; Ibn Sīnā, *al-Qānūn*, Vol. 1, p. 152; al-Majūsī, *Kāmil al-ṣinā'a*, Vol. 2, p. 57; al-Qurṭubī, *Khalq al-janīn*, pp. 55-57; Ibn Hubal, *al-Mukhtārāt fī 'l-ṭibb*, pp. 190-191.

<sup>72</sup> Al-Balādi, *Tadbīr al-ḥabālā wa-l-atfāl*, p. 191.

<sup>73</sup> Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, pp. 75-76.

<sup>74</sup> Ibn al-Quff, *Jāmi' al-gharad fī ḥifẓ al-ṣiḥha*, fol. 70.

<sup>75</sup> Creighton, "Breast-feeding and *Baraka*", p. 48 (citing D.B. Jelliffe and E.F.P. Jelliffe, *Human Milk in the Modern World*, Oxford, 1978, p. 62); Maher, "Breast-Feeding in Cross-cultural Perspective", p. 30.

<sup>76</sup> *Galen's Hygiene*, p. 29.

*mi'ū* [ʾ*l-murḍi*(*u*)] ʾ*l-battata*, as Ibn Sīnā puts it<sup>77</sup>), accepting that “coitus... spoils and diminishes the milk or suppresses it entirely by stimulating menstrual catharsis through the uterus or by bringing about conception.”<sup>78</sup> Soranus adds a psychological argument when he writes that “coitus cools the affection toward (the) nursling by the diversion of sexual pleasure.”<sup>79</sup>

We know today that when a nursing woman fully or almost fully breastfeeds and does not get her period, breastfeeding protects her almost completely from becoming pregnant during the first six months after delivery.<sup>80</sup> Ancient and medieval doctors may have been aware of this, and may also have realized that breastfeeding became less reliable as a contraceptive after the first few months of lactation or when not carried out regularly. They therefore supported a post-partum taboo on sexual intercourse to be observed by nurses for the whole lactation period.<sup>81</sup> It is reasonable to assume that for men of higher social strata this norm was more easily followed since they could afford to practice polygamy or to own female slaves (with whom sex outside marriage is allowed by Islamic law). Alternatively, men could employ wet nurses for their newborn infants and so circumvent the medical taboo on sexual relations with their wives soon after they had given birth. Since there were no *religious* objections to resuming sexual relations with their nursing wives, the majority of Muslims were left to rely on nature, that is, on lactation, to help them space intervals between successive births.<sup>82</sup>

That one should not have full marital relationships with a nursing woman is expressed not only in professional medical writings

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<sup>77</sup> Ibn Sīnā, *al-Qānūn*, vol. 1, p. 153; see also al-Rāzī, *al-Manṣūrī fī ʾl-ṭibb*, p. 233; al-Majūsī, *Kāmil al-ṣināʾa*, p. 57; Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 76; al-Balādī, *Tadbīr al-ḥabāla wa-ʾl-aṭfāl*, pp. 193-194; al-Qurṭubī, *Khalq al-jamīn*, p. 56; Ibn Ḥubāl, *al-Mukhtārāt fī ʾl-ṭibb*, p. 191.

<sup>78</sup> *Soranus' Gynecology*, pp. 92-93. In Europe, the notion that sexual abstinence should be observed during the period of lactation was also disseminated mainly through medical, not religious, writings; see Ole Jørgen Benedictow, “On the Origin and Spread of the Notion that Breast-feeding Women Should Abstain from Sexual Intercourse”, *Scandinavian Journal of History* 17 (1992), pp. 73, 75, 76.

<sup>79</sup> *Soranus' Gynecology*, p. 92.

<sup>80</sup> “Consensus Statement: ‘Breastfeeding as Family Planning Method’”, *The Lancet*, July-December 1988, p. 1204; see also Short, “Lactation”, p. 73.

<sup>81</sup> Maher, “Breast-Feeding and Maternal Depletion”, p. 162.

<sup>82</sup> Cf. Stone, *The Family, Sex and Marriage in England 1500-1800*, p. 52.

but also in writings of a more popular character, like al-Jāhīz's *al-Hayawān*.<sup>83</sup> Still, the task of convincing couples to practice abstinence for as long as the woman was breastfeeding her child was apparently not an easy one. Efforts to offer religious justification for the medical standpoint can be found in a relatively late treatise of popular medicine (*Tibb al-nabiyy*—"Medicine of the Prophet") by the well-known Egyptian scholar Jalāl al-Dīn al-Suyūṭī (d. 1505 AD). Presenting two *ḥadīth* reports, one in favour of *ghīla* (or *ghayla*: "the compressing of one's wife while she is suckling"<sup>84</sup>), and the other objecting to it, al-Suyūṭī explains in detail why he prefers the latter. The argument he raises, namely, the long-term harm caused to the nursling by the sexual activity of his nurse is, interestingly enough, not to be found in the writings of Muslim "learned medicine":

When a woman is pregnant and when a woman is suckling, her monthly period ceases. When pregnant, the best part of the blood turns to food, that is, it becomes the nourishment of the foetus, and the rest—and it is the corrupt part—passes to the breasts. Similarly, when suckling, all the menstrual blood passes to the breasts and is converted into milk for the nourishment of the child. And that is why the Prophet said: Do not kill your children secretly. For the practice of *al-ghayla* throws down the child [the relevant *ḥadīth* says: "the practice of *al-ghayla* catches the rider and throws him down from his horse"], that is to say, the effect of the corrupt food continues with a man until puberty and manhood. And should he be challenged to a test of strength by a duel, he will be overwhelmed in the fight, being weaker than the other.<sup>85</sup>

Among the instructions given by Muslim doctors regarding the procedure of feeding infants—again, much under the influence of Greek medical writings<sup>86</sup>—we find advice on how to prepare the infant (e.g., by putting a spoonful of honey in its mouth—*wa-in*

<sup>83</sup> Al-Jāhīz, *Kitāb al-hayawān*, Vol. 1. p. 286: *Wa-ammā saqy(u) 'l-ghayl fa-'rṭidā' laban(i) 'l-ḥublā wa-dhālika fasād shādīd*.

<sup>84</sup> Lane, *Arabic-English Lexicon*, Book I, p. 2319.

<sup>85</sup> "Tibb-ul-Nabiyy or Medicine of the Prophet being a translation of two works of the same name" by Cyril Elgood, *Osiris* 40 (1962), pp. 151-152. Cf. Jamāl al-Dīn Muḥammad Ibn Manẓūr, *Lisān al-'arab*, Dār Ṣādir, Beirut, n.d., Vol. 8, p. 126 (s.v. "r.d.").: *Qāla al-Azharī: ... Wa-'l-murāḍa'a an yardī'a 'l-tifl ummahu wa-fi baṭnihā walad. Qala: Wa-yuqālu li-dhālika 'l-walad(i) 'lladhī fi baṭnihā murāḍa' wa-yajī'u naḥil(an) dāwiy(an) sayyi' 'l-ghidhā'.*

<sup>86</sup> See, for instance, *Soranus' Gynecology*, pp. 108-113.

*ul'iqā qabla 'l-irdā' kull marra mil'aqa min 'asal fa-huwa nāfi*<sup>87</sup>), on how to make the breast ready for sucking, how best to put the nipple between the infant's lips, how to make it easier for the baby to suckle by squeezing the breast (*Fa-idhā arādat irdā'ahu fa-taghmizu ḥalamatahā ghamz(an) raqīq(an) thumma taḍa'uhā fī fihī wa-ta'širuhā ba'd(a) al-'aṣr li-allā yat'aba 'l-ṣabiyy min kathrat(i) 'l-maṣṣ*<sup>88</sup>), a warning against nursing immediately after the baby has been given a bath (*Wa-yanbaghī an lā yurḍa'a bi-'aqb(i) al-ḥammām*<sup>89</sup>), and the like.

Muslim physicians, well aware that overfeeding is harmful, also warn nursing women not to give in immediately to the nursling's demand for food. According to al-Baladī, the nurse should find the right balance so as to ensure, on the one hand, that the infant does not suffer problems of digestion and, on the other, that its physical development is not in any way hampered.<sup>90</sup> Thus, many Muslim doctors advise to limit breastfeeding to two or three times a day and to a reasonable amount each time.<sup>91</sup> Among the practical measures on how to treat children who suffer from the aftereffects of overfeeding, such as a swollen belly, vomiting, languor and long sleep or, on the contrary, restlessness in bed and long periods of weeping, are reducing lactation and increasing the hours of sleep, hot baths and moderate cradle rocking.<sup>92</sup> Not only do Muslim physicians reject the popular custom of giving infants the breast as soon as they start crying,<sup>93</sup> but they even explain the advantages crying has for the baby's development provided it is not too strong: it

<sup>87</sup> Ibn Sīnā, *al-Qānūn*, Vol. 1, p. 153. Cf. al-Rāzī, *Man lā yahḍuruḥu ṭabīb*, fol. 173a: *Wa-'l-ajwad an yul'aqa 'asal(an) thumma yurḍa'a*. See also Elgood, *Safavid Medical Practice*, p. 274.

<sup>88</sup> Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, pp. 64-65.

<sup>89</sup> *Ibid.*, p. 64.

<sup>90</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-atfāl*, p. 183.

<sup>91</sup> *Ibid.*, p. 201; see also, for instance, al-Rāzī, *al-Manṣūrī fī 'l-ṭibb*, p. 232; Ibn Sīnā, *al-Qānūn*, Vol. 1, p. 153; Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 62; Ibn Hubal, *al-Mukhtārāt*, p. 189.

<sup>92</sup> Al-Qurṭubī, *Khalq al-ḥanīn*, p. 54.

<sup>93</sup> Cf. Fildes, *Wet-Nursing*, p. 45; Shahr, "Infants, Infant Care", p. 290; McLaughlin, "Survivors and Surrogates", p. 116. On unrestricted breastfeeding as a response to the infant's demand in contemporary rural societies in the Muslim Middle East, see, for instance, H. Ammar, *Growing Up in an Egyptian Village*, London, 1966, p. 99; E. Friedl, "Parents and Children in a Village in Iran", in A. Fathi (ed.), *Women and the Family in Iran*, Leiden, 1985, p. 202.

“cools the infant’s limbs and broadens its chest and the lower part.”<sup>94</sup>

Soranus warns against letting babies sleep with their nurses in the same bed and points to a common type of accident involving infants, suffocation as a result of overlaying: “... the newborn should not sleep with her [the nurse], especially in the beginning, lest unawares she roll over and cause it to be bruised or suffocate.”<sup>95</sup> Accidents of this sort were, of course, known in the Muslim world, as evidenced, for instance, by Ibn Bābawayh’s discussion of what compensation a wet nurse should pay to the parents of a nursling whom she has killed in this way: *Ayyumā zi’r qaḥm qatalat ṣabiyy(an) lahum wa-hiya nā’ima fa-’nqalabat ‘alayhi faqatalathu...*<sup>96</sup> Muslim doctors nowhere deal directly with this problem, but they do recommend laying infants in separate cradles (*muhūd*, s. *mahd*), no doubt aware of the dangers involved.<sup>97</sup>

#### *When and How to Wean*

When defining the “natural lactation period” (*al-mudda al-ṭabi’iyya li-’l-raḍā’*<sup>98</sup>) Muslim doctors used a physical criterion—the moment a nursling’s teeth were strong enough to enable it to deal with solid food—while, as we saw, purely legal considerations had led to the Qur’ānic definition (Chapter 1). Still, religious norm and medical recommendations both arrive at a period of around two years: “The desirable time for weaning the infant and for stopping breast-feeding is when it becomes two or two and a half years old; this is,

<sup>94</sup> Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 65: *Wa-qad yantafi’u [’l-ṣabiyy] bi-’l-bukā’(i) ’l-yasīr wa-lā siyyamā qabla shurb(i) ’l-laban wa-huwa jā’i’ fa-inna dhālika mim mā yubridu a’ḍā’ahu wa-yuwassi’u lahu ṣadrahu wa-duburahu*. See also Ibn Qayyim al-Jawziyya, *Tuhfat al-mawḍūd*, p. 138: *Wa-lā yambaghī an yashuqqa ‘alā ’l-abawayni bukā’(u) ’l-tiḥl wa-ṣurākhuhu wa-lā siyyamā li-shurbihī ’l-laban idhā jā’u fa-innahu yantafi’u bi-dhālika ’l-bukā’ intijā’(an) ‘azīm(an)...*

<sup>95</sup> Soranus’ *Gynecology*, p. 110.

<sup>96</sup> Ibn Bābawayh al-Qummī (d. 941 AD), *Man lā yaḥḍuruhu ’l-faqīh*, Najaf, 1958/9, Vol. 4, p. 119. Cf. Shahar, “Infants, Infant Care”, pp. 292-293; Matthews Grieco, “Breastfeeding, Wet Nursing and Infant Mortality”, pp. 44-45. This sort of accident is mentioned in the Bible, 1 Kings, 3/19: “...And this woman’s son died in the night because she lay on it.”

<sup>97</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-’l-alfāl*, pp. 203, 215.

<sup>98</sup> Ibn Sīnā, *al-Qānūn*, Vol. 1, p. 153. See also Ibn Hubal, *Kitāb al-mukhtārāt*, Vol. 1, p. 191; Ibn al-Quff, *Jāmi’ al-gharaḍ*, fol. 70.

when its molar teeth are able to cut the food and grind it.”<sup>99</sup> This, as we have seen, falls into line with a long tradition, common to ancient as well as medieval civilizations, of weaning infants around two years old.<sup>100</sup> Typically combining medical and religious elements, Ibn Qayyim al-Jawziyya argues that there is divine wisdom in this: by delaying teething to the moment the infant can begin to digest solid food God mercifully protects the mother from the pain an infant biting her nipples would cause her.<sup>101</sup>

That there was a popular custom of weaning children at an older age is clearly reflected in a *fatwā* by Ibn Taymiyya who, in a chapter on breastfeeding (*Bāb al-radāʾ*) in his *Majmūʾat fatāwā*, mentions mothers who breastfeed their children for about five years: *Fa-inna baʿḍ(a) l-niswa yurḍiʿna awlādahunna khams sinīna wa-akthar wa-aqall.*<sup>102</sup>

It is common knowledge today that breastfeeding is the healthiest way of feeding infants, as the composition of human milk is finely

<sup>99</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-l-atfāl*, p. 210: *Fa-ammā al-waqt(u) ʾlladhī yanbaghī an yuḥṭama fīhī l-mawlūd wa-yumnaʾa min(a) l-radāʾ fa-inna dhālika yajibu an yakūna ʾinda ikmālīhī sanatayni aw sanatayni wa-nisf idhā qawīyat asnānuhu wa-aḍrāsuhu ʾalā taqīʾ(i) l-taʾām wa-ṭahnihi.*

<sup>100</sup> See Giladi, *Children of Islam*, p. 26 and n. 54, p. 130. Weaning infants after about two years has been a common practice in many societies past and present; see, for instance, Raphael and Davis, *Only Mothers Know*, p. 70; Ping-Chen, “To Nurse the Young”, p. 231; Ebrahim, “Cross-cultural Aspects of Breast-feeding”, p. 195. For medieval Europe, see the interesting observations of Didier Lett, in his “La mère et l’enfant au Moyen Age”, *L’Histoire* 152 (February, 1992), p. 12: “Le sevrage intervient vers un an et demi ou deux ans, ‘quand les dents de devant viennent’ à l’enfant: c’est le signe qu’il est prêt à recevoir une autre nourriture. Une mère qui continuerait alors à allaiter son enfant pourrait être accusée de se livrer à une activité quasi incestueuse. Car les dents sont chargées d’un fort symbolisme sexuel que de nombreux proverbes, comme ‘le mal de dents, c’est le mal d’amour’ ou ‘mal de dent et mal d’enfant sont les plus grands qui soient,’ mettent en évidence. Et jusqu’au début du xxe siècle, dans certaines régions de France, pour la première dent d’un enfant, le mari offrait des cadeaux à sa femme... qui rappelaient les présents nuptiaux—signe que le mari s’apprêtait à reprendre ses droits conjugaux, symboliquement octroyés jusque-là au nourrisson. Le proverbe ‘qui a des dents de bonne heure a bientôt des frères et soeurs’ prend ici tout son sens.” See also above, Chapter 1.

<sup>101</sup> Ibn Qayyim al-Jawziyya, *Tuhfat al-mawḍūd*, p. 137.

<sup>102</sup> Ibn Taymiyya, *Majmūʾat fatāwā*, Vol. 4, p. 147. The definition by *Lisān al-ʿArab* (s.v. *r.d.*) of milk-teeth (*rawāḍi*) as those which grow and fall (!) within the lactation period (*mā nabata min asnān(i) l-ṣabiyy thumma saqata fi ʾahd(i) l-radāʾ*) means that it was not regarded as exceptional to see children of the age of six, in which milk teeth generally start to be replaced by permanent ones, still suckling.

attuned to the baby's needs in terms of nutrition, immunity from disease, and physical development. And this, of course, in addition to the joy and emotional satisfaction both infant and mother derive from breastfeeding. But breastmilk supplies full nutrition only for the first five or six months, the first three being critically important as far as development and protection of the child are concerned.<sup>103</sup> An observation of this kind we encounter, for instance, in al-Baladī's *Tadbīr al-ḥabālā wa-'l-atfāl*, recommending maternal milk as the only source of nutrition until teething (on average at about seven months—*wa-waqt nabātihā li-sab'at ashhur*<sup>104</sup>) after which other sorts of food may be gradually introduced without giving up the mother's milk altogether.<sup>105</sup> Here we have a clear echo of Galen's instructions "The infant should be fed on milk alone until he has cut his first teeth, and then accustomed gradually to more solid food."<sup>106</sup> As can be seen in developing regions of the world today, when such instructions are not followed and infants are introduced to alternative foods too early<sup>107</sup> or, on the contrary, are exclusively breastfed for much longer periods of time,<sup>108</sup> the result is a wide range of problems from infections and inadequate nutrition, as is

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<sup>103</sup> The Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding (which was produced and adopted by participants at the WHO/UNICEF policymakers' meeting on "Breastfeeding in the 1990s: A Global Initiative") recognizes that "Breastfeeding is a unique process that: \*provides ideal nutrition for infants and contributes to their healthy growth and development; \*reduces incidence and severity of infectious diseases, thereby lowering infant morbidity and mortality; \*contributes to women's health...; \*provides most women with a sense of satisfaction when successfully carried out; and that recent research has found that: \*these benefits increase with increased exclusiveness of breastfeeding during the first six months of life, and thereafter with increased duration of breastfeeding with complementary foods..." (*Historical Perspectives on Breastfeeding*, p. 92).

<sup>104</sup> Ibn Qayyim al-Jawziyya, *Tuhfat al-mawdūd*, p. 139.

<sup>105</sup> Al-Baladī, *Tadbīr al-ḥabālā wa-'l-atfāl*, p. 206: *Wa-an yuqtaṣara bihim fī ghidhā'ihim 'alā 'l-laban waḥdahu ilā ḥīn thabāt asnānihim wa-'inda dhālika yanbaghī an yu'awwadū al-ṣabr 'alā mā li-laban min(a) 'l-aghdhīya*. See also Ibn Qayyim al-Jawziyya, *Tuhfat al-mawdūd*, p. 137.

<sup>106</sup> Galen's *Hygiene*, p. 31.

<sup>107</sup> Cf. Soranus' *Gynecology*, p. 117: "Therefore those women are too hasty who, after only forty days, try to give cereal food (as do those for the most part who find nursing a burden)." On the situation today, see Maher, "Breast-Feeding and Maternal Depletion", p. 153.

<sup>108</sup> Cf. Soranus, *ibid.*: "Yet, on the other hand, it is also bad not to change to other food when the body has already become solid—not only because the body becomes moist and therefore delicate if fed on milk for too long a time, but also because in case of sickness the milk easily turns sour." On the situation today, see Maher, "Breast-Feeding in Cross-cultural Perspective", pp. 4-8.

also the case when infants are insufficiently breastfed in the mixed feeding period.<sup>109</sup>

Given the hygienic conditions and medical means prevailing in past societies, weaning always remained a dangerous stage in a child's life. Still, if only for reasons of family planning and their work load, mothers could not continue to respond to the instinctive urge of their infants who might otherwise go on sucking for a number of years: "To some extent... no baby is ever ready to be weaned, and this can be said in spite of the fact that in practice a proportion of babies wean themselves."<sup>110</sup> No wonder, then, that *faṭīm* ("one who is weaned") is defined in Arabic lexicography as a baby who has separation from its mother (*faṣl*) imposed on it (*Wa-idhā quṭi'a 'anhu 'l-laban—fa-huwa faṭīm*<sup>111</sup>), not as part of an inner, natural development.

Weaning should be done cautiously and gradually; this is the bottom line of all relevant discussions in Greek as well as Islamic medical writings. Thus, Ibn al-Jazzār al-Qayrawānī advises the nurse to reduce the amount of milk slowly and to begin training the infant to consume other sorts of food in order to prevent a too abrupt transmission from breast milk to solid food and to avoid causing undue harm: *Wa-tu'maru 'l-murḍi'a an tunqīṣa min labanihi wa-tua'wwidahu 'l-ta'ām wa-tumarrinahu 'alayhi kaylā yaḍurrahu 'l(i)-'ntiqāl baghtat(an)*.<sup>112</sup> To amuse the infant and at the same time give it a substitute for the breast al-Rāzī suggests using at the beginning of weaning a sort of lollipop made of flour, milk and sugar which the child can suck and masticate.<sup>113</sup> Unlike Soranus, who recommends spring ("which is relatively healthy because of the well-tempered climate") as the best season for weaning, Muslim doctors

<sup>109</sup> Matthews Grieco, "Breastfeeding, Wet Nursing and Infant Mortality", p. 45. For similar problems in the developing areas today, see, for instance, J.P. Grant, *The State of the World's Children 1986*, UNICEF, Oxford, 1985, pp. 84, 101.

<sup>110</sup> Winnicott, *The Child, the Family, and the Outside World*, p. 55.

<sup>111</sup> 'Alī b. Aḥmad Ibn Sida (d. 1066 AD), *Kitāb al-mukhaṣṣaṣ*, Būlāq, 1316/1898-9, Vol. 1, p. 33. See also p. 27 (Appendix One, below, p. 132). Cf. Ibn Manẓūr, *Lisān al-'arab*, Vol. 12, p. 454 (s.v. 'f. ṭ.m."): *Wa-aṣl(u) 'l-faṭīm—al-qaṭ'. Wa-fatama 'l-ṣabiyy—faṣalahu 'an thady ummihi wa-radā'ihā*. (hence: *fiṣāl* = "weaning of a young one").

<sup>112</sup> Ibn al-Jazzār al-Qayrawānī, *Siyāsat al-ṣibyān*, p. 66; see also al-Baladī, *Tadbīr al-ḥabāl wa'l-atfāl*, pp. 210-211.

<sup>113</sup> Al-Rāzī, *al-Mansūri fi 'l-ṭibb*, p. 232: *Wa-idhā ḥaḍara waqt(u) 'l-fiṭām fal-yuttakhadh lahu balālīṭ min daqīq samīdh wa-laban wa-sukkar. Wa-tudfa 'fi yadayhi li-ya'bath bihā wa-yamuṣṣahā wa-yamdughahā*.

prefer autumn when the weather is cooler and the following winter ensures that the child's appetite and digestive faculty will be stronger.<sup>114</sup>

Muslim doctors were certainly aware of the suffering—known to any caring adult—weaning entails for the infant,<sup>115</sup> though their advice to smear the breasts with bitter-tasting myrrh when a crying baby desperately seeks them strikes one as rather cruel.<sup>116</sup> At the same time, they remain curiously silent on something mothers themselves often intuitively feel and that is the profound long-term psychological effects this stage can have on the way their child grows up, influencing not only its relationships with its mother but also its attitude towards society as a whole.<sup>117</sup>

There is no indication in Arabic medical writings that their authors subscribe to any concept of gender differences when it comes to setting limits to the breastfeeding period. As anthropological studies show, such a concept exists today (and may well have existed in the past) among Muslims, sometimes entailing the notion that boys need to become stronger than girls (which means longer lactation periods and a more frequent additional use of pre-masticated food for male infants), but sometimes also pointing

<sup>114</sup> Soranus' *Gynecology*, p. 118; Ibn al-Jazzār al-Qayrawānī, *Siyāsāt al-ṣibyān*, p. 66 al-Baladī, *Tadbīr al-ḥabālā wa-l-atfāl*, p. 210.

<sup>115</sup> A sensitive description of the obstacles in the way of weaning and the best methods to overcome them is to be found in al-Ghazālī's *Ihyā' 'ulūm al-dīn*, Vol. 3, p. 88. Comparing the process of training the *murīd*'s soul (*murīd*—a mystic's disciple, novice) with that of weaning, he says: ...*ka-l-ṣabiyy yuftamu 'an(i) l-thady wa-huwa shadīd 'alayhi idh kāna lā yaṣbiru 'anhu sā'a fa-li-dhālika yaṣhtaddu bukā'uhu wa-jaza'uhu 'inda l-ḥitām wa-yaṣhtaddu nufūruhu 'an(i) l-ḥā'ām(i) 'lladhī yuqaddamu ilayhi badal(an) 'an(i) l-laban, wa-lākinahu idhā muni'a l-laban ra's(an) yawm(an) fa-yawm(an) wa-'azuma ta'abuhu fī l-ṣabr 'alayhi wa-ghalabahu l-jaw' tanāwala l-ḥā'ām takalluf(an) thumma yaṣīru lahu ṭab'(an)*. In a touching story of the weaning of the first Caliph, Abū Bakr, his mother is depicted as a compassionate woman who understands the suffering of her little son and, caressing and kissing him, tries to help him overcome this trauma; see Muḥammad b. 'Abdallāh Ibn Zafar, *Kitāb anbā' nujabā' al-abnā'*, Cairo 1319/1901, pp. 43-44.

<sup>116</sup> Ibn Sinā, *al-Qānūn*, Vol. 1, p. 153. In the story of Abū Bakr's weaning (above, n. 115), reference is made to the same technique. The material which is smeared on the breasts to deter the child is *ṣabir*, identified in the glossary supplemented to the Moroccan edition of Ibn Rushd's *Kullīyyāt* (Larache, 1939) as coming from aloe, a plant resembling *sawsan*—lily, iris.

<sup>117</sup> Erikson, *Childhood and Society*, pp. 68-69. On mothers in Silwa, a village near Aswan in Upper Egypt, who "recognize weaning as a 'traumatic experience' for the child and do their best to absorb the child's attention in other directions", see Ammar, *Growing Up in an Egyptian Village*, p. 103.

to greater care for female infants who, as the more fragile, are in need of more motherly love and are given longer lactation periods.<sup>118</sup>

An ancient body of knowledge concerning breastfeeding found its way, as we have seen, from Greek sources into Arabic- "Islamic" medical writings and from there into more popular religious and *adab* compilations. Physiological theories and methods of treatment were, in effect, passed on almost unaltered. In premodern societies, the only way these could be verified was through observation and practice. Even without the benefit of a scientific viewpoint, the supportive attitude of medieval Muslim doctors towards maternal breastfeeding clearly falls into line with modern approaches. Given the hygienic conditions that prevailed at the time, the recourse to wet nurses appears justified as a safe alternative to maternal milk when a baby's mother herself refused or was unable to breastfeed. On the other hand, the total rejection of animal milk, together with the failure to understand the benefits of the colostrum, which meant that maternal breastfeeding was discouraged during the first two or three days after birth, may well have been fatal in many cases.

Learned, let alone popular, medicine was virtually helpless in the face of infections, dehydration, and malnutrition, which are such common occurrences in environments with poor hygienic conditions. However, for parents who turned to it for advice on the selection of a wet nurse, on the nurse's regimen, and on spacing pregnancies, learned medicine had enough to offer so as to contribute to the survival, health, and quality of life of their nurslings.

Finally, regardless of how valid Greek and Arabic-"Islamic" theories of breastfeeding are according to the scientific terms of today and regardless of what their actual impact may have been on everyday life, one cannot but be struck by the truly impressive amount of attention the canonical and popular medical writings dedicated to the needs of the nursling.

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<sup>118</sup> See, for instance, Friedl, "Parents and Children in a Village in Iran", p. 203 (cf. Demaitre, "The Idea of Childhood and Child Care", pp. 461-490); Ammar, *Growing Up in an Egyptian Village*, pp. 101, 103. See also Avner Giladi, "Gender Differences in Child Rearing and Education: Some Preliminary Observations with Reference to Medieval Muslim Thought", *Al-Qantara* 16 (1995), pp. 299-301.

## CHAPTER THREE

### ISLAMIC LEGAL VIEWS ON BREASTFEEDING

#### *Breastfeeding as a Legal Theme*

Muslim jurists, in their collections of positive law (*furū' al-fiqh*), *fatāwā* (opinions of points of law)<sup>1</sup> and *nawāzil* (i.e., real-life cases and the way they resolved them)<sup>2</sup> from the eighth-ninth centuries AD onward devoted long and detailed discussions to breastfeeding. As the *sharī'a* aspired to totality and comprehensiveness, the fact that the Qur'ān and *ḥadīth* literature had already touched upon this issue—albeit only in the context of divorce and impediments to marriage—was sufficient reason to begin elaborating it further. Moreover, since most jurists acted within a fully developed Islamic urban civilization outside the Arab peninsula, it is reasonable to assume that the questions surrounding breastfeeding they were asked to answer demanded ever more complex and sophisticated solutions. Mercenary professional wet nursing, for instance, was probably more common within the circles of the urban elite (where it could happen that free women were exempted from their duty to breastfeed) than among the lower social groups in and outside the cities (see below). Even so, given the structure of the Muslim family and household and the fact that polygamy and sexual relations with female slaves were legal, it probably always remained less popular than in medieval European societies. Still, compared with *ḥadīth* literature, the later legal writings deal with a much wider range of themes connected with breastfeeding, and go into great detail

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<sup>1</sup> Schacht, *An Introduction to Islamic Law*, p. 73; s.v. "Fatwā," *ET*<sup>2</sup>, vol. 2, p. 866 (E. Tyan); David S. Powers, "Legal Consultation (*Futūā*) in Medieval Spain and North Africa", in Chibli Mallat (ed.), *Islam and Public Law*, London, 1993, pp. 85-106, especially pp. 105-106.

<sup>2</sup> "Nāzila", *ET*<sup>2</sup>, Vol. 7, p. 1052; "Consultations juridiques des faqih du Maghreb", *Archives Marocaines* 12 (1908), Avant-Propos by Émile Amar, p. II: "C'est [i.e., the *nawāzil*] l'adaptation du droit théorique aux réalités de la vie, c'est le miroir fidèle des transformations que les nécessités de la pratique font subir aux préceptes rigides du Qur'an et de la Sunna. Rien ne reflète mieux l'état des mœurs, la conception juridique et sociale des institutions publiques et privées, les tendances à l'évolution progressive des nations musulmanes."

about, for example, the rights of the nursling, the rights and duties of each of the parents, and the stipulations to be included in wet nursing agreements. At the same time, as a legal-technical term they define *raḍā'* or *riḍā'a* (infinitive noun of *raḍi'a* or *raḍa'a*: he sucked the breast of his mother<sup>3</sup>) in the restrictive sense of "the suckling which produces the legal impediment to marriage of foster-kinship".<sup>4</sup> And it is in this issue, which, as we already saw, played such an important social role, that Muslim jurists invest a great deal of their intellectual efforts. Dozens of pages are devoted to it in "Books of Marriage" and in chapters on related subjects within collections of positive law and *fatāwā*. Although in their detail these discussions sometimes become extremely theoretical, not to say abstruse, it is clear that they were initiated by a real need to ensure that the widespread pre-Islamic custom of non-maternal breastfeeding would be regulated in an Islamic way, that is, according to the relevant Qur'ānic principles.

That the problem of impediments to marriage stemming from breastfeeding was very much alive and could cause passionate debates is shown by al-Sarakhsī who relates how Muḥammad b. Ismā'il al-Bukhārī (d. 870 AD), the compiler of the well-known *Ṣaḥīḥ* collection of *ḥadīths*, was made to resign his post as a *muftī* and forced to leave Bukhara altogether because he defended the highly controversial view that nurslings who suck from the same animal become relatives and are therefore not allowed to get married.<sup>5</sup>

'Umar b. al-Khaṭṭāb, the second Caliph (r. 634-644 AD), in order to decide whether a particular marriage was valid or not, reportedly tried to reconstruct how it could have happened that the couple had once been nursed by the same woman. The story the nurse tells sounds typical: "Passing through (an alley? a road?), I found him [the boy] thrown [on the floor] crying while his mother was busy baking her bread (*Marartu wa-huwa mulqā yabkī wa-ummuhu tu'ālīju khubz(an) lahā*). I lifted him up, put him to my bosom,

<sup>3</sup> Lane, *Arabic-English Lexicon*, Book I, p. 1097.

<sup>4</sup> "Raḍā'", *EF*<sup>2</sup>, Vol. 8, p. 361; see also 'Abd al-Raḥmān al-Jazīrī, *Kitāb al-fiqh 'ulā'ī-madhāhib al-arba'a*, Dār al-Irshād, n.p., n.d., Vol. 4, pp. 224-225; and see below, Glossary in Appendix A.

<sup>5</sup> Al-Sarakhsī, *Kitāb al-mabsūṭ*, Vol. 30, p. 297.

breastfed him and hushed him (*Fa-akhadhtuhu ilayya fa-arḍa'tuhu wa-sakkattuhu*).<sup>6</sup>

The many *fatāwā* that there are on the legal impediments to marriage of milk kinship show how relevant the issue remained throughout premodern times. For example, what kind of questions were directed at Aḥmad Ibn Ḥanbal, the ninth-century founder of the Ḥanbali school of law, we learn from his son ‘Abdallāh (d. 903 AD):

I asked my father about a man who has two wives, each of whom has a daughter. Then one of the wives nurses a certain man. “Is it lawful for this man’s son to marry the daughter of the wife who did not nurse him?”;<sup>7</sup> (...) I asked my father about a man who has a wife who nurses both a youth and a girl, and the youth has a brother. “Is it lawful for the brother to marry the girl?”;<sup>8</sup> (...) I heard my father asked about a woman who nurses a young female slave belonging to someone else. Then a certain man marries the woman who has nursed the young female slave. “Is it lawful for the man to have intercourse with the female slave his wife has nursed if he buys and takes possession of her?”;<sup>9</sup> (...) I heard my father asked about *laban al-fahl*;<sup>10</sup> (...) I asked my father: “Do one or two acts of suckling establish foster-relationship?”<sup>11</sup>

With the other jurists of his time Ibn Ḥanbal stood at the end of the process, described in Chapter 1, whereby the pre-Islamic Arab norm which forbade marriage with a milk mother or milk sister was carried over into the Qur’ān, after which it was interpreted and further extended in traditions to the point where milk relationship came to equal consanguinity in the way it formed an impediment to marriage. This, in turn, then, formed the basis on which they worked out in such detail the often highly complicated questions about milk relationships, paving the way for later jurists.<sup>12</sup>

<sup>6</sup> Mālik b. Anas, *al-Mudawwana l-kubrā*, Beirut, 1994, Vol. 2, p. 301.

<sup>7</sup> *Chapters on Marriage and Divorce: Responses of Ibn Ḥanbal and Ibn Rāḥwayh*, translated with introduction and notes by Susan A. Spector, Austin, 1993, p. 103.

<sup>8</sup> *Ibid.*, p. 106.

<sup>9</sup> *Ibid.*, p. 109.

<sup>10</sup> *Ibid.*, p. 110.

<sup>11</sup> *Ibid.*, p. 111.

<sup>12</sup> *Ibid.*, p. 24 (Editor’s Introduction).

Thus, we find a long *istiftā'* (consultation on a point of law) being addressed to Ibn Taymiyya, the well-known Ḥanbali jurist from thirteenth-century Damascus, in which he is asked to clear up what is and what isn't forbidden by suckling; to prove the validity of a *ḥadīth* report (attributed to 'Ā'isha), according to which "milk relationships prohibit precisely what blood relationships do"; to give a survey of the diverse legal opinions in this regard and to point out the right ones; and, finally, to treat several related, more specific, questions. Some of these questions clearly reflect everyday situations. For instance: A woman hands her baby over to a female friend, asking her to look after it in a public bath (*ḥammām*). Her friend then suddenly discovers her nipple in the baby's mouth. She pulls it out at once, unclear, however, about whether the baby did or did not suck (*Fī imra'a a'ṭat ukhrā walad(an) wa-humā fī 'l-ḥammām fa-lam tash'ur(i) 'l(i)-mra'a 'llatī akhadhat(i) 'l-walad illā wa-thadyuhā fī famm(i) 'l-ṣabiyy fa-'ntaza'athu fī sā'atīhi wa-mā 'alimat hal(i) 'irtaḍa'a am lā*).<sup>13</sup> A man suffering from ophthalmia rinses his eyes with his wife's milk which then is absorbed into his body (*Fī rajul ramida fa-ghasala 'aynayhi bi-laban zawjatihi*),<sup>14</sup> or a man during foreplay sucks his wife's milk (*Wa-rajul yuḥibbu zawjatahu fa-la'iba ma'ahā fa-raḍa'a min labanihā*).<sup>15</sup> What Ibn Taymiyya is asked to settle in all these and other cases is whether or not they create milk kinship.<sup>16</sup>

For the following basic outline of the network of ties that form prohibitions of marriage because they are milk relationships, I rely on *al-Muḥallā fī 'l-fiqh* ("The Ornamented Book of Law") by Ibn Ḥazm of Cordova (d. 1064 AD), which he wrote while still an

<sup>13</sup> Taqī al-Dīn Ibn Taymiyya, *Majmū'at fatāwā*, Cairo, 1326/1908, Vol. 4, p. 150.

<sup>14</sup> Human milk was regarded as a remedy for various diseases, including diseases of the eye, as mentioned in *Kitāb manāfi' al-ḥayawān wa-'l-insān* attributed to Nafīs b. 'Iwāḍ al-Kirmānī, fol. 3a. Human milk was either dropped into the eye or used as an anointment: *Wa-yanfa'u aḡḍ(an) min(a) 'l-ramad* (ophthalmia) *idhā qutira fī 'l-ayn wa-in ṭuliya bihi 'l-ayn nafa'a min waramihā*. For the Graeco-Roman and Byzantine medical use of human milk and for more references to it in Arabic medical sources, see Emilie Savage-Smith, "Ibn al-Nafīs's *Perfect Book on Ophthalmology* and His Treatment of Trachoma and Its Sequelae", *Journal for the History of Arabic Science* 4 (1980), p. 171, n. 74. See also Yalom, *A History of the Breast*, p. 206.

<sup>15</sup> Ibn Taymiyya, *ibid*.

<sup>16</sup> A short discussion of questions connected with wet nursing and impediments to marriage is to be found in another collection of *fatāwā* by Ibn Taymiyya, *al-Ikhtiyārāt al-fiqhiyya min fatāwī shaykh al-islām Ibn Taymiyya*, Beirut, n.d., p. 283.

ardent follower of the Shāfi'ite school of law, i.e., before his conversion to the Zāhiriyya:<sup>17</sup>

a. A woman [y], who nurses a (strange) male child [x], is forbidden to him (for marriage) (*ḥurriyat 'alayhi*) since she has now become his milk mother (*li-annahā ummuhu min(a) 'l-riḍā'a*).

b. Forbidden to [x] are [y]'s daughters because they are now his (milk) sisters—those who had been born before he was nursed (by their mother) and those who were born afterwards (*sawā' fī dhālika man wulidat qablahu aw man wulidat ba'dahu min(a) 'l-riḍā'a*).

c. Forbidden to [x] are [y]'s sisters because they are now his maternal milk aunts (*khālātuhu min(a) 'l-riḍā'a*).

d. Forbidden to [x] are [y]'s mother and grandmothers (*umma-hātuhā*) because they are now his (maternal) grandmothers (*jaddātuhu*).

e. Forbidden to [x] are the sisters of [y]'s husband, that is, the man whom she bore a child and with [whose] milk that flowed as a result she nursed him [x], because they are his paternal milk aunts (*Wa-ḥurrima 'alayhi akhawāt zawj(i) 'llatī arḍa'athu bi-labanihā min ḥaml minhu li-annahunna 'ammātuhu min(a) 'l-riḍā'a*).

f. Forbidden to [x] are the mother and grandmother of [y]'s husband because they are now his (paternal) grandmothers (*jaddātuhu*).

g. Forbidden to a man is the (female) nursling who sucked from his wife the milk that flowed as the result of her pregnancy with his child because she is to be counted among his daughters (*Wa-ḥurrima 'alayhi man arḍa'at(i) 'mra'atuhu bi-laban ḥadatha lahā min ḥaml minhu li-annahā min banātihī*).

Also forbidden to a man are all those who sucked from his wife (even if it happens to be the milk which flowed as the result of her being pregnant with child by another man, e.g., her former husband), since the legal status of his wife's milk daughter is like that of the girl to whom she actually gave birth (and a man is not allowed to marry—either simultaneously or consecutively—a woman and her daughter).

<sup>17</sup> On Ibn Ḥazm and the Zāhiriyya see, for instance, Muḥammad Abū Lailā, "An Introduction to the Life and Work of Ibn Ḥazm", *The Islamic Quarterly* 29 (1985), pp. 86-91.

h. A man is not allowed to marry two women who are milk sisters (*Wa-lā yajma'u bayna ukhtayni min(a) 'l-riḍā'a*).<sup>18</sup>

Countless numbers of specific cases were then examined on the basis of this outline which, Ibn Ḥazm (mistakenly) claims, was “agreed upon by all jurists”.<sup>19</sup> How specific—not to say casuistic—these cases could be is shown by al-Sarakhsī's *Kitāb al-mabsūṭ*, compiled in Transoxania during the same period *al-Muḥallā* was written in Spain:

(a) A man has a son and a daughter who both sucked from his brother's wife. The son is not allowed to marry any of the daughters of his nurse (who as paternal cousins, would have been natural candidates for marriage but have now become his milk sisters) whether they were born before or after he suckled, whether they are his uncle's own children or even the children of his wife who were born to another man (*Lam yakun li-l(i) 'bn(i) 'lladhī arḍa'athu 'l-mar'a an yatazawwaja aḥad(an) min wuld(i) 'l-mar'a qabla 'l-raḍā' aw ba'dahu min banāt(i) 'l-'amm kunna aw min ḡhayrihi*).<sup>20</sup>

(b) (But) if the female nursling (of the above-mentioned nurse) has a child and so does the male nursling, as well as the (biological) children of the nurse and her husband, marriage between each of those children is allowed because the females among them have become paternal milk cousins of the males (*Jāzat(i) 'l-munākaḥa fīmā baynahum li-anna 'l-unthā minhum(u) 'bnat 'amm li-l-dhakar min(a) 'l-riḍā'a*).<sup>21</sup>

c. A man [x] has two wives, one of whom nurses a (strange) girl [y], and the other a (strange) boy [z]. The (either full or partial) brother of [x] is not allowed to marry [y], who (by means of suckling) has become the milk daughter of his brother [x] (*li-annahā 'bnat akhīhi*); [x]'s paternal uncle is not allowed to marry [y] because she has become his nephew's daughter (*ibnat(u) 'bn akhīhi*); [x]'s son and [x]'s grandson are not allowed to marry [y] because (for the latter) she has become a paternal milk aunt (*li-annahā 'ammatuḥu min(a) 'l-riḍā'a*) (whereas for the first she has become a sister); [x]'s maternal uncle is not allowed to marry [y] because she

<sup>18</sup> 'Alī b. Aḥmad b. Sa'īd Ibn Ḥazm, *al-Muḥallā*, Cairo, 1347-52/1928-33, Vol. 10, p. 2.

<sup>19</sup> Ibid.

<sup>20</sup> Al-Sarakhsī, *Kitāb al-mabsūṭ*, Vol. 30, p. 294.

<sup>21</sup> Ibid.

has become his nephew's daughter (*bint(u) 'bn ukhtihī*); [z] is not allowed to marry his nurse's mother, grandmother, or sister, nor her maternal or paternal aunts (*wa-lā yajūzu li-hādha 'l-ṣabiyy(i) 'l-murḍi' an yatazawwaja umm(a) 'l-murḍi'a wa-lā jaddatahā wa-lā ukh-tahā wa-lā khālatahā wa-lā 'ammatahā*).<sup>22</sup>

(d) A woman [x] nurses a (strange) boy [y] who later marries a woman [z]. If [y] divorces [z] (whether before or after the consummation of marriage), [x]'s husband is not allowed to marry [z] since she has been his milk son's wife (*Lam yakun li-zawj(i) 'l-murḍi'a an yatazawwaja tilka 'l-mar'a li-annahā ḥalīlat(u) 'bnihi min(a) 'l-ri-ḍā'a*).<sup>23</sup>

(e) A divorced woman or a widow nurses a (strange) child after the termination of her waiting period (*'idda*).<sup>24</sup> The milk relationship between her (strange) nursling and her (former) husband is established as if the suckling took place within their marriage period. This is because her pregnancy and giving birth to his child and thus the flowing of her milk was the outcome of her sexual relationships with this man, and that is the origin of the milk, for as long as it flows (*li-anna sabab nuzūl(i) 'l-laban lahā kāna wa' dhālika 'l-zawj fa-mā baqiya dhālika 'l-laban yakūnu muḍāf(an) ilā dhālika 'l-sa-bab*). If she remarries and then suckles a (strange) child, milk relationships are established between the latter and her former husband so long as she does not conceive a child by her new husband. This is because the act of marriage in itself does not make the milk flow (*Fa-in tazawwajat ba'da dhālika thumma arḍa'at ṣabiyy(an) fa-ka-dhālika 'l-jawāb mā lam taḥbal min(a) 'l-thānī li-anna 'l-tazawwuj laysa sabab(an) li-nuzūl(i) 'l-laban lahā*). Even when she conceives a child by her second husband and then suckles a (strange) child, the latter, according to Abū Ḥanīfa, should be regarded as her first husband's milk child so long as she does not actually give birth to her second husband's child (*annahu tathbutu 'l-ḥurma bayna 'l-ṣabiyy wa-'l-zawj(i) 'l-awwal mā lam talid min(a) 'l-thānī*). Only when she gives birth to his child and then nurses a (strange) child, should

<sup>22</sup> Ibid., pp. 294-295.

<sup>23</sup> Ibid., p. 295.

<sup>24</sup> For a free woman who is not pregnant the *'idda* lasts until her third menstruation after the dissolution of her marriage, or four months and ten days in case her husband has died; for a pregnant woman it lasts until her delivery; Schacht, *An Introduction to Islamic Law*, p. 166.

the second husband be regarded as the milk father of this (strange) nursling (*Fa-in waladat min(a) 'l-thānī thumma arḍa'at fa-ḥīna 'idh(in) yakūnu ḥukm(u) 'l-raḍā' li-l-thānī*).<sup>25</sup>

(f) If a man contracted to marry a girl, and his mother, milk mother or sister nurses her, then a separation should take place between them since the girl has become her husband's milk sister (*waqa'at(i) 'l-firqa baynahumā bi-sabab(i) 'l-raḍā' li-annahā ṣārat ukht(a) 'l-zawj*).<sup>26</sup> However, if the girl was breastfed by her husband's maternal or paternal aunt, then their marriage is valid since she has become his (milk) cousin (*Wa-law kānat arḍa'at hādhihi 'l-ṣabiyya khālat(u) 'l-rajul aw 'ammatuḥu lam yuḥarram 'alayhā li-annahā ṣārat(i) 'bnat khālatihi aw(i) 'bnat 'ammatihī*). If the girl was breastfed by the wife of her husband's father and the milk was actually "his" (i.e., the husband's father's), then the girl, now a (milk) sister of her husband, is forbidden to him and a separation should take place (*Wa-in arḍa'athā 'mra'at abīhi fa-in kāna labanuhā min abīhi ḥurrimat 'alayhi li-annahā ṣārat ukhtahu li-abīhi*). However, if the flow of her milk was caused by another man (i.e., not by the husband's father), then the marriage between the girl and her husband remains valid (*Wa-in kāna labanuhā min ḡayr abīhi lam tuḥarram 'alayhi*). The same rules apply when the wife of the man's brother or his son's wife breastfed the girl.<sup>27</sup>

<sup>25</sup> Al-Sarakhsī, *ibid.*, pp. 295-296; on the debate on this case between jurists, see p. 296.

<sup>26</sup> *Ibid.*, p. 297. This case involves arrangements concerning a partial return of the nuptial gift which are discussed by the author in detail. On child marriage in premodern Muslim societies, see: "Ṣaḡīr", *EF*<sup>2</sup>, Vol. 8, p. 826; Harald Motzki, "Child Marriage in Seventeenth-Century Palestine", in Muhammad Khalid Masud et al. (eds.), *Islamic Legal Interpretation: Muftis and Their Fatwas*, Cambridge Mass., 1996, pp. 129-140, esp. p. 130: "In premodern Islamic law marriage with a minor or between minors is allowed regardless of the age of the child in question, even with a baby. The jurists differentiate, however, between the marriage contract ('*uqd al-nikāh*'), which the guardian of a child can conclude on the child's behalf, and consummation (*dukkhūl*), which must not take place until the partner in question is physically ready for it."

<sup>27</sup> Al-Sarakhsī, *al-Mabsūṭ*, vol. 30, p. 298. For a discussion of similar cases within the framework of other schools of law see, for instance, Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Beirut, 1994, Vol. 2, pp. 301-303: "*Fī 'l-rajul yatazawwaju 'l-ṣabiyya faturḍi'uhā 'mra'ā lahu ukhrā aw ajnabiyya aw ummuhu aw ukhtuhū*" (the Mālikī school of law); 'Abdallāh Ibn Qudāma, *al-Mughnī*, Beirut, 1972, Vol. 11, pp. 210-217 (the Hanbali school of law).

(g) A man has married two women, one of whom is a minor and the other an adult, and the mother of the latter nurses the first. The man should then divorce both women, as they have become milk sisters (*Wa-law anna rajul(an) lahu 'mra'atāni ṣaghīra wa-kabīra fa-arḍa'at umm(u) 'l-kabīrat(i) 'l-ṣaghīra bānatā jamī'(an) li-annahumā ṣāratā ukhtayni min(a) 'l-riḍā'a*). The full-grown wife is entitled to keep the entire nuptial gift only if her marriage was consummated. If it was not, she is allowed to hold only half of it. If the man did not consummate his marriage with the full-grown woman, then he is allowed immediately to marry one of them, whomever he wishes, but certainly not both (*In kāna lam yadkhul bi-'l-kabīra fa-lahu an yatazawwaja min sā'atīhi ayyatahumā shā'a wa-lā yajma'a baynahumā*). However, he is not allowed to marry the nurse because she is now his wife's milk mother (*Wa-laysa lahu an yatazawwaja 'l-murḍi'a li-annah umm(u) 'mra'atīhi*).<sup>28</sup>

(h) A man has married two women, one of whom is a minor and the other full-grown, and the latter breastfeeds the first. The man should then divorce both wives as they have become milk mother and milk daughter (*Wa-law kānat(i) 'mra'atāni ṣaghīra wa-kabīra fa-arḍa'at(i) 'l-kabīrat(u) 'l-ṣaghīra bānatā jamī'(an) li-annahumā ṣāratā umm(an) wa-bint(an)*).<sup>29</sup>

(i) A man who is married to two women, one a minor and the other full-grown, divorces the latter before his marriage with her has been consummated. Later, the divorced wife comes and nurses the younger one, but the marriage with the latter remains valid because when they became (milk) mother and (milk) daughter, the (milk) mother was no longer the man's wife (*Fa-nikāḥ(u) 'l-ṣaghīra 'alā ḥālīhi li-annahumā ḥīna ṣāratā umm(an) wa-bint(an) fa-laysat(i) 'l-umm fī nikāḥīhi*). However, if the man did consummate his marriage with the older wife (and then divorced her), the younger wife becomes forbidden to him whether the 'idda period of the older woman who suckled her had ended or not (*Wa-law kāna dakhala bi-'l-kabīra ḥurrimat(i) 'l-ṣaghīra sawā' arḍa'athā qabla 'nqīḍā'(i) 'l-'idda aw ba'dahu li-wujūd(i) 'l-dukḥūl bi-'l-umm*).<sup>30</sup>

<sup>28</sup> Al-Sarakhsī, *ibid.*

<sup>29</sup> *Ibid.*, p. 299.

<sup>30</sup> *Ibid.*, p. 300.

(j) A (strange) woman who breastfeeds a man's son is allowed to get married to the man since the mother of a man's son is not included among those forbidden to him (*Wa-law(i) 'mra'a jā'at ilā rajul fa-arḍa'at waladahu 'l-ṣaghīr kāna lahu an yatazawwajahā li-annahā umm waladihi wa-umm waladihi laysat min(a) 'l-muḥarramāt 'alayhī*).<sup>31</sup>

(k) A man has two wives—one is a minor and the other is full grown. His son is also married to two wives like these. Now, the man's older wife breastfeeds the son's minor wife, and the son's older wife breastfeeds the man's minor wife. In case the milk of both nurses flowed as a result of intercourse with the father and his son, respectively, then the two minor wives should be separated from their husbands. This is because the son's wife has become his own (milk) sister (sharing the same father), and the father's (minor) wife has become the (milk) daughter of his own son (*Fa-qad bānat(i) 'l-ṣaghīratāni min zawjihimā wa-lā tuḥallu wāḥida minhumā li-l-ab wa-li-l(i)-'bn li-anna 'mra'at(a) 'l-ab arḍa'at(i) 'mra'at(a) 'l(i)-'bn bi-laban(i) 'l-ab fa-qad ṣārat(i) imra'at(u) 'l(i)-'bn ukhtahu li-abīhi wa-lammā arḍa'at(i) 'mra'at(u) 'l(i)-'bn bi-labanihi 'mra'at(a) 'l-ab fa-qad ṣārat(i) 'bnat(a) 'bnihi min(a) 'l-riḍā'a*).<sup>32</sup>

What clearly arises from the above is that, if it were consistently applied, such a ramified system of prohibitions of marriage would have far-reaching social consequences. To begin with, there was the accepted practice, borne of necessity, whereby mothers occasionally handed their infants over to neighbouring women—often members of the same extended family—who would nurse them for them. With milk relations forming a bar to marriage, this naturally limited the possibilities of endogamous marriages. Then also, as I suggested above (Chapter I), encouraging exogamous ties may well have been what the Prophet Muḥammad himself intended to achieve when he laid down the foundations of the system. Later some jurists are found to voice reservations concerning what they regarded as the negative outcome strict adherence to the prohibitions it put in place was to have for society, and they set out to reduce the number of instances. In this they may have been

<sup>31</sup> Ibid., p. 301.

<sup>32</sup> Ibid., p. 303.

inspired by certain *ḥadīth* accounts which already seem to question whether the rules found in the Qur'ān—or those that could be read into it—concerning impediments to marriage ought to be uncompromisingly followed.

For example, Muslim jurists singled out those cases where there was no symmetry between blood relationships and milk relationships vis-à-vis prohibitions of marriage.<sup>33</sup> For instance, a man is allowed to marry the (biological) mother or the (biological) sister of his (milk) brother (provided, of course, their milk brotherhood was created by both of them having suckled from a strange woman) since, as Ibn Taymiyya puts it “this is not corresponding to consanguinity” (*Wa-ḥādḥā lā naẓīr lahu fī 'l-nasab*).<sup>34</sup> By the same token, according to Muḥammad b. Maḥmūd al-Asrūshānī, the Transoxanian Ḥanafī jurist of the twelfth-thirteenth centuries AD, a man may marry the milk sister of his biological daughter (*Yajūzu nikāḥ(u) 'l-ukht(i) 'l-riḍā'īyya li-l(i)-'bna 'l-nasabiyya*) or the milk daughter of his son's milk mother, whereas he cannot marry his wife's biological daughter by another man (*Wa-lā ba'sa bi-an yatazawwaja 'l-rajul(u) 'l-mar'a 'llatī arḍa'at(i) 'bnahu li-annahū lā ba'sa bi-dhālika min(a) 'l-nasab. Wa-kadhālika la ba'sa li-an yatazawwaja 'bnatahā 'l-murḍa'a wa-fī 'l-nasab innamā lā yajūzu ḥādḥā*).<sup>35</sup>

Second, though their recorded discussions reveal there was much disagreement among them, Muslim jurisconsults now began to try to define more exactly under which circumstances breastfeeding created an impediment to marriage. Ibn Ḥazm lists five main issues related to this question:

(a) *Laban al-faḥl*: “sire's milk”, that is, whether milk relationships are created between strange nurslings and the nurse's husband, the actual owner of the milk, and his relatives;

<sup>33</sup> It should be noted that milk relationships do not involve any commitment of one party to another on such matters as maintenance, manumission of *umm walads*, and the like; see Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 192; Yaḥyā b. Sharaf al-Nawawī *al-Majmū'*, Vol. 18, p. 207.

<sup>34</sup> Ibn Taymiyya, *Majmū'at fatawā*, Vol. 4, p. 148, and also 149, 150, cf. Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 201. For a similar Shāfi'ite view, see: al-Nawawī, *al-Majmū'*, Vol. 18, pp. 207-208.

<sup>35</sup> Muḥammad b. Maḥmūd al-Asrūshānī (d.632/1234 or 1235), *Jāmi' aḥkām al-ṣiḡhār*, Cairo, n.d., Vol. 1, pp. 118-119.

(b) *Ṣifat al-radā' al-muḥarrim*: “the quality” of the milk, or rather, which ways of transmitting milk from a nurse to a nursling create an impediment to marriage;

(c) *'Adad al-radā' al-muḥarrim*: what is the minimal number of sucklings that create an impediment to marriage;

(d) *Radā' al-kabīr*: “suckling a grown-up person”, in other words, what is the maximal age at which breastfeeding creates an impediment to marriage;

(e) *Al-radā' min mayyita*: whether or not absorbing the milk of a dead woman creates an impediment to marriage.<sup>36</sup>

### *Laban al-fahl*

Echoes of the dispute concerning *laban al-fahl* in *ḥadīth* literature (see above, Chapter 1) can be heard in later legal treatises, which means that the question of its impact as a source of impediments to marriage had not been unequivocally resolved. However, the leading jurists of all main schools of law seem to accept its incidence,<sup>37</sup> thus endorsing the norm whereby early Muslims sought to encourage exogamous marriages. Ibn Ḥazm presents three views on this issue. The first entirely ignores the nurse's husband when milk relationships between a nursing woman and her (strange) nurslings are established. In social terms this attitude may well be part of the efforts to offset the rule of *laban al-fahl* and the harm it did to familial and tribal interests, and there is support for it in sayings attributed to believers of the first generations of Islam, such as: “suckling creates impediments to marriage only when it is ‘from women’, not ‘from men’” (*Innamā yuḥarrimu min(a) 'l-riḍā'a mā kāna min qibali 'l-nisā', wa-lā yuḥarrimu mā kāna min qibali 'l-rijāl*). The opposite, more widely accepted view is exemplified by a case already found in *ḥadīth* collections: a woman

<sup>36</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 2.

<sup>37</sup> Muḥammad b. Aḥmad Ibn Rushd (d. 520/1126), *Muqaddimat Ibn Rushd li-bayān mā 'qtadathu 'l-mudawwana min(a) 'l-aḥkām*, Beirut, 1994, Vol. 5, p. 272: *Wa-qad(i) 'khtalafa 'l-'ulamā' fi laban(i) 'l-fahl fa-tā'ifa anzalathu manzil(a) 'l-umm fa-awjabat bihi 'l-taḥrīm wa-huwa qawl Mālik wa-aṣḥābihi wa-'l-Shāfi'i wa-Abī Ḥanīfa wa-aṣḥābihimā wa-'l-Thawrī wa-Aḥmad Ibn Ḥanbal wa-akthar ahl(i) 'l-'ilm. Wa-tā'ifa karihathu min-hum... wa-'alā taḥrīmihī 'l-'amal*. For a similar view of a Shāfi'ite jurist, see al-Nawawī, *al-Majmū'*, Vol. 18, pp. 210-211.

and a man who, separately in their infancy, suckled from two women unrelated to each other but married to the same husband are not allowed to get married since the semen, considered the source of the milk of both, was one and the same (*al-liqāḥ wāḥid*).<sup>38</sup> “Certainly a man does not bring forth children by means of pregnancy and delivery like a woman”, says Muḥammad Ibn Rushd, the Andalusian Mālikite jurist of the eleventh-twelfth centuries AD, “but he begets children by means of his semen which causes the (woman’s) pregnancy and flow of milk. Thus he becomes a parent just as the woman does by pregnancy and delivery.”<sup>39</sup>

Then also, there were jurisconsults who remained undecided on the point of “sire’s milk” (*Wa-tawaqqafa fīhi ākharūn*).<sup>40</sup> Al-Sarakhsī, who in his *al-Mabsūṭ* called the whole chapter on impediments to marriage stemming from breastfeeding *Bāb tafsīr laban al-fahl* (“The chapter clarifying the concept of ‘sire’s milk’”), is very much aware of the lack of agreement amongst *fuqahā’* in this regard. Accepting the parallel, attributed to the Prophet, between blood and milk relations, he himself adopts the view that a nurse’s husband should be regarded as the (milk) father of his wife’s (strange) nurslings: just as it is the cause of her pregnancy and childbirth, intercourse with him is the source of the nurse’s milk.<sup>41</sup>

On the whole, we find that as soon as the concept of “sire’s milk” is adopted in principle, it raises a whole range of specific legal problems. To mention only some: whether the husband should be regarded as the (milk) father of a strange nursling his wife suckled after she had weaned their own (biological) child (whom she had breastfed for two years); whether a man should be regarded as the (milk) father of the (strange) nursling of his divorced wife who after the *‘idda* had remarried and was now simultaneously nursing

<sup>38</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, pp. 3-5.

<sup>39</sup> *Muqaddimat Ibn Rushd*, Vol. 5, p. 270: *Wa-ma’lūm anna ‘l-ab lam yalid awlādahu bi-‘l-ḥaml’ wa-‘l-waḍ’ kamā šana‘at(i) ‘l-umm wa-innamā waladāhum bi-mā kāna min mā ‘ihī ‘l-mutawallad ‘anhu ‘l-ḥaml wa-‘l-laban fa-šāra bi-dhālika wālid(an) kamā šarat(i) ‘l-umm bi-‘l-ḥaml wa-‘l-waḍ’*. For a similar view of a Ḥanbali jurist see: Ibn Qudāma, *al-Mughnī*, Vol. 9, pp. 199-201.

<sup>40</sup> Ibn Ḥazm, *ibid*.

<sup>41</sup> Al-Sarakhsī, *al-Mabsūṭ*, Vol. 30, pp. 293-294: *Wa-li-anna ‘l-nabiyy ṣallā Allāh ‘alayhi wa-sallama shabbaha ‘l-riḍā’a bi-‘l-nasab. Wa-‘l-ḥirma bi-‘l-nasab tathbutu min(a) ‘l-jānibayni fa-ka-dhālika sabab(u) ‘l-irḍā’ li-anna waṭ‘(a) ‘l-zawj kamā kāna sabab(an) li-wilādatihā kāna sabab(an) li-nuzūl(i) ‘l-laban laḥā.*

the child she had borne her second husband; whether only the second husband or perhaps both husbands should be regarded as the (milk) father of that nursling; whether a man should be regarded as the (milk) father of an infant his pregnant wife has been nursing before giving birth to his own (biological) child;<sup>42</sup> whether the milk that flows following a pregnancy which is the result of an illicit relationship creates milk kinship between a (strange) nursling and the (male) who had made the nurse pregnant;<sup>43</sup> and, finally, whether a man should be regarded as the (milk) father of a nursling whom his wife breastfeeds after having given birth to a child she insists is his, though he denies it.<sup>44</sup>

### *Ṣifat al-radā'*

The question of *ṣifat al-radā'* revolves around the ways the milk is transmitted from the nurse to the nursling. As far as I can judge, it is nowhere raised in *ḥadīth* collections. Legal writings reflect two tendencies with contrasting social implications. According to a purely reductive view based on the literal meaning of *arḍa'nakum* (Qur'ān 4/23: "those who are your mothers by having suckled you..."), only direct suckling, that is to say, from the nurse's breasts to the nursling's mouth, should be regarded as *radā'* and brings about prohibitions of marriage (*Wa-ammā ṣifat(u) 'l-radā' fa-innamā huwa mā 'mtaṣṣahu 'l-radī' min thadyi 'l-murḍi'a bi-fihī faqat*).<sup>45</sup> The second, opposite view, however, holds that besides direct suckling, human milk can be transmitted in many different ways, all involving impediments to marriage. These include, for instance, pouring milk from the breasts of a woman into a (strange) infant's mouth with no act of sucking; giving an infant the milk of a (strange) woman from a vessel (*Man suqīya laban(a) 'mra'a fa-shari-bahu min inā' aw ḥuliba fī fihī fa-bali'ahu*);<sup>46</sup> feeding an infant with

<sup>42</sup> Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Vol. 2, pp. 296-297: *Mā jā'a fī radā'(i) 'l-fahl*. For other, similar cases, see: Ibn Qudāma, *al-Mughnī*, Vol. 9, pp. 204-205, 207, 208; al-Nawawī, *al-Majmū'*, Vol. 18, pp. 224-225.

<sup>43</sup> Al-Nawawī, *al-Majmū'*, p. 222.

<sup>44</sup> *Ibid.*, p. 228.

<sup>45</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 7.

<sup>46</sup> *Ibid.*

bread or with other kinds of food mixed with a (strange) woman's milk (*Wa ut'imahu bi-khubz wa-fī ta'am*);<sup>47</sup> pouring (strange) human milk into an infant's nose, eye, or ear and injecting (strange) human milk into an infant's rectum (*Aw šubba fī fammihī aw fī unfihī aw fī udhnihi aw ḥuqina bihi*).<sup>48</sup> Three leading jurists in early Islam, Abū Ḥanīfa (d. 767 AD), Mālik b. Anas (d. 795 AD), and al-Shāfi'ī (d. 820 AD), are said to have accepted the view—later also supported by the Syrian Ḥanbali jurist, Ibn Qudāma (d. 1223 AD)<sup>49</sup>—that pouring (strange) human milk into an infant's mouth or nose (*sa'ṭ, wujūr*) involves prohibitions of marriage,<sup>50</sup> thus legally multiplying the cases in which breastfeeding creates impediments to marriage. For them, all human milk which “stills a baby's hunger”, “raises the bones and makes the flesh grow”, as the *ḥadīth* puts it, creates impediments to marriage. Still, the legal consequences of dripping human milk not only into the mouth but into other orifices of an infant's body as well, such as ears, rectum or urinary canal, remain subject to dispute even among jurists who acknowledge the effectiveness in this respect of *sa'ṭ* and *wujūr*.<sup>51</sup>

Ibn Ḥazm himself represents the opposite position which implicitly meant to ease the social consequences of such regulations. He argues, for instance, that pouring milk into an infant's mouth or nose (not to speak of eyes, ears, etc.) does not “still its hunger” and therefore is not effective in terms of *tahrīm*.

Including as it did ways of transmitting milk other than direct suckling, the more flexible definition of *raḍā'* as forming prohibitions of marriage required a further characterization of what kind of milk resulted in impediment to marriage. Thus, stress is given to what must have been self-evident in the first place, namely, that only human, not animal milk creates prohibitions of marriage (*Lā takūnu 'l-ḥurma fī 'l-raḍā' illā fī laban banāt ādam*)<sup>52</sup> and that

<sup>47</sup> Ibid.

<sup>48</sup> Ibid.

<sup>49</sup> Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 195, 196.

<sup>50</sup> Ibn Ḥazm, *ibid.*, p. 8. For the Mālikite position, see Mālik b. Anas, *al-Mudawwana 'l-kubrā*, p. 295. For the Shāfi'ite view, see al-Nawawī, *al-Majmū'*, Vol. 18, p. 218. For the Ḥanafite view, see Abū al-Layth Naṣr al-Samarqandī (d. 983 AD), *Khizānat al-fiqh wa-'uyūn al-masā'il*, Baghdad, 1965, p. 196.

<sup>51</sup> Al-Asrūshānī, *Jāmi' ahkām al-ṣiḡḥār*, Vol. 1, p. 119.

<sup>52</sup> Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Vol. 2, p. 303; see above, Chapter 2, n. 25.

human milk meant the breastmilk of a woman, not a man (*wa-anna laban(a) 'l-rijāl laysa mim mā yuḥarrimu*<sup>53</sup>). A question was also raised as to whether it causes prohibitions of marriage when a child eats thick, cheesy (human) milk (*Wa-in 'amila 'l-laban jubn(an) thumma at'amahu 'l-sabiyy*) or (human) milk mixed with liquid or solid food (*al-mashūb(u) 'l-mukhtalaṭ*). For al-Shāfi'ī, since in both cases the milk “raises the infant’s bones and makes its flesh grow”, the answer is in the affirmative whereas for Abū Ḥanīfa neither falls under the category of *radā'*. A third view holds that when milk is mixed with another substance, impediments to marriage are created only when milk takes up the larger part (*aw(i) 'khtalaṭa 'l-mā' bi-'l-laban wa-'l-laban ghālib*, *aw(i) 'khtalaṭa bi-'l-ṭa'ām wa-kāna 'l-laban ghālib(an)*).<sup>54</sup>

Interesting is that jurists were aware of the potential abuse that could be made of breastfeeding in order to create familial bonds. In his *al-Muḥallā* Ibn Ḥazm mentions the second Caliph, 'Umar b. al-Khaṭṭāb (r. 634-644 AD) as having set limits to such cases. Asked which kinds of suckling create impediments to marriage (*mā yuḥarrimu min(a) 'l-radā'*), 'Umar excludes three: *ḍarrār* (lit. “that harms, injures, hurts”), when a woman nurses two (strange) infants for the sole purpose of creating milk relationships between them (*an turḍi'a 'l-mar'a 'l-waladayni kay tuḥarrima baynahumā*); *'ufāfa* (lit. “somewhat of milk remaining in the breast... after most of it has been sucked”<sup>55</sup>), that is, when a woman prods an infant to suck milk remaining in her breasts (*al-shay'(a) 'l-yaṣīr(a) 'l-ladhī yabqā fī 'l-thady*); *malja* (lit. “a single suck”<sup>56</sup>), that is, when a woman snatches and breastfeeds a strange infant for a deceitful purpose (*ikhtilās(u) 'l-mar'a walad ghayrihā fa-tulqimuhu thadyahā*). In all three cases, says Ibn Ḥazm, breastfeeding plays no role in the physical development of the infant and therefore is not to be regarded as effective when it comes to impediments to marriage.<sup>57</sup>

<sup>53</sup> Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Vol. 2, p. 303.

<sup>54</sup> Al-Samarqandī, *Khizānat al-fiqh wa-'uyūn al-masā'il*, Vol. 1, p. 196. See also: Ibn Qudāma, *al-Mughnī*, Vol. 9, pp. 196, 197; al-Nawawī, *al-Majmū'*, p. 221.

<sup>55</sup> Lane, *Arabic-English Lexicon*, Book I, p. 2088.

<sup>56</sup> *Ibid.*, p. 2731.

<sup>57</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 11.

*'Adad al-radā' al-muḥarrim*

In their discussions of what constituted the minimal number of sucklings to create prohibitions of marriage, jurists rely to a great extent on *ḥadīth* material. As we saw in Chapter 1, the *ḥadīth* is rather detailed on this point and contains views that range from one single drop of milk to three, seven or even ten (separate) suckling sessions. Jurists of all schools of law seem to have accepted a minimum of five separate suckling sessions (each one of them stilling a baby's hunger) as necessary for establishing milk relationships, except for the Mālikites.<sup>58</sup> Mālik b. Anas, as among those who sought to broaden the social impact of non-maternal breastfeeding, adopts a single suckling as sufficient (*wa-in kānat maṣṣa wāḥida fa-hiya taḥrimu*).<sup>59</sup>

Given these different views, an exact definition was needed of what constituted a single suckling session. Here we find the legal literature contributing its own share to the discussion, no doubt also because no categorical *shar'ī* ruling existed. Al-Nawawī refers to the common custom (*'urf*) (in his native south Syria, more particularly in Damascus where he studied and taught?) whereby one session meant the moment a baby is put to suck to the moment when having drunk its fill, it stops voluntarily. Sessions which are briefly interrupted by some form of distress, when an outside cause diverts the suckling's attention, or when the nursing woman simply changes breasts should also be counted as single suckling sessions.<sup>60</sup>

How far such discussions could go is illustrated by al-Nawawī who describes the following two situations: a certain quantity of milk is taken from a woman all at once and then given to an infant in five separate sessions (*Wa-in ḥulibat laban(an) kathīr(an) daf'a wāḥida wa-saqathu fī khamsat awqāt*); or, conversely, milk is taken in five separate sessions and then given to an infant all at once (*Wa-in ḥulibat khams marrāt wa-saqathu daf'a wāḥida*). In either case, do we have

<sup>58</sup> Ibid., p. 9; see also al-Nawawī, *al-Majmū'*, Vol. 18, pp. 207, 210, 213; *Chapters on Marriage and Divorce: Responses of Ibn Ḥanbal and Ibn Rāḥwayh*, pp. 170, 171; Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 192; Ibn Taymiyya, *al-Ikhtiyārāt al-fiqhiyya*, p. 283; id., *Majmū'at fatāwā*, Vol. 4, pp. 147, 154-155.

<sup>59</sup> Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Vol. 2, pp. 295, 296.

<sup>60</sup> Al-Nawawī, *al-Majmū'*, Vol. 18, p. 214; see also Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 194.

one suckling session or five separate sessions?<sup>61</sup> This question itself is again another example of the preoccupation with the social implications of breastfeeding—not seldom the solutions offered are as different from one another as the cases themselves.

### *Radā' al-kabīr*

The question of *radā' al-kabīr*, “suckling a grown-up”, and what it meant in terms of creating impediments to marriage was in dispute already among Muslims of the first generations, as is well reflected in *ḥadīth* literature (see above, Chapter 1). It is not surprising, therefore, that later jurists mainly derived their arguments from *ḥadīth*, which they then elaborated further. Again we find the two contrasting tendencies whereby, on the one hand, non-maternal nursing is made to prohibit endogamous unions as much as possible and, on the other, a way is sought to keep its social implications within bounds.

Supporters of *radā' al-kabīr* as creating a bar to marriage seem to have been in the minority (*Wa-ammā radā' kabīr fa-innahu lā yuḥarrimu fī madhhab(i) 'l-a'immat(i) 'l-arba'a bal lā yuḥarrimu illa radā'(u) 'l-ṣaghīr*).<sup>62</sup> One of the prominent jurists to be listed among them is Ibn Ḥazm (though he also systematically surveys rivalling points of view). He opens the relevant section in his *al-Muḥallā* by declaring that the suckling of a grown-up, even when this is an old man, is as effective as the suckling of an infant (*Wa-radā'(u) 'l-kabīr muḥarrim wa-law annahu shaykh, yuḥarrimu kamā yuḥarrimu radā'(u) 'l-ṣaghīr, lā farq*).<sup>63</sup>

At the other end of the spectrum is an argument, cited by another Andalusian scholar, Muḥammad Ibn Rushd, which claims that the dispute about *radā' al-kabīr* has nothing to do with impediments to marriage and that it becomes relevant only where it concerns the way women are allowed to dress and comport themselves in the company of men other than their immediate relatives. In other words, the question is not whether the suckling of a full-

<sup>61</sup> Al-Nawawī, *al-Majmū'*, Vol. 18, pp. 218-219.

<sup>62</sup> Ibn Taymiyya, *Majmū'at fatāwā*, Vol. 4, p. 149.

<sup>63</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 17.

grown man makes him a milk son and therefore forbidden to his nurse and her relatives for marriage (to which the unequivocal answer is “no”), but whether his milk mother and her female relatives can now be allowed to appear in his company unveiled (*Inna l(i)-khtilāf(a) l-wāqi‘ bayna ahl(i) l-‘ilm fi raḍā‘(i) l-kabīr in-namā huwa fi l-sitr wa-l-ḥijāb, wa-ammā l-nikāḥ fa-lam yakhtalifū fihī annahu lā yuḥarramu bihī*).<sup>64</sup> The argument is problematic in that it makes it possible for a whole group of women to stay unveiled in the company of men to whom they are not related through blood, but by extending the rule of permissible behaviour in this way it once again underscores the important role non-maternal breastfeeding plays in enlarging the family.

Most jurists seem to accept that impediments to marriage are created only as long as the nursling is an infant and the milk it is given “makes its flesh grow”. What “infant” exactly meant remained, of course, an open and much disputed question. “So long as he is in the cradle” (*Lā yaḥrimu min(a) l-radā‘ illā mā kāna fi l-mahd*), says one group of jurists; “so long as he is not weaned” (*Lā yaḥrimu min(a) l-radā‘ illā mā kāna qabla l-fiṭām*), says another—both criteria that prove, again, as problematic as they are flexible.<sup>65</sup> “Whoever has not completed three years of breastfeeding” (*Lā yaḥrimu min(a) l-radā‘ illā mā kāna fi thalāthat a‘wām*) claims yet another group (or, for others, “two and a half years”, “two years and a month”, “two years and two months”).<sup>66</sup>

<sup>64</sup> *Muqaddimat Ibn Rushd*, Vol. 5, p. 274.

<sup>65</sup> The use of flexible definitions like these, lacking a clear time-limit, raises other questions. For instance: Does an infant who was nursed by his mother for one year, then weaned and later (but still before two years were completed) nursed by a strange woman become the latter’s milk-child or not? If, as Mālik b. Anas argues (*al-Mudawwana l-kubrā*, p. 297) weaning, whenever it is done, means that the infant from here on can manage without breastfeeding, the answer is “no”; see also *Muqaddimat Ibn Rushd*, Vol. 5, p. 273; al-Nawawī, *al-Majmū‘*, Vol. 18, p. 213; Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 18. For another view, see Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 203.

<sup>66</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, pp. 18-19; Mālik b. Anas, *al-Mudawwana l-kubrā*, Vol. 2, p. 297; al-Nawawī, *al-Majmū‘*, Vol. 18, pp. 210, 211, 212; Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 201.

*Radā' min al-mayyita*

The debate in legal writings on “suckling from a dead woman” and what this means in terms of prohibitions of marriage may strike one as an intellectual exercise rather than a discussion of a real issue—it is hard to imagine infants sucking from a dead woman even one, let alone five full suckling sessions. But there were probably situations in which, for instance, milk was taken from a woman shortly before her death and then given an infant to drink after her death, or even when milk was taken from her after her death and then fed to an infant.<sup>67</sup>

The debate raises other issues, which have less to do with impediments to marriage but are interesting in themselves, such as whether the milk of a Muslim woman who has died becomes defiled through death (*Lā yaqa'u bi-laban(i) 'l-mayyita radā' li-annahu najas*, as al-Shāfi'i is said to have put it<sup>68</sup>) or remains pure by virtue of her religion (*Al-mu'min lā yanjasu*, as 'Alī says in the name of the Prophet<sup>69</sup>). Significant also is that *al-radā' min al-mayyita* is included in the same legal category as suckling from a virgin (*al-jāriya 'l-bikr*) or from mad (*majnūna*) and intoxicated (*sakrā*) women. For to Mālik b. Anas and Ibn Ḥazm, in all these cases impediments to marriage are the result.<sup>70</sup> Al-Nawawī, in contrast, argues that death does annul any long-term effect of the milk and enables the nursling to marry relatives of its deceased nurse (*Fa-inna sharb laban(i) 'mra'a mayyita lam yahrim li-annahu ma'nā yūjibu tahrīm(an) mu'abbad(an) fa-baṭala bi-'l-mawt.*<sup>71</sup>)

Finally, when it came to making a decision in light of the legal rules surveyed above as to whether a couple was qualified for marriage or whether an already existing marriage contract was valid, jurists argued that it was important to find out details of the early years of

<sup>67</sup> Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Vol. 2, p. 299.

<sup>68</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 9.

<sup>69</sup> Ibid.

<sup>70</sup> Mālik b. Anas, *ibid.*; Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 9; see also Ibn Qudāma, *al-Mughnī*, Vol. 9, pp. 198-199 (where the argument used to support the effect of the milk of deceased woman as creating impediments to marriage is the role it still plays in the physical development of the suckling); al-Sarakhsī, *Kitāb al-mabsūt*, Vol. 30, p. 296.

<sup>71</sup> Al-Nawawī, *al-Majmū'*, Vol. 18, p. 221.

the couple, i.e., how each of them was breastfed. This had to be done with the help of reliable witnesses (naturally women rather than men), according to a certain procedure of testimony.

That early Muslim legal authorities held conflicting opinions where the testimony of a single woman about an act of breast-feeding (*shahādat(u) 'l-mar'a 'l-wāḥida fī 'l-radā'*) was concerned is clear from *ḥadīth* literature. For example, 'Uqba b. al-Ḥārith was ordered by the Prophet to cancel his marriage with Umm Yaḥyā, the daughter of Abū Ḫāb, after a woman—a black female slave (*ama sawdā'*), according to one version of this narration—had come forward and claimed she had breastfed both him and his wife while they were infants. The story is highlighted as a precedent by a group of early '*ulamā'*' who themselves were in favour of accepting such testimony.<sup>72</sup> Others, among them al-Shāfi'ī, held that the testimony of a single female was valid only in matters of piety.<sup>73</sup>

Later jurisconsults also prove skeptical towards accepting as sufficient the sole evidence of a single nursing woman. At the same time, in highly elaborate discussions, they are found to suggest a third, more realistic formula which recognized the practical necessity of honouring a nurse's testimony when no other witnesses are available, even if this is not in line with the *shar'ī* status of female witnesses. And it does not seem far-fetched to read into this compromise, but certainly into those *ḥadīth* reports that advocate the right of a sole woman to testify on matters of breastfeeding, a submission of sorts whereby a patriarchal legal system is willing to acknowledge the modest extent of social power women could claim because of their life-giving function as nurses. Thus, Mālik b. Anas, though convinced that no *qāḍī* is obliged to dissolve a marriage on the grounds of the sole evidence of a nurse, urges the husband to divorce his wife voluntarily if he trusts this evidence (*wa-yuqālu li-'l-*

<sup>72</sup> *Ṣaḥīḥ al-Bukhārī*, Vol. 1, p. 32; Vol. 3, pp. 226-227; Vol. 7, p. 13 (where 'Uqba tries in vain to convince the Prophet that the black female slave lies); *Sunan al-Tirmidhī*, Vol. 3, pp. 457-458. In the thirteenth century, Ibn Taymiyya tried to apply the content of this *ḥadīth* by ruling that a woman should be believed when she admits having breastfed an infant at least five times, his only precondition being that the nursing woman should generally be known to be truthful; Ibn Taymiyya, *al-Ikhtiyārāt al-fiqhiyya*, p. 283.

<sup>73</sup> *Sunan al-Tirmidhī*, Vol. 3, p. 458.

*zawj: tanazzah 'anhā in kunta tathīqu bi-nāhiyatihā*).<sup>74</sup> Mālik is ready, moreover, to regard the testimony of two women as valid, without an additional male witness, provided that the substance of their testimony had already been spread and become well known before.<sup>75</sup> Following the same basic principles, al-Sarakhsī, about two hundred and fifty years later, goes into further detail and discriminates between four possible reactions when a woman claims she breastfed husband and wife: (a) Both husband and wife acknowledge the testimony as trustworthy. From a purely legal point of view, it is the couple's mutual agreement to annul their marriage contract that then dissolves their marriage even though the real reason is the nurse's testimony; (b) Both husband and wife agree that the testifying woman is lying. In this case, their marriage remains legally valid "since the testimony of a single woman concerning breastfeeding cannot accomplish a plea for separation" (*wainna shahādat(a) 'l-mar'a 'l-wāḥida 'alā 'l-raḍā' lā tutimmu ḥujjat(a) 'l-firqa*), but it is recommended that, because there will always be a margin of doubt, the husband "will distance himself" from his wife and divorce her; (c) The husband holds the nurse to be trustworthy while the wife rejects her testimony. The marriage is then dissolved because of the husband's position and because he can legally make his wife forbidden to himself; (d) The wife holds the nurse to be trustworthy while the husband does not. The marriage remains valid because the wife cannot legally make herself forbidden to her husband. She is, however, encouraged to release herself through a divorce with a payment to her husband (*khul'*).<sup>76</sup>

More complicated even are situations where, for instance, a woman claims she nursed both bride and bridegroom or husband and wife and then retracts her claim, or when a woman reveals to someone with whom she had a sexual relationship that she had once nursed his wife. Here information on the reputation of the nursing woman—whether she is generally believed to be trustworthy or not—has to be gained in order to reach a conclusion; sometimes the only satisfactory way is to exact an oath from her.<sup>77</sup>

<sup>74</sup> Mālik b. Anas, *al-Mudawwana 'l-kubrā*, Vol. 2, p. 300.

<sup>75</sup> *Ibid.*

<sup>76</sup> Al-Sarakhsī, *Kitāb al-mabsūt*, Vol. 30, pp. 302-303.

<sup>77</sup> *Chapters on Marriage and Divorce: Responses of Ibn Ḥanbal and Ibn Rāḥwayh*, pp. 60, 245; Ibn Taymiyya, *Majmū'at fatāwā*, Vol. 4, p. 151.

*The Nursling*

Being breastfed during the first stages of life is one of the fundamental rights of an infant which makes ensuring this right one of the parents' basic duties.<sup>78</sup> How the tasks of fulfilling this duty are divided between mother and father (or, in certain cases, between other members of the family or even the community) is discussed below. Here I wish to highlight the important fact that whenever they are dealing with problems arising from this basic right/duty, legal writings put the well-being of the nursling before anything else. In this Muslim legalists seem to be basing themselves to a great extent on the awareness already prominent in *ḥadīth* literature that there are clear physical as well as psychological benefits to maternal breastfeeding which mean that it should receive priority. The assumption that "there is nothing better for an infant than its mother's milk" (*Laysa li-l-ṣabiyy khayr min laban ummihī*)<sup>79</sup> is shared by *fuqahā'* of various schools of law, in different geographical areas, and at varying periods of time and either explicitly or implicitly finds expression in legal discussions concerning different aspects of *raḍā'*.<sup>80</sup> This caring attitude towards the nursling is particularly noticeable in cases when the interests of (one of) the parents conflict with those of the child and these are then set aside in favour of the well-being of the latter.

Ensuring that no harm will come to the nursling appears as a central consideration of jurists with such totally different backgrounds as Ibn Bābawayh and Ibn Ḥazm. For example, when they come to deal with the question of shortening the lactation period,

<sup>78</sup> Zakariyyā Aḥmad al-Barā, *Aḥkām al-awlād fī 'l-islām*, Cairo, 1964, p. 31; 'Abdallāh Ibrāhīm Mūsā, *al-Mas'ūliyya 'l-jasadiyya fī 'l-islām*, Beirut, 1995, pp. 309-310.

<sup>79</sup> Muḥammad b. Abī Bakr Imām Zādeh al-Jūghī, *Shir'at al-islām ilā dar al-salām* (MS. Bibliothèque Nationale, Paris, Ar. 6576), fol. 65a. A Shi'ite *ḥadīth* is cited by Ibn Bābawayh (*Man lā yaḥḍuruḥu 'l-faḥīh*, Vol. 3, p. 305) to the effect that the most useful milk for a suckling infant is its mother's: *Mā min laban yurḍa'u bihi 'l-ṣabiyy a' zam barakat(an) 'alayhī min laban ummihī*; cf. al-Wansharīsi, *al-Mi'yār*, Vol. 4, p. 27.

<sup>80</sup> This concept is expressed, in a poetic way, in a verse quoted by Ibn Qutayba (*'Uyūn al-akhbār*, Beirut, 1982, Vol. 4, pp. 115-116) describing a dying man who fears that, after his death, his wife will stop breastfeeding their son Ma'mar and hand him over to a wet nurse in order to get married again: *Wa-inni la-akhshā an amūta fa-tankihī wa-yuqdhaja fī aydī 'l-marāḍi' Ma'mar*.

Ibn Bābawayh views reducing this period below twenty-one months as an act of injustice towards the infant (*jawr 'alā 'l-ṣabiyy*);<sup>81</sup> while for Ibn Ḥazm weaning the infant before it is two years old is allowed on condition that both parents agree of course, but primarily as long as the infant's well-being is guaranteed (*Fa-in kāna lā ḍarar fī dhālika 'alā 'l-raḍī' fa-lahumā dhālika*). Whenever it happens that an infant rejects alternative food, becomes ill or its body weakens, early weaning is forbidden. Weaning is out of the question even after two years when one of the parents thinks this might harm the health of the nursling and thus objects to it (*Fa-in arāda aḥaduhumā ba'da 'l-ḥawlayni fiṣālahu wa-abā 'l-ākhar minhumā fa-in kāna fī dhālika ḍarar 'alā 'l-raḍī' lam yajuz fiṣāluhu*).<sup>82</sup> According to Ibn Taymiyya, even when parents disagree about for how long their infant should be breastfed, it is the position of the one who insists on the full period of up to two years that is decisive.<sup>83</sup>

When a divorced mother cannot or does not want to breastfeed her own infant, the Qur'ān offers parents the possibility to seek the services of a wet nurse. As we shall see, this option has raised a whole range of questions whose focus is, again, the infant's welfare. There is general (though, interestingly enough, not unanimous) agreement that a healthy mother—married or divorced—is obliged to breastfeed her baby whenever it is clear that taking it away from her would endanger its life (see below). According to Ibn Bābawayh, however, it is recommended that the father not remove the nursling from its mother even when mercenary breastfeeding is not particularly harmful or when he wants to give precedence to a wet nurse (which he is legally allowed, for instance, when his divorced wife demands a higher wage than the “going market rate”). “For it is most suitable and gentlest for a father to leave (his infant) with its mother” (*li-anna 'l-aṣlah lahu wa-'l-arfaq bihi an yatrakahu ma'a ummihi*).<sup>84</sup> In the same vein, North African Mālikite jurists, from Saḥnūn b. Sa'īd al-Tanūkhī in the ninth century AD to Aḥmad al-Wansharīsī in the fifteenth, in the case of divorced parents encourage the father to make every possible allowance and not to

<sup>81</sup> Ibn Bābawayh, *Man lā yaḥḍuruḥu 'l-faqih*, Vol. 3, p. 305.

<sup>82</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, pp. 335, 339-340.

<sup>83</sup> Ibn Taymiyya, *Majmū'at fatāwā*, Vol. 2, p. 243.

<sup>84</sup> Ibn Bābawayh, *Man lā yaḥḍuruḥu 'l-faqih*, Vol. 3, p. 308.

remove his infants from their mothers.<sup>85</sup> By claiming, moreover, that the very presence of a wet nurse in the house of the nursling's family is harmful because it separates the infant from its mother (*Wa-l-zi'r wa-in kānat 'indahā fa-hiya 'llatī tubāshiru bi-l-raḍā' wa-l-mabīt wa-dhālika tafriqa baynahu wa-baynahā*), al-Wansharīsī adds another argument against mercenary wet nursing. In his case this seems somewhat paradoxical since, like other Mālikite jurists, he accepts mercenary wet nursing not just when health or social problems make it necessary, but also when women belonging to society's higher strata prefer not to breastfeed because it would tire them out or simply because they wish to keep their figure (see below).<sup>86</sup> For Ḥanafite jurists, like al-Sarakhsī and al-Asrūshānī, on the other hand, domestic wet nursing is to be preferred to having the nursling transferred to the wet nurse's house, because in the family house supervision by its relatives is bound to guarantee better treatment of the infant by its wet nurse and also because, as al-Sarakhsī puts it, "parents often cannot stand any long separation from their baby" (*Wa-rubbamā lā yaḥtamilu qalbuḥumā ḡhaybat(a) 'l-walad 'anḥumā*)<sup>87</sup>—a disclosure of adults' intimate feelings towards small children that is rare for medieval Islamic texts of this kind.<sup>88</sup> Equally, parents who have to travel are entitled to cancel a contract with a wet nurse who refuses to join them. "It will be impossible for them to leave the infant with her since being away from the child will make them feel lonely" (*Wa-lā yumkinuḥum tark(u) 'l-ṣabīyy 'indahā li-anna ḡhaybataḥum 'an(i) 'l-walad tūḥishuḥum*).<sup>89</sup>

Furthermore, when their services are sought, wet nurses should always be contracted with the interest of the infant uppermost in mind. Thus, according to al-Sarakhsī, the death of the infant's

<sup>85</sup> Saḥnūn b. Sa'īd al-Tanūkhī, *al-Mudawwana 'l-kubrā*, Cairo, 1323/1905-6, Vol. 5, pp. 99-100.

<sup>86</sup> Aḥmad al-Wansharīsī, *al-Mi'yār al-mu'rib*, Rabat and Beirut, 1981-1983, Vol. 4, p. 27.

<sup>87</sup> Al-Sarakhsī, *Kitāb al-mabsūt*, Vol. 15, p. 120; see also Al-Asrūshānī, *Jāmi' aḥkām al-ṣiḡḥār*, Vol. 1, p. 127.

<sup>88</sup> Such feelings are more frequently exposed in the context of adults' reactions to the death of children; see, for instance, Avner Giladi, "'The child was small... not so the grief for him': Sources, Structure, and Content of al-Sakhāwī's Consolation Treatise for Bereaved Parents", *Poetics Today* 14 (1993), pp. 367-386; idem, *Children of Islam*, Ch. 6, esp. pp. 78-93.

<sup>89</sup> Al-Sarakhsī, *Kitāb al-mabsūt*, Vol. 15, p. 122.

father—one of the two parties who signed the hire contract, the other being the wet nurse's husband—does not invalidate the contract because the agreement was made in the first place for the nursling's benefit (*li-hājat(i) 'l-ṣabiyy*), with the father serving as no more than the infant's authorized representative (*wa-'l-ab fihi ka-'l-nā'ib 'anhu*).<sup>90</sup> Also, when a wet nurse is found having breached the agreement—intended as it is to protect the interests of the nursling (*li-anna maqṣūdahum 'amal muṣliḥ li-l-ṣabiyy*)—by replacing human milk with animal milk, she is not entitled to receive any pay.<sup>91</sup>

Concern for the well-being of a nursling could also be used as an argument for someone not allowing his divorced wife to marry someone else. Al-Wansharīsi tells of a woman who carried on breastfeeding her former husband's child for one year, after their divorce and then wanted to remarry—her ex-husband objected, claiming he feared for the nursling's health or even its survival (*lā tatazawwajī li-ajl(i) radā'(i) 'l-walad*). The *fatwā* issued on this matter is based on the authority of Ibn al-Qāsim, the Egyptian Mālikite *faqīh* of the eighth-ninth centuries AD, who allows such a remarriage in principle provided no harm comes to the nursling (*lahā an tatazawwaja illā an yaḍurra dhālika bi-'l-walad*); otherwise the father is entitled to prevent the infant's nurse, his divorced wife, from marrying again (*fa-in aḍarra bihi fa-lahu 'l-man*).<sup>92</sup>

In other words, the caring and understanding attitude towards nurslings which speaks out of even such “dry” legal texts as we looked at here on the rights of infants and the duties of parents is truly impressive. If to this we add the detailed list al-Wansharīsi gives of commodities required for the proper treatment of infants, which besides food included swaddling clothes, anointment oil, aromatic plants, and heating facilities, and which only increase as the infant grows up (*wa-laysa radā'(u) 'bn shahr ka-radā'(i) 'bn 'ām*),<sup>93</sup> we have further indications that at least city dwellers of the upper social strata were well aware of the special needs of infants and

<sup>90</sup> Ibid., p. 124.

<sup>91</sup> Ibid., p. 129.

<sup>92</sup> Al-Wansharīsi, *al-Mi'yār*, Vol. 4, p. 8.

<sup>93</sup> Ibid., p. 29.

realized it was important to respond to them for the sake of their physical and psychological development.<sup>94</sup>

### *The Parents*

While strengthening the economic position of women in society—as well as enhancing their moral standing before God—early Islamic legislation as reflected in the Qur’ān did not dramatically change women’s place within the family. The pattern on which relations between men and women were based was the patrilineal-patriarchal, which meant not only economic and social male dominance, but also that a wife’s body, including her breast milk, was owned by her husband.<sup>95</sup> As written in the Qur’ān:

The men are overseers over the women by reason of what Allāh hath bestowed in bounty upon one more than another, and of the property which they have contributed (*Al-rījāl qawwāmūna ‘alā ‘l-nisā’ bi-mā faddala Allāh ba’ḍahum ‘alā ba’ḍ(in) wa-bi-mā anfaqū min amwālihīm*); upright women are therefore submissive, guarding what is hidden in return for Allāh’s guarding (them) (*fa-‘l-sālihāt qānūtāt, ḥāfīzāt li-‘l-ghayb bimā ḥafīza Allāh ...*); those on whose part ye fear refractoriness, admonish, avoid in bed [apart], and beat (*wa-‘llātī takhāfūna nushūza-hunna fa-‘izūhunna wa-‘hjurūhunna fī ‘l-maḍājī’ wa-‘ḍribūhunna*).<sup>96</sup>

Or: “Your women are to you (as) cultivated land (*Nisā’ukum ḥarth lakum*); come then to your cultivated land as ye wish (*fa-‘tū ḥartha-kum annā shi’tum*).”<sup>97</sup> Thus “Muḥammad... reserved to woman as an individual a place above the condition of slave, which might sometimes have been hers previously, and below that of free man who alone could fight and achieve perfect mastery over his actions, words and thoughts.”<sup>98</sup> Later, many ‘ulamā’ tended to emphasize the motif of man’s superiority at the expense of the religious

<sup>94</sup> See Avner Giladi, “Concepts of Childhood and Attitudes towards Children in Medieval Islam: A Preliminary Study with Special Reference to Reactions to Infant and Child Mortality”, *Journal of the Economic and Social History of the Orient* 32 (1989), pp. 121-152, esp. 150-152.

<sup>95</sup> Cf. Klapisch-Zuber, *Women, Family, and Ritual in Renaissance Italy*, pp. 143, 154, 159.

<sup>96</sup> Qur’ān 4/ 34, English translation, Bell, Vol. 1, p. 74 (verse 38).

<sup>97</sup> Qur’ān 2/ 223, English translation, Bell, Vol. 1, p. 31 (verse 223).

<sup>98</sup> Bianquis, “The Family in Arab Islam”, p. 619 and also pp. 616-618.

attitude which, as expressed, for instance, in Qur'ān 33/35, 9/71-72, and 40/40, is more egalitarian. One *ḥadīth* report, for instance, to the suggestion that all believers bow down before him, has the Prophet reacting as follows: "It is not befitting, within my community, that one member bow down before another. But assuming it was befitting, I would have ordered (every) woman to bow before her husband" (*Wa-law kāna yanbaghī li-aḥad an yasjudā li-aḥad la-amartu 'l-mar'a an tasjudā li-zawjihā*).<sup>99</sup> As we have seen, women's role was sometimes viewed as that of "vessels" in which the seed is planted and the foetus develops, while fathers were regarded as the real "owners" to whom the children are attributed.<sup>100</sup> In the same vein, yet more delicately, the husband's role is defined in terms of overall responsibility, the wife's in terms of domestic responsibility and subordination to her husband: "Each of you is a guardian of and is responsible for his ward... [T]he man is a guardian of the members of his household (*Wa-'l-rajul rā'(in) 'alā ahl baytihi*), and the woman is a guardian of and is responsible for her husband's house and his offspring (*Wa-'l-mar'a rā'iya 'alā bayt zawjihā wa-wuldihi*)."<sup>101</sup>

Yet, it was this concept of a wife's responsibility for her husband's offspring that enabled women to establish some kind of autonomy within the domain of male authority. The first traces of this can be found in the Qur'ān (2/233; 65/6), which accords, as we have seen, the mother the prior right to breastfeeding ("Those who bear children suckle their children two full years"), and both nursing woman and her (former) husband (the nursling's father) are required to agree on the time of weaning ("but if the two by mutual agreement and consultation desire weaning [earlier]"; "consult together reputably").<sup>102</sup> Within post-Qur'ānic legislation, a mother's privileges were widened to include *ḥaḍāna*, the right to custody of the child, i.e., for as long as the child is physically dependent upon her, viz., up to the age of seven for a boy and pre-puberty for a girl,

<sup>99</sup> Al-Ḥalabī, *Insān al-'uyūn*, Vol. 1, p. 108. See Avner Giladi, "Gender Differences in Child Rearing and Education: Some Preliminary Observations with Reference to Medieval Muslim Thought", *Al-Qanṭara* 16 (1995), pp. 291-293.

<sup>100</sup> See above, Chapter 1.

<sup>101</sup> Schleifer, *Motherhood in Islam*, p. 47. For another version of this *ḥadīth* see *Ṣaḥīḥ al-Bukhārī*, "Kitāb al-nikāḥ", *bāb* 81.

<sup>102</sup> English translation, Bell, Vol. 1, p. 33.

according to the majority of schools of law.<sup>103</sup> During the relatively long period paternalistic society relegates the child to the care of its mother, when, protected by law, the relationships between the mother and her children are fostered, the foundations are laid down of what Abdelwahab Bouhdiba has called the “kingdom of the mothers”. Through the “cult of the mother”, “the physical mother-child relationship is transformed into an extended psycho-sociological unity” and gains “precedence over the... mother-father relationships”.<sup>104</sup> An illustration of this social reality is to be found in a *ḥadīth* report where the Prophet allows one of his followers to stay with his mother rather than joining the Muslim fighters because, as he puts it, “Paradise is under her foot” (*fa-inna 'l-janna 'inda rijlihā*).<sup>105</sup>

In conclusion, it is the rights to nursing and custody Islamic law extends to mothers which help them to establish, within a patrilineal-patriarchal family, their own autonomous sphere of influence, a realm in which their children, particularly males, become their most loyal allies.

### *The Father and his Responsibilities*

As part of his task to guarantee the family's means of existence, the father has to provide fully for the maintenance (*nafaqa*) of his wife (or wives) and children (males until puberty, females until marriage). This includes all expenses involved in breastfeeding.<sup>106</sup> Wives are entitled to *nafaqa* regardless of their own economic situation, but children can claim that right only when they are free (slaves are to be supported by their owners) and do not themselves possess enough wealth to cover, for instance, the special expenses

<sup>103</sup> Al-Jazīrī, *al-Fiqh 'alā 'l-madhāhib al-arba'a*, Vol. 14, pp. 594-603; “Ḥaḍāna” (Y. Linant de Bellefonds), *Et'*, Vol. 3, pp. 16-19.

<sup>104</sup> Bouhdiba, *Sexuality in Islam*, pp. 214-215; idem, “The Child and the Mother in Arab-Muslim Society”, in L. Carl Brown and Norman Itzkowitz (eds.), *Psychological Dimensions of Near Eastern Studies*, Princeton, 1977, p. 128.

<sup>105</sup> Schleifer, *Motherhood in Islam*, p. 7.

<sup>106</sup> *Chapters on Marriage and Divorce: Responses of Ibn Ḥanbal and Ibn Rāḥwayh*, p. 173; Zakariyyā Aḥmad al-Barā, *Aḥkām al-awlād fi 'l-islām*, p. 35.

that come with mercenary breastfeeding.<sup>107</sup> A father is allowed to sell items his children own in order to finance their *nafaqa*.<sup>108</sup>

That a father is obliged to cover nursing expenses (*nafaqat al-radā*), with the nursling's money or his own, is clear from cases where the infant is handed over to a mercenary wet nurse when the mother, either because she is ill or because she does not have enough milk, cannot nurse the child herself or refuses to breast-feed (see below). But what about paying one's own wife for the breastfeeding she does? Those jurists who interpret Qur'ān 2/233 as a command rather than as a mere description and one, moreover, that applies to mothers in general, not only to divorcees, argue that the regular food and clothing (*rizquhunna wa-kiswatu-hunna*) husbands have to supply their wives with should not be supplemented by any special nursing allowance because, as Ibn Taymiyya puts it, as the child is fed by its mother's food, its maintenance is included in the *nafaqa* given to her (*wa-tadkhulu nafaqat(u) 'l-walad fī nafaqat(i) 'l-zawjiyya*).<sup>109</sup>

When a man has divorced his wife but the repudiation is still revocable (*ṭalāq raj'ī*), and during the *'idda*, the *radā'* payment remains an integral part of the *nafaqa* that the husband owes his wife. When repudiation has become definite (*ṭalāq bā'in*), however, and *nafaqa* no longer needs to be paid, the husband is obliged for at least two years (thirty months, according to Abū Ḥanīfa) to continue covering breastfeeding expenses (as well as other expenses connected with the infant's care<sup>110</sup>), whether the nurse is the infant's mother or a wet nurse.<sup>111</sup> Various questions, such as how and to what extent the economic situation of the father is to be taken into account and what should be done in case the father and his divorced wife disagree on the amount of payment, are raised in

<sup>107</sup> Al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, p. 125: *Farq bayna nafaqat(i) 'l-walad wa-nafaqat(i) 'l-zawjāt, fa-inna 'l-mar'u idhā kānat mūsira takūnu nafaqatuhā 'alā 'l-zawj*. See also al-Jaziri, *al-Fiqh 'alā 'l-madhāhib al-arba'a*, Vol. 4, pp. 585ff.

<sup>108</sup> Al-Asrūshani, *ibid.*: *Lī-l-ab bay' 'aqār(i) 'l-ṣaḡhīr li-l-infāq 'alayhi*.

<sup>109</sup> Ibn Taymiyya, *Majmū'at fatāwā*, Vol. 2, pp. 242-243. See also Ibn Ḥazm, *al-Muḥallā*, Vol. 10, pp. 336, 340. For other opinions on this matter, see Ahmad al-'Īsawī, *Aḥkām al-ṭijf*, Riyad, 1992, p. 126; al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, p. 126, where the infant's own money is also taken into account as a possible source for nursing wages, and see below.

<sup>110</sup> Al-Wansharisi, *al-Mi'yār al-mu'rib*, Vol. 4, p. 29.

<sup>111</sup> Al-Tanūkhī, *al-Mudawwana 'l-kubrā*, Vol. 5, p. 99; al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, pp. 120, 123-124.

legal writings, revealing occasional disputes even within the same legal school. Thus, Mālikite jurists are divided on whether or not the father is allowed, over the objection of his wife, to hand the nursling over to a wet nurse who is ready to breastfeed for free or for a pay lower than the “market price”.<sup>112</sup>

The question of intercourse with a nursing woman (*ghīla*) and the implications it may have for the nursling’s well-being, husband-wife relations, and the use of wet nurses, is dealt with by jurists of all schools of law who have to try to reconcile the following contradictory trends: an ambivalent attitude attributed to the Prophet (see above, Chapter 1), the clearly unequivocal objection of physicians (above, Chapter 2), and the prevailing popular practice. Ibn Bābawayh permits the use of ‘*azl*’ (*coitus interruptus*) as a contraceptive device in sexual relations with six categories of women, among them “a woman who does not nurse her infant” (*Lā ba’sa bi-’l-’azl fi...’l(i)-’mra’a ’llatī lā turḍī’u waladahā*),<sup>113</sup> which implies that intercourse with a lactating woman is forbidden even with—and obviously without—using contraceptive devices. The Ḥanafī jurist Muḥammad b. Abī Bakr Imāmzādeh al-Jūghī of Bukhara (1098-1177 AD)<sup>114</sup> explicitly prohibits husbands to have sex with their wives while they are nursing, arguing that this sometimes causes damage to the nursling (*Wa-lā yata’u ’mra’atahu ’llatī turḍī’u waladahā li-anna dhālika rubbamā yaḍurru bi-’l-walad*<sup>115</sup>). Yet, especially for men of the lower strata of society, who could not afford a polygamous marriage or maintain maidservants, this prohibition deprived them of what Islamic law defined as a basic marital right. Ibn Qayyim al-Jawziyya testifies that most men (in fourteenth-century Damascus?) do not abstain from sex with their lactating wives (*Fa-akthar(u) ’l-nās yujāmi’ūna nisā’ahum wa-hunna yurḍī’na*).<sup>116</sup> According to Abū al-Walīd al-Bājī, the eleventh-century Andalusian Mālikite *qāḍī* (d. 1081 AD), it was this aspect of reality which received the upper hand when the Prophet had to decide whether

<sup>112</sup> See, e.g., al-Tanūkhī, *ibid.*, p. 100; al-Wansharīsī, *al-Mi’yār al-mu’rib*, Vol. 4, pp. 27-28, 29-30.

<sup>113</sup> Ibn Bābawayh, *Man lā yaḥḍuruhu ’l-faqīh*, Vol. 3, p. 281.

<sup>114</sup> See: Muḥammad Abū al-Ajḡān, “Ināyat al-islām bi ’l-ṭufūla min khilāl kitāb *Shir’at al-islām*”, *al-Baḥṡh al-’ilmī* 34 (1984), pp. 219-230.

<sup>115</sup> Al-Jūghī, *Shir’at al-islām*, fol. 65a.

<sup>116</sup> Ibn Qayyim al-Jawziyya, *Tuhfat al-mawḍūd*, p. 142.

to prohibit intercourse with a lactating woman and thereby prevent the damage it was found to sometimes cause to nurslings, or allow it and thereby alleviate the hardship of husbands with only one wife, so that he came down in favour of the latter.<sup>117</sup> Ibn Ḥazm sees no reason either to prohibit intercourse with a nursing woman (*Wa-lā yamna 'uhu irdā'uhā waladahā min waṭ'ihī lahā*).<sup>118</sup>

Several situations where there is total conflict between the needs of the infant and the rights of the mother, on the one hand, and the rights of the father/husband, on the other, are discussed by the Ḥanbali jurist Ibn Qudāma. Following the founder of his school of law,<sup>119</sup> he argues that a man may order his wife not to breastfeed a baby she bore a former husband or the nurslings of others she wants to take for wages, unless there is imminent danger for the nursling. This is because the very act of breastfeeding stands in the way of the husband's right, anchored in the marriage contract, to enjoy his wife's body whenever he wants (except at prayer time).<sup>120</sup> But is he allowed to prevent her from breastfeeding their own infant? There are jurists, including al-Shāfi'ī, who regard the husband's rights as overriding all other considerations, and thereby encourage non-maternal breastfeeding. Others, amongst them Ibn Qudāma himself, who interpret Qur'ān 2/233 as referring to mothers in general, not just divorcees, claim priority for the rights of the mother and the nursling. In the same vein, Ibn Qudāma does not allow a husband to annul a contract his wife has con-

<sup>117</sup> Al-Wansharīsī, *al-Mi'yār al-mu'rib*, Vol. 4, p. 34: *Fa-li-dhālika lam yanha 'anhu walam yuharrimhu rifq(an) bi-'l-nās li-mā fi dhālika min(a) 'l-mashaqqa 'alā man lahu zawja wāḥida, fa-yamtani'u min waṭ'ihā muddat(a) 'l-raḍā' fa-talḥaquhu 'l-mashaqqa wa-hiya mashaqqa 'amma, fa-kāna murā'atuhā arfaq bi-ummatihī min(a) 'l-mashaqqa 'l-khāṣṣa 'latī lā talḥaqu illā 'l-yasīr min(a) 'l-ufāl.*

<sup>118</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 338.

<sup>119</sup> *Chapters on Marriage and Divorce: Responses of Ibn Hanbal and Ibn Rāḥwayh*, p. 217: "I [Ishāq b. Manṣūr al-Kausaj (d. 865 AD)] said: 'What if a man marries a woman who is nursing a son she has had by another man and she wants to continue nursing her son?' Sufyān said: 'She cannot nurse him.' Aḥmad said: 'This is what I would say.' I said: 'Should she abandon her son?' Aḥmad said: 'She should find a wet nurse for him. Her husband married her in order to cohabit with her, not so that she occupy herself with nursing.'"

<sup>120</sup> Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 311: *anna li-l-zawj man'(a) 'mra'atihī min raḍā' waludihā min ghayrihī wa-min raḍā' walad ghayrihā illā an yaḍṭarra ilayhā li-anna 'aqd(a) 'l-nikāḥ yaqtadī tamlik(a) 'l-zawj(i) 'l(i)-'istimtā' fī kull(i) 'l-zamān min kull(i) 'l-jihāt siwā awqāt(i) 'l-salawāt wa-'l-raḍā' yafūtu 'alayhī 'l(i)-'stimtā' fī ba'd(i) 'l-awqāt fa-kāna lahu 'l-man'.*

cluded before their marriage hiring out her services as a wet nurse. However, ignoring the doctors' warning against intercourse with a lactating woman, he does not exclude sexual relations between a husband and his wife while the foreign nursling is asleep or spending time with another woman. On the question of whether consent of the nursling's guardian is necessary for such relations jurists are divided, but they all seem to agree that the consent of a wet nurse's husband is necessary when she wants to conclude a hire contract.<sup>121</sup>

Can a man, after he has divorced the mother of his infant, stipulate she refrain from remarrying as long as she nurses their baby? The debate on this question, which was summarized in a special treatise by Abū 'Alī b. 'Aṭīyya al-Wansharīsī in *al-Mi'yār al-mu'rib: Raf'(u) 'l-ḥaraj wa-'l-junāh 'amman arādat min(a) 'l-marādi'(i) 'l-nikāh*—"Removal of sin and crime concerning nurses who wish to marry"—shows how important it was, at least in premodern North African Muslim societies, and reveals once again the attention given to the nursling's needs. To be sure, there were jurists, Mālik b. Anas among them, who defended the woman's right to remarry on the grounds that nobody is allowed to forbid what God made lawful. Others, including al-Wansharīsī, claimed that such a stipulation was binding, as long as it did not exceed the normative lactation period of two years.<sup>122</sup> This is in spite of the general rule, which most seem to accept, that in principle nursing does not stand in the way of conjugal intercourse (*Al-raḍā' laysa min mawāni'(i) 'l-nikāh*).<sup>123</sup> They draw an even more general conclusion, namely, that women who hire themselves out as wet nurses should not be married (*Anna 'l-mar'a idhā ajjarat nafsaḥā zi'r(an) fa-laysa lahā an tazawwaja*).<sup>124</sup> In light of the dispute on this point,<sup>125</sup> it is difficult to know whether

<sup>121</sup> Ibid., pp. 311, 312.

<sup>122</sup> Al-Wansharīsī, *al-Mi'yār*, Vol. 4, pp. 36-37: *Wa-kāna Mālik lā yarā ba's(an) an tankiḥa wa-in(i) 'shtarata kaṣṭuhu 'alayhā. Wa-ammā anā [al-Wansharīsī] fa-lā arā an tankiḥa fī 'l-ḥawlayni idhā 'shtarata dhālika 'alayhā.*

<sup>123</sup> Ibid., p. 38.

<sup>124</sup> Ibid., p. 37.

<sup>125</sup> See Ibn Taymiyya, *Majmū'at fatāwā*, Vol. 4, pp. 152-153 where the case is discussed of a hirer who tries to prevent a mercenary wet nurse from validating her new marriage contract: *Mas'ala fī 'mra'a muṭlaqa wa-hiya turḍi'ru wa-qad ajjarat labanahā thumma 'nqaḍat 'iddatuhā wa-tazawwajat. Fa-hal li-l-musta'jir an yamna'ahā an tadkhula 'alā zawjihā khashyata an taḥmila minhu fa-yaqillu 'l-laban 'alā 'l-walad. Al-jawāb: ammā mujarrad(u) 'l-shakk fa-lā yamna'u 'l-zawj mā yastahiqquhu min(a) 'l-waṭ'....*

this rule was actually ever applied; it would have meant the exclusion of married women from the wet nursing market and a monopoly of widows and divorcees.

### *The Nursing Mother*

There are jurists who consider breastfeeding as a basic duty which is generally incumbent upon the free married mother and for which she is not entitled to any special pay over and above her maintenance. It is an attitude which falls into line with the view that the wife's (including the free wife's) body is her husband's property, but, again, reflects the overriding concern for the infant's needs. Others see breastfeeding as a privilege a free married woman should be encouraged to take advantage of for the best interests of her infant and herself, which becomes a formal duty only when her decision not to breastfeed puts the nursing in danger. Though quoting other legal opinions as well, Ibn Ḥazm is an outstanding representative of the first position, which he attributes also to prominent jurists such as Ibn Abī Laylā, a *qādī* of Kūfa in the eighth century AD,<sup>126</sup> and Ibrāhīm b. Khālid Abū al-Thawr, the founder of a school of religious law in Baghdad in the ninth century AD.<sup>127</sup> Except for repudiated women, who are allowed to choose themselves whether or not to breastfeed the infants they had borne a husband who had divorced them, all other women, free as well as enslaved, are obliged even against their will (*aḥabbat am karihat*) to breastfeed their newborn infants, whatever their social status (*wa-law innahā bint(u) 'l-khalīfa*, "the Caliph's daughter included") and, of course, when their physical condition allows.<sup>128</sup> Although admittedly formulated as a piece of information (*khabar*) rather than a commandment, Qur'ān 2/233 ("Those who

<sup>126</sup> On Ibn Abī Laylā, see Schacht, *An Introduction to Islamic Law*, pp. 40, 44.

<sup>127</sup> See al-Wansharīsī, *al-Mi'yār*, Vol. 4, p. 25; on Abū al-Thawr see *EF*, Vol. 1, p. 155 (J. Schacht).

<sup>128</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 335; see also Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 312; Ibn Taymiyya, *al-Ikhtiyārāt al-fiqhiyya*, p. 286 (*Wa-irdā'(u) 'l-ḥijl wājib 'alā 'l-umm bi-sharṭ an takūna ma'a 'l-zawj... wa-lā tastahiqqu ujrat(a) 'l-mithl ziyādat(an) 'alā nafaqatihā wa-kiswahihā*) and al-Asrūshānī, *Jāmi' aḥkām al-ṣiḥār*, Vol. 1, pp. 126, 127. What seems to be an exceptional opinion, i.e., that a married woman is entitled to special pay for breastfeeding, is cited by Ibn Qudāma, *ibid*.

bear children suckle their children”) supplies the legal basis for Ibn Ḥazm’s argument. In the same vein, yet in more positive terms from the female point of view, Ibn Ḥazm also formulates the ruling that when husband and wife are divided on whether to use the services of a wet nurse, the wife has the upper hand if she wishes to keep the baby and breastfeed it. The right of a divorced woman to refuse breastfeeding is valid, again according to Ibn Ḥazm, only in cases when her infant accepts a strange woman’s milk and her former husband is there to look for a wet nurse and pay her; otherwise, for instance, when the infant’s father has died, disappeared, or is unable to pay, breastfeeding is incumbent upon her.<sup>129</sup> However, when a divorced woman wishes to breastfeed the infant she had borne her ex-husband (without demanding exceptional wages), then no one, neither her former nor her new husband (if she has remarried), can prevent her from doing so. Here her right to have the child in her care (*ḥaḍāna*) outweighs all other considerations, to the extent that even if economic circumstances force a father to ask a relative to wet-nurse the baby for low pay, the baby still should remain in its mother’s custody.<sup>130</sup>

<sup>129</sup> Ibn Ḥazm, *ibid.*; see also al-Asrūshānī, *Jāmi’ al-ahkām al-ṣiḡhār*, Vol. 1, p. 126; al-Wansharīsī, *al-Mi’yār*, Vol. 4, p. 30. On the rights and duties of nursing widows, see Saḥnūn b. Sa’īd al-Tanūkhī, *al-Mudawwana ’l-kubrā*, Vol. 5, pp. 98-99 where a widow is allowed not to breastfeed her baby if the latter has got enough money to its name to finance a wet nurse and if it accepts a stranger’s milk. Al-Wansharīsī (*al-Mi’yār*, Vol. 4, pp. 27-28, 30) presents two opinions in this regard. According to the one, the widow is not obliged to breastfeed; she is allowed to hire a wet nurse and pay her with the infant’s money, or, if it has got no money, to pass the responsibility onto the community; all this on condition that the nursling does not reject a strange nurse’s milk. According to the other, even when the nursling accepts a wet nurse’s milk but has got no money, the widow is obliged to breastfeed it because making the infant dependent on the community is in itself damaging.

<sup>130</sup> Ibn Ḥazm, *al-Muḥallā*, *ibid.*; *Chapters on Marriage and Divorce: Responses of Ibn Hanbal and Ibn Rāḥwayḥ*, p. 61; al-Wansharīsī, *al-Mi’yār*, Vol. 3, p. 277; IV, pp. 26, 27; al-Sarakhsī, *al-Mabsūṭ*, Vol. 5, p. 208 (*illā anna ’l-zi’r ta’tī fa-turdi’uḥu ’inda ummihi walaysa li-l-ab an ya’kḥudha ’l-walad minhā li-anna ḥaqq(a) ’l-ḥaḍāna laḥā fa-lā yamliku ’l-ab ibtāl ḥaqqihā*).

In discussions about the rights and duties of divorced nurses a distinction is generally made between revocable and definite repudiation. In the first, when the divorcee is still entitled to maintenance, her status is similar to that of a married woman. In the second, she is free to choose. If she agrees to the same wages as demanded by a mercenary wet nurse, the priority to breastfeed is hers, and the father is not allowed to take away her baby; see al-Tanūkhī, *al-Mudawwana ’l-kubrā*,

That Ibn Ḥazm's tendency to restrict the woman's free choice—which, if generally adopted, would have reduced the incidence of non-maternal nursing—is motivated mainly by concern for the infant clearly emerges from his discussion of the ramifications of the issue. The nursling's survival and well-being receive priority when it comes to such questions as the identity of the nurse, the period of breastfeeding or the economic support of the nurse. Thus, a divorced mother no longer has a free choice when her infant does not accept a strange woman's milk and neither when the responsibility for economic support of both nurse and nursling is to be transferred to the mother from a father who is too poor or, when both are without means, to the community as a whole—the public treasury (*bayt māl(i) 'l-muslimīn*)—or their neighbours whose help a judge is entitled to stipulate (*fa-'alā 'l-jūrān yujbiruhum(u) 'l-ḥākīm 'alā dhālika*).<sup>131</sup>

The majority of jurists, foremost among them al-Shāfi'ī and Abū Ḥanīfa, prefer not to compel free married mothers to breastfeed unless their infant refuses to accept a strange woman's milk (even, according to a disputable and apparently exceptional opinion, if the infant does reject a strange woman's milk, regardless of whether the outcome will be fatal<sup>132</sup>) or when the father is unable to find or pay for a mercenary nurse.<sup>133</sup> This means not that these jurists are less concerned with the nursling's needs, on the contrary, but that they find no *legal* justification for such an obligation. Thus, al-Sarakhsī who, like other jurists, believes that maternal breastfeeding is most appropriate from both the physical and the psychological points of view (*li-annahā [al-umm] ashfaq 'alā 'l-walad min(a) 'l-zi'r wa-labanuhā awfaq lahu*) and recommends that when a wet nurse needs to be employed, this should be done in the house

p. 99; al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, p. 128; al-Wansharīsī, *al-Mi'yār*, Vol. 4, p. 26.

<sup>131</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, pp. 336, 342; see also al-Sarakhsī, *al-Mabsūt*, Vol. 15, p. 129; *Chapters on Marriage and Divorce: Responses by Ibn Ḥanbal and Ibn Rāḥwayh*, p. 173.

<sup>132</sup> Al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, p. 124: *Fa-in kāna 'l-ṣabiyy lā ya'khdhu laban ḡhayrihā wa-lā yūjadu man yurdi'uhu, hal tujbaru 'l-umm 'alā 'l-irdā' ? Fī zāhir(i) 'l-riwāya 'an aṣḥābinā—rahīmahum Allāh—lā tujbaru.*

<sup>133</sup> Al-Wansharīsī, *al-Mi'yār*, Vol. 4, p. 25; al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, p. 123; Muḥammad al-Muntaṣir al-Kitānī, *Mu'jam al-salaf*, Mekka, 1984, Vol. 6, p. 59; al-'Isawī, *Aḥkām al-ṭifl*, pp. 124-125.

of the nursling's mother (rather than sending the infant to the nurse's house),<sup>134</sup> nevertheless sees as the essence of the woman's conjugal duties the submission of her body to her husband, to satisfy his desires, which makes this the only duty legally incumbent upon her. All other duties, such as cleaning the house, washing clothes, cooking, baking and also breastfeeding, a wife is called upon to fulfill out of devotion to God and there should be no need to compel her by force of law.<sup>135</sup> If one looks at the issue in economic terms, with nursing as some sort of investment, one can argue, as some jurists do, that since the father bears the maintenance costs (*nafaqa*) for his children, this exempts the mother from breastfeeding (*Wa-nafaqat(u) 'l-awlad tajibu 'alā 'l-ābā' lā 'alā 'l-ummahāt fakadhā 'l-irḍā'*).<sup>136</sup> Al-Shāfi'ī is said to go so far as to justify an arrangement whereby the husband "hires" his wife to breastfeed their own infants since this, like needlework, is not part of her formal marital duties.<sup>137</sup> Though not in favour of "compulsory breastfeeding", al-Sarakhsī disagrees arguing that, albeit not a formal marital obligation, breastfeeding should be seen as part of a wife's tasks within a union that is destined, first and foremost, to bring children into this world.<sup>138</sup>

<sup>134</sup> Al-Sarakhsī, *al-Mabsūt*, Vol. 5, p. 208; cf., for instance, Ibn Bābawayh, Vol. 3, p. 305 (*Mā min laban yurḍa'u bihi 'l-ṣabīyy a'zam barakatt(an) 'alayhi min laban ummihi*), 308 (*Lā tujbaru'l-hurra 'alā irḍā'(i) 'l-walad*); Ibn Qudāma, *al-Mughnī*, Vol. 9, p. 312 (*Anna raḍā'(a) 'l-walad 'alā 'l-ab waḥdahū wa-laysa lahu ijbār ummihi 'alā raḍā'ihī damī'a kānat aw sharīfa, sawā' kānat fī ḥibāl(i) 'l-zawj aw muṭlaqa*), p. 313 (*Wa-li-anna 'l-umm ahnā wa-ashfaq wa-labanuhā amra' min laban ghayrihā fa-kānat aḥaqq bihi min ghayrihā*).

<sup>135</sup> Al-Sarakhsī, *al-Mabsūt*, Vol. 5, p. 209: *Wa-in abat an turḍi'a lam tukrah 'alā dhālika li-anna 'l-mustaḥaqq 'alayhā bi-'l-nikāh taslīm(u) 'l-nafs ilā 'l-zawj li-l(i)-'stimtā' wa-mā siwā dhālika min(a) 'l-a'māl tu'maru bihi tadayyun(an) wa-lā tujbaru 'alayhi fī 'l-ḥukm nahwa kans(i) 'l-bayt wa-ghusl(i) 'l-thiyāb wa-'l-ṣabkh wa-'l-khabz fa-ka-dhālika irḍā'(u) 'l-walad. See also Amīn 'Abd al-Ma'būr Zaghlūl, *Ri'āyat al-tuḥūla fī 'l-sharī'a al-islāmiyya*, Cairo, 1991, p. 223, 225-226, 233-239.*

<sup>136</sup> Al-Asrūshānī, *Jāmi' aḥkām al-ṣiḡḥār*, Vol. 1, p. 124.

<sup>137</sup> Al-Sarakhsī, *al-Mabsūt*, Vol. 15, p. 127 (within *Bāb ijārat(i) 'l-zi'r*): *Lahā 'l-ajr li-annahu 'sta'jarahā li-'amal ghayr mustaḥaqq 'alayhā bi-'l-nikāh hattā lā tuḥābā bihi wa-lā tujbara 'alayhi idhā 'mtana' at fa-yaṣiḥḥu 'l(i)-'sti'jār ka-'l-khiyāta wa-ghayrihā. See above.*

<sup>138</sup> Al-Sarakhsī, *ibid.*, Vol. 15, p. 128 (*wa-'l(i)-'sti'jār 'alā mithlihi lā yajūzu ka-'l(i)-'sti'jār 'alā kans(i) 'l-bayt wa-'l-taqbīl wa-'l-lams wa-mā ashbaha dhālika wa-hādhā li-anna[hu] bi-'aqd(i) l-nikāh yathbutu 'l-ittihād baynahumā fimā huwa 'l-maqṣūd min(a) 'l-nikāh wa-'l-walad maqṣūd bi-'l-nikāh*) where the author discusses also the possibility of paying the nursing (free) mother from the nursling's money, thus avoiding the contradiction between *nafaqa* (supplied by her husband) and the nursing wages, or

Mālikite jurists are unique in distinguishing between women of different social backgrounds when it comes to compulsory nursing. Though supporting the view that married free mothers are generally obliged to breastfeed, they make an exception for noble and rich women (*al-mar'a dhāt(u) 'l-sharaf wa-'l-yaṣār(i) 'l-kathīr*), which shows how a prevailing custom sometimes pre-empts a formal legal ruling.<sup>139</sup> Ibn Ḥazm, on the contrary, suggests that *sharaf* (nobility, dignity) is a matter of fear of God (*taqwā*) rather than social status which, in any case, can change within one's lifetime.<sup>140</sup> Through this tendency to validate a prevailing custom (*'āda*, *'urf*), Mālikite jurists, particularly during the later Middle Ages in Morocco,<sup>141</sup> accept the existing social reality to the extent that they are willing to accommodate their legislation, something legal experts of other schools of law were far less ready to do.

The case of a mother who can but nevertheless refuses to breastfeed, thus endangering the life of her infant, re-occurs several times in al-Wansharīsī's collection. A woman had left her two-month-old nursling with its father (*Imra'a tarakat walad(an) raḍī'(an) ibn shahrayni aw naḥwahumā 'inda abīhi*) and probably returned to her own family. The father then tried for several days to feed the baby with goat milk (*fa-baqiya 'indahū ayyām(an) yughadhhdhīhi bilaban(i) 'l-ma'za*), but was unsuccessful because we are told that he began to fear for the infant's life (*fa-khāfa 'alayhi*). He then sent the baby to its mother, but she rejected it, and the father had no choice but to take the infant back. He continued trying to feed it with goat milk for another ten days (there is no mention of a search for a wet nurse), when it died (*Fa-raddahu fa-baqiya yu'ānīhi bilaban(i) 'l-ma'za naḥwa 'asharata ayyām fa-māta*). The responsibility of a mother who knows full well her nursling rejects animal milk and that a wet

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to hire the mother's female slave for breastfeeding and to pay the mother; *ibid.*, p. 129: A man's wife can be hired to breastfeed an infant of his born by another woman. Also, there is no reason to prevent a man from hiring his mother, daughter, sister or other relatives (none of whom is legally obliged to breastfeed his infant) for breastfeeding his infant.

<sup>139</sup> Al-Tanūkhī, *al-Mudawwana 'l-kubrā*, Vol. 5, p. 98: *Wa-sa'altu Mālik(an) 'an(i) 'l-mar'a dhāt(i) 'l-zawj a-yalzamuhā raḍā'(u) 'bnihā? Qāla: na'am, yalzamuhā raḍā'(u) 'bnihā 'alā mā aḥabbat aw karihat illā an takūna mimman lā tukallafu dhālika* (and see also p. 99); al-Wansharīsī, *al-Mi'yār*, Vol. 4, p. 25.

<sup>140</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, pp. 336-337.

<sup>141</sup> Schacht, *An Introduction to Islamic Law*, pp. 61-62.

nurse is not available but continues to refuse to nurse it herself is then discussed in judicial-criminal terms of causing death by withholding drink or food, of blood-money (*diyya*) and of retaliation (*qiṣāṣ*).<sup>142</sup>

### *The Wet Nurse*

The richly detailed chapter al-Sarakhsī devotes in his *Kitāb al-mabsūṭ* to the hiring of wet nurses (*Bāb ijārat al-zi'r*<sup>143</sup>) is a clear indication of the growing importance of mercenary wet nursing in the big cities (or at least among urban higher social groups) of the Muslim world in the high Middle Ages. Existing in the Arab peninsula before the advent of Islam and sanctioned by the Prophet Muḥammad through Qur'ānic revelation, mercenary wet nursing was probably less common among Arabs in the first centuries of Islam than was maternal or voluntary non-maternal breastfeeding by neighbouring women and women of the same extended family. As we saw, *ḥadīth* literature occupies itself with the question of breastfeeding and the prohibitions of marriage (see above, Chapter 1), but pays little attention to the problems connected with hiring wet nurses. It is only in later writings—which were created and compiled under the strong influence of local traditions—that we find the institution of wet nursing more or less consolidated.

Remarkable for its profound and systematic discussion, the importance of the relevant chapter in *Kitāb al-mabsūṭ* for our purpose here lies first of all in what it reveals about the circumstances in which the institution of mercenary wet nursing developed and functioned, about how infants ought to be treated in general but in particular how they ought to be fed, and about adult attitudes towards children. Moreover, there were a great

<sup>142</sup> Al-Wansharīsī, *al-Mi'yār*, Vol. 4, pp. 22-23; see also Vol. 2, p. 314; Vol. 4, p. 517.

<sup>143</sup> *Zi'r*: "One that inclines to, or affects the young one of another, and sucks [or fosters] it"; *za'ara*: "He made her (a camel) to incline to, or to affect, a young one not her own... and to suckle it"; Lane, *Arabic-English Lexicon*, Book I, p. 1907, see below, p. 113.

Another term, *dāya*, borrowed from the Persian, does not seem to be in use in Arabic religious and medical texts from the Middle-Ages. See: "Dāya", *Encyclopaedia Iranica*, Vol. VII, pp. 164-166 (M. and Th. Omidasalar) and Lane, *Arabic-English Lexicon*, Book I, p. 840.

variety of problems stemming from the practice of mercenary breastfeeding and Muslim jurists invested much effort in creating a legal framework to deal with these—a framework that can tell us something about the existing social needs, on the one hand, and the norms that were offered to regulate them, on the other.

When concluding a wet-nursing contract, what exactly does one “hire”? Is it the milk itself, the use of the nursing woman’s breasts, or the services a wet nurse gives to the nursling in general, of which breastfeeding is only one aspect? Is one allowed to hire human milk, which after all is an integral part of the nurse’s body (*al-laban ‘ayn*), let alone buy and sell it? Unlike animal milk, “hiring” human milk, or rather hiring the use of the breasts (*manfa‘at al-thadā*), is allowed, according to al-Sarakhsī, while trading in it, as well as in other parts of the human body or its secretions, is forbidden.<sup>144</sup> That human milk can be traded like any other sort of food, such as animal milk, was the opinion of al-Shāfi‘ī, for example.<sup>145</sup>

As I already have pointed out, the hirer in a mercenary wet-nursing contract is never the mother nor the infant itself, but the nursling’s father or male guardian (*wa-idhā ‘sta‘jara zi‘r(an) turđi‘u šabiyy(an) lahu* – “if *he* hires a wet nurse to breastfeed *his* infant”).<sup>146</sup> But who is the second party? Is it the nurse, or her husband?<sup>147</sup> From al-Sarakhsī, it emerges that a free woman is allowed to conclude such a contract by herself (*li-annahā shara‘at ‘alayhim(i) ‘l-ajr(a) ‘l-musammā bi-muqābalat ‘amalihā*<sup>148</sup>), but that her husband’s permission is essential. When he fears that his honour might be at stake or that marital rights are endangered by having his wife go out to nurse in the house of another or even when she takes a

<sup>144</sup> Al-Sarakhsī, *al-Mabsūṭ*, Vol. 15, p. 125: *Wa-‘l-laban juz’ mutawallid min ‘ayn(i) ‘l-ādamiyy... wa-‘l-mutawallid min(a) ‘l-aṣl yakūnu bi-sifut(i) ‘l-aṣl fa-idhā lam yakun(i) ‘l-ādamiyy māl(an) fī ‘l-aṣl fa-ka-dhālika mā yatawalladu minhu min(a) ‘l-laban bi-man-zilat(i) ‘l-walad*; see also p. 118.

<sup>145</sup> Al-Sarakhsī, *ibid.*: *li-anna hādihā laban ṭāhīr aw mashrūb ṭāhīr ka-laban(i) ‘l-an ‘ām wa-li-annahū ghadhā’ li-‘l-‘alam fa-yajūzu bay‘uhu ka-sā‘ir(i) ‘l-aghdhīya*.

<sup>146</sup> *Ibid.*, p. 119.

<sup>147</sup> A female slave upon whom her master conferred the capacity to sell and to buy (*ama tājira*) is entitled also to offer herself as a wet nurse on hire (*Yajūzu li-l-‘amat(i) ‘l-tājira an tu‘ājira nafsahā zi‘r(an) kamā anna lahā an tu‘ājira nafsahā li-‘anal ākhar*); see *ibid.*, p. 123, and cf. Schacht, *An Introduction to Islamic Law*, p. 128.

<sup>148</sup> Al-Sarakhsī, *ibid.*

nursling into her own home he is entitled to annul the hire contract his wife concluded.<sup>149</sup>

The wet nurse's hire contract fixes in advance the nursing period, the place (the home of the wet nurse or that of the nursling's parents), and the wages. It is somewhat different from a regular hire contract in that the wet nurse can enter a series of additional demands, like new clothes every year, food, certain gifts at the time of weaning, etc., all items whose value cannot be exactly determined when the contract is signed and therefore are liable to become a source of dispute between the parties. That parents are ready to comply with a wet nurse's sometimes exceptional demands, particularly about food, is because in the end these may ensure better and more milk for their child.<sup>150</sup>

A wet nursing contract also defines the nurse's duties—breast-feeding only or general care and treatment—as well as the responsibility she carries not just for the nursling's possessions, such as clothes and ornaments, in case of theft, but also for its life, should the infant die within the nursing period or, more obviously, should she herself be the cause of his death. The question of pay for a period of breastfeeding interrupted by the nursling's death is also raised, as are other circumstances which justify the nursling's father or the wet nurse to annul the contract.<sup>151</sup>

Some of the cases al-Sarakhsī discusses can be understood only if we take into account the existence of rather well-developed “nursing networks” or an “industry of breastfeeding”. They include, for instance, the case of a wet nurse who takes a nursling and after a

<sup>149</sup> Ibid., p. 120: *Fā-in kāna lahā zawj fa-ajjarat nafsahā li-l-zi'ra bi-ghayr idhnihi fa-li-l-zawj an yubtila 'aqd(a) 'l-ijāra... li-annahā in kānat turḍi'uhu fī bayt abawayhi fa-li-l-zawj an yamna'ahā min(a) 'l-khurūj min manzilihī, wa-in kānat turḍi'uhu fī bayt nafsihā fa-li-l-zawj an yamna'ahā min idkhāl ṣabīyy(i) 'l-ghayr manzilahu, wa-li-annahā fī 'l-irdā' wa-'l-sahar bi-'l-layl tut'ibu nafsahā wa-dhālika yanquṣu min jamālihā wa-jamāluhā haqq(u) 'l-zawj fa-kāna lahu an yamna'ahā min(a) 'l-idrār bihi fī haqqihī.*

<sup>150</sup> Ibid.: *li-annahum lā yamna'ūna 'l-zi'r kifāyatahā min(a) 'l-ta'ām li-anna manfa'ut dhālika tarjī'u ilā waladīhim wa-rubbamā yakfulūnahā an ta'kula fawqa 'l-shab' li-yakthura labanuhā wa-ka-dhālika lā yamna'ūnahā kifāyatahā min(a) 'l-kiswa li-kawm waladīhim fī hijrihā.* Cf. *Chapters on Marriage and Divorce: Responses of Ibn Ḥanbal and Ibn Rāhwayh*, p. 221: “Sufyān said, ‘It is reprehensible to hire a wet nurse until a child is weaned, without a definite time [limit] being designated, or a definite sum of money named. Further, [payment of ] clothing [in general] should not be stated without each article of clothing being enumerated.’”

<sup>151</sup> Al-Sarakhsī, *al-Mabsūt*, Vol. 15, pp. 120-124, 129.

while, or even immediately, hands it over to a domestic servant or a slave (*khādim*) to breastfeed it instead, or who hires another wet nurse;<sup>152</sup> the case of a wet nurse hired for nursing who accepts another infant at the same time; and, conversely, the case of two nurses who are hired to nurse one nursling. A whole range of legal questions comes up in these cases, such as who gets the wages when the wet nurse with whom a contract is concluded transfers the nursling to another, how does one measure the contribution of each of the two nurses who share the same nursling, what about the pay to a nurse who is hired for breastfeeding two nurslings and one of them dies, and the like.<sup>153</sup>

Because of its systematic nature, we can turn to al-Sarakhsī's legal discussion for a better understanding of the social circumstances surrounding the wet nursing institution in medieval Muslim societies. While he refers only briefly to the reasons that may move parents to look for a wet nurse, which can include the mother's illness, death, or refusal to breastfeed (*Wa-l-umm qad ta'jizu 'an(i) 'l-irḍā' li-marād aw mawt aw ta'bā 'l-irḍā'*),<sup>154</sup> al-Sarakhsī draws a clearer picture of the characteristics expected of a wet nurse and the requirements she is asked to meet. From his discussion it emerges that jurists are sometimes more pragmatic and less idealistic than Muslim physicians (see above, Chapter 2), for example in the way they take local custom (*'urf*) into account.<sup>155</sup> Thus, the idea that the milk transfers physical and moral characteristics from the nurse to the nursling (*al-laban yu'dī*), emphasized by some jurists,<sup>156</sup> is less important in the eyes of others, and is sometimes even totally ignored. Al-Sarakhsī does not disqualify infidels from serving as wet nurses for Muslim nurslings (*li-anna kufrahā—fī 'tiqādhā wa-lā yaḍurru dhālika bi-'l-ṣabiyy*),<sup>157</sup> and a wet nurse with negative moral traits is regarded more as a threat to the nursling's physical well-being because she is liable to neglect it, than to its

<sup>152</sup> Cf. Ibn Bābawayh, *Man lā yaḥḍuruhu 'l-faqīh*, Vol. 4, p. 119: *Sa'altuhu 'an rajul(in) 'sta'jara zi'r(an) fa-a'ṭāhā waladahu fa-kāna 'indahā fa-'nṭalaqat(i) 'l-zi'r fa-'sta'jarat zi'r(an) ukhrā fa-ghābat(i) 'l-zi'r bi-'l-walad fa-lā yudrā mā ṣuni'a bihi.*

<sup>153</sup> Al-Sarakhsī, *al-Mabsūṭ*, Vol. 15, pp. 125, 127.

<sup>154</sup> *Ibid.*, p. 118.

<sup>155</sup> *Ibid.*, p. 121: *wa-'l-marja' fī dhālika ilā 'l-'urf fī kull mawḍi'.*

<sup>156</sup> See, for instance, al-Jūghī, *Shir'at al-Islām*, fol. 65a: *Fa-inna laban(a) 'l-ḥamqā' yu'dī wa-athar ḥumqihā yazharu yawm(an) mā.*

<sup>157</sup> Al-Sarakhsī, *ibid.*, p. 122.

moral disposition, or as a threat to the property of his parents since she may steal things. Engaging an adulterous woman as a wet nurse was considered risky, again, not due to the potential damaging influence upon the nursling's character—al-Sarakhsī does not believe that adultery has any impact on the quality of the milk (*wa-kadhālika fujūruhā lā yu'aththiru fī labanihā*)<sup>158</sup>—but because her sinful life could distract her from her duties vis-à-vis the infant, and particularly because of her chances to get pregnant again sooner since, as we saw, pregnancy was believed to spoil the nurse's milk (*Wa-bi-sababihi [bi-sabab(i) 'l-fujūr] yanqusu min qiyāmihā bi-mašālih(i) 'l-ṣabiyy wa-rubbamā taḥmilu min(a) 'l-fujūr fa-yufsidu dhālika labanahā*).<sup>159</sup> Ibn Bābawayh unequivocally prohibits hiring as a wet nurse a woman who gave birth after illicit intercourse or one who was herself born as a result of such a relation (*Wa-'l-zāniya lā turdi'u waladaka fa-innahū lā yaḥullu laka*).<sup>160</sup>

Thus, taking their cue on occasion from the reality of their social surroundings, jurists adopted a somewhat flexible attitude towards the nurse's character and belief. Ibn Bābawayh allows Jewish and Christian wet nurses to take care of Muslim infants (on the condition that they refrain from drinking wine and eating pork and that breastfeeding is done in the house of the nursling's parents) and, in an emergency, even Zoroastrians.<sup>161</sup> Ibn Ḥazm, too, is ready to accept monotheist non-Muslim wet nurses (but under no cir-

<sup>158</sup> Ibid., p. 127.

<sup>159</sup> Ibid. On the dispute among jurists concerning the hiring of (or the annulment of a contract with) a pregnant wet nurse, see al-Wansharīsi's *al-Mi'yār*, Vol. 4, p. 36: *Wa-'khtulifa fī 'stirdā'(i) 'l-ḥāmīl fa-waqa'a fī ghayr ma'wḍi' jawāzuhu, wa-qāla [Abū al-Ḥasan al-Lakḥmī] fī kitāb al-ijāra: in ḥamalat tanfasikhū 'l-ijāra wa-huwa aḥsan li-anna irḍā'a 'l-ḥāmīl muḍīr wa-huwa mimḥā yuttaqā minhu.*

<sup>160</sup> Ibn Bābawayh, *Man lā yaḥḍuruhu 'l-faḥīh*, Vol. 3, p. 308, and also p. 307. On the Shī'i-Imāmi attitude towards offspring of illicit intercourse, see Etan Kohlberg, "The Position of the *Walad al-Zinā* in Imāmi Shī'ism", *Bulletin of the School of Oriental and African Studies, University of London*, Vol. 48 (1985), pp. 237-266, particularly pp. 247, 258. In the light of such examples as al-Sarakhsī's reference to adulterous wet nurses, mentioned above, and al-Māwardī's discussion on *ḥukm(u) 'l-radā'a bi-laban walad(i) 'l-zinā* (*Kitāb al-radā'* ed. 'Amir Sa'īd al-Zaybārī, Beirut, 1996, pp. 176-177), Kohlberg's conclusion that Sunni sources are silent on the position of *walad al-zinā* in the contexts of *ṭahāra*, marriage and *radā'* looks too sweeping, at least as far as breastfeeding is concerned.

<sup>161</sup> Ibn Bābawayh, *ibid.*, p. 308. Muḥammad b. Aḥmad Ibn Rushd's reservation of Jewish and Christian wet nurses is explained by the fear of unlawful food and drink they may give the nursling, see *Muqaddimat Ibn Rushd*, Vol. 5, p. 275.

cumstance infidels, whose milk he regards as impure) since Islam permits marriage with such women, which tells us that Muslims in Spain, too, will have had recourse to their services.<sup>162</sup> The picture that arises from the above for large areas of the Muslim world is that seeking help from non-Muslim nurses was common where communities of Jews, Christians and adherents of other faiths lived side by side with Muslims and, again, particularly among the higher urban strata where the traditional way the extended family functioned was no longer strictly adhered to. The hypothesis that jurists in the Eastern parts of the Muslim world were more often called upon to sanction the services of infidel wet nurses, whereas in Spain, with its communities of Jews and Christians, the practice was more easily accepted, deserves further examination, if only as another instance of how reality influenced the position taken up by jurists.<sup>163</sup>

Al-Sarakhsī's pragmatic attitude is also reflected in that he, against contemporary medical advice, allows wet nurses to have sexual relations. In his view (which had its roots in *ḥadīth* literature; see above, Chapter 1), intercourse in itself (unlike pregnancy) is not damaging. He therefore argues that parents should not prevent contact between a wet nurse and her husband unless the latter has come to see her in their house without their permission.<sup>164</sup>

As we said, al-Sarakhsī is less idealistic when it comes to the wet nurse's characteristics. Systematic as he is, we do not find in his chapter any list of traits and requirements such as we do in Arabic medical writings. It is only when he discusses the circumstances that

<sup>162</sup> Ibn Ḥazm, *al-Muḥallā*, Vol. 10, p. 9: *li-anna Allāh ta'ālā abāha lanā nikāh(a) 'l-kitābiyya wa-awjaba 'alā 'l-umm radā' waladihā wa-qad 'alīma Allāh ta'ālā annahu sayakūnu lanā awlād minhunna... illā annanā naqūlu: inna ghayr(a) 'l-kitābiyya lā yāhullu lanā 'sirḍā'uhā li-annahā laysat mim mā ubiḥa lanā 'tikhādhuhunna azwāj(an) wa-ṭalab(u) 'l-walad minhunna fa-baqiya labanuhā 'ala 'l-najāsa jumlat(an)...*

<sup>163</sup> In many parts of late-twelfth and thirteenth-century Europe laws aimed at segregating women of minority religions in domestic situations were enforced; see Fildes, *Wet Nursing*, p. 39.

<sup>164</sup> Al-Sarakhsī, *al-Mabsūt*, Vol. 15, p. 122: *Wa-law kāna zawjuhā qad sallama 'l-ijāra fa-arādū man'ahu min ghishyānihā makhāfata 'l-ḥabl wa-an yaḍurra dhālika bi-'l-ṣabiyy falahum an yamna'ūhu dhālika fī manzilihim li-anna 'l-manzil lahum fa-lā yakūnu lahu an yadhkhalahu illā bi-idhnihim wa-in laqiyahā fī manzilihi fa-lahu an yaḡhshahā li-anna dhālika mustahiqq lahu bi-'l-nikāh. Wa-bi-taslim(i) 'l-ijāra lā yusqītu ḥaqqahu 'ammā kāna mustahiqq(an) lahu fa-lā tastatī'u 'l-zī'r an tamna'a nafsahā wa-lā yasa'u ahl(u) 'l-ṣabiyy an yamna'ahā 'an dhālika.*

may bring about the annulment of a wet-nursing contract that we learn that he regards decency, good health, and abundance of milk as among the qualities expected from a nurse. Interesting is al-Sarakhsi's observation—another reflection of everyday life in the author's time and environment—that unexperienced wet nurses (*in lam takun ma'rūfa bi-'l-zu'ūra*) may find the unexpectedly great efforts required, for example, nights without sleep, debilitating for body and mind (*lī-annahā rubbamā lā ta'rīfu 'inda 'btīda'(i) 'l-'aqd mā tabtalī bihi min(a) 'l-muqāsāt wa-'l-sahar*).<sup>165</sup>

Al-Sarakhsi's chapter also reveals that parents generally prefer domestic wet-nursing. As we saw, the author is very much aware of the hardships parents go through when separated from their infants, and he addresses several situations that are rooted in the practice of domestic wet nursing as it may have been common in the Muslim communities he knew. A wet nurse receives guests, her own children, for example, or meets with her husband in her employers' place (while, according to al-Sarakhsi, even though her employers may try to deprive her of their company, she is entitled to meet relatives as long as this does not adversely affect the nursling, her employers can forbid her to have sex with her husband at their house); she may be required by the nursling's parents to do domestic work, such as cooking and baking, in addition to her duties of nursing and taking care of the infant (according to al-Sarakhsi, she does not have to comply with such requests).<sup>166</sup> We also learn that wet nursing involved, besides breastfeeding itself, several kinds of house work directly connected with it, such as washing the infant's clothes and sprinkling them with aromatic plants (s. *rayḥān*), anointing its body (*dahn*), and preparing the additional food it is given.<sup>167</sup>

That a mother should not be separated from her infant is a basic principle comparable to the mother's right to custody. As al-Asrūshānī puts it: Muslims agree that holding an infant in her bosom (*ḥajr*) is a mother's privilege. If the wet nurse refuses to come and live in the nursling's house, other arrangements are to be found in order to keep the infant within its mother's protection: The nurse

<sup>165</sup> Ibid.

<sup>166</sup> Ibid., pp. 121, 122, 123.

<sup>167</sup> Ibid., p. 121.

can come to the home of the parents during nursing hours only (*lahā an turḍi'a wa-ta'ūda ilā manzilihā*), breastfeed in the house's courtyard (*aw taqūlu: akhrijūhu, wa-turḍi'uhu 'inda finā'(i) 'l-dār*) or take the nursling to her own house when it is time to breastfeed only (*Wa-in lam yushtaraf 'inda 'l-'aqd an turḍi'a 'inda 'l-umm kāna lahā an taḥmila 'l-ṣabiyy ilā manzilihā*).<sup>168</sup> Going by al-Sarakhsī's and al-Asrūshani's writings, we thus find that much of the harm total detachment during the lactation period could cause infants and mothers alike (see above, Introduction) was avoided at least in the Muslim communities of the Eastern parts of the Caliphate.

*Zi'r*, the Arabic term for wet nurse, signifies affection and tenderness (*Al-zi'r... -al-'āṭifa 'alā ḡhayr waladihā 'l-murḍi'a lahu min(a) 'l-nās wa-'l-ibl*<sup>169</sup>) implying that it was difficult to imagine nursing as a mechanical act and a nurse lacking all sympathy towards her nursling. However, we hear also of cases of wet nurses who neglected their duties, for instance, by offering their services to more than one pair of parents without letting the others know, thus giving their nurslings less than the agreed-upon quantity and quality of milk (*Wa-in ajjarat(i) 'l-zi'r nafsahā min qawm ākharīna turḍi'u lahum ṣabiyy(an) wa-lā ya'lamu ahluhā 'l-awwalūna bi-dhālīka*).<sup>170</sup> This and other sorts of negligence, as also accidents, often had a fatal outcome—a nursling could fall out of its nurse's hands, a child could be smothered through overlying by a sleepy nurse (see above, Chapter 2), a nurse could disappear together with the nursling (*Wa-law ḍā'a 'l-ṣabiyy min yadīhā wa-waqa'a fa-māta*).<sup>171</sup>

Our sources are totally silent, as far as I could judge, about the psychological condition of bereaved mothers who were asked to offer their wet nursing services soon after their own infants had died or of mothers who had to cope with two nurslings—their own and a strange one—simultaneously (see above, Introduction). That nursing women may not seldom have suffered physical and psycho-

<sup>168</sup> Al-Asrūshani, *Jāmi' aḥkām al-ṣiḡhār*, Vol. 1, pp. 127-128.

<sup>169</sup> Ibn Manẓūr, *Lisān al-'arab*, s.v. *z. 'r*. Interestingly enough, the term *zi'r* used to signify also the wet nurse's husband, the owner of the milk; see, for instance a tradition transmitted by Anas b. Mālik and cited by Nāṣir al-Dīn al-Qaysī (in his *Bard al-akbād 'inda faqd al-awlād*, attributed to Jalāl al-Dīn al-Suyūṭī, Cairo, 1304/1886-7, p. 31: *Dakhalnā ma'a rasūl Allāh ṣal'am 'alā Abī Sayf al-Qayn wa-kāna zi'r(an) li-Ibrāhīm [the Prophet's son]*).

<sup>170</sup> Al-Sarakhsī, *Al-Mabsūṭ*, Vol. 15, p. 127, and see above.

<sup>171</sup> *Ibid.*, p. 121.

logical exhaustion, with all the severe consequences that meant for their nurslings, is not hard to imagine. A unique hint of a psychological crisis of this sort is included in a poignant *ḥadīth* report which describes Khadīja, the Prophet's first wife, with milk still flowing from her breast lamenting their infant al-Qāsim. Created to feed her now dead child, the milk inflamed her memory and she bursts out crying (*anna Khadīja riḍwān Allāh 'alayhā bakat. Fa-qāla lahā al-nabiyy ṣal'am: mā yubkiki ? Qālat: darrat labanat(u) 'l-Qāsim fa-dhakartuhu*). So deep was her sadness that she, who had been the first to believe in Muḥammad's prophecy, reacted with skepticism when the Prophet tried to console her by promising her that Sarah was now looking after the boy in Paradise (*Fa-qāla lahā: a-mā tarḍayna an takfulahu Sāra fī 'l-janna? Qālat: la-wadidtu anni 'alimtu dhālika...*).<sup>172</sup>

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<sup>172</sup> Ibn Manzūr, *Lisān al-'arab*, s.v. *l.b.n.* For another version of this *ḥadīth* report see Ibn Māja, *Sunan*, "Kitāb al-janā'iz", *bāb* 27.

## CHAPTER FOUR

### THEORIES OF BREASTFEEDING IN PRACTICE: PAST AND PRESENT

Breastfeeding, on the face of it no more than a natural act through which a woman ensures the survival, health, and proper development of her own or another woman's newborn infant, is imbued in Islamic as well as other cultures with rich sociocultural meanings. In their discussions of breastfeeding Islamic medical and legal-ethical writings reflect not only the prevailing attitude of adults towards children, but also the concepts that were common regarding the first stages of socialization, the status women held vis-à-vis men and the power relations that reigned within the family. As we saw, they laid down the norms on how newborn children were to be treated, formulated the way in which parents were to share their responsibilities vis-à-vis the nursing in terms of economic, physical and emotional investment and stipulated what conditions and circumstances allow recourse to non-maternal nurses.

Moreover, by enabling it to form the basis for a complex and ramified network of impediments to marriage, Islamic law made non-maternal breastfeeding play an important role in much wider circles of social life. It influenced the way in which relations between different families were established, probably led to a reduction in the endogamous marriages, allowed women greater freedom of conduct by creating semi-private spaces, and so on. With all this it is the infant's well-being that forms a, possibly the, central point to which religious scholars as well as medical doctors return again and again in their discussions on breastfeeding. Significantly, both groups agree that maternal suckling is the healthiest way of feeding infants but it is the religious, not the medical literature which more clearly mirrors an intuitive conception of how important the psychological bond is that develops between an infant and its mother. The role this supportive attitude towards maternal breastfeeding played in keeping newborn infants alive and healthy could have been even more influential had it not been for the misgivings both learned and popular medicine entertained towards the colostrum (whose highly nutritional and immunogenic value is

widely recognized today), to the point that parents were encouraged to use alternative ways of feeding during the first critical days after birth.

Also for the benefit of the child, Islamic law insisted that infants be breastfed for at least two years, particularly in cases where parents disagreed on the issue or the mother had been divorced. This created a norm which fathers could invoke when they wanted to prevent lactation periods from being prolonged—children were sometimes breastfed for up to four or five years, with all the (sometimes damaging) physical and psychological consequences this had for the child. Aware of the psychological difficulties separating a child from its parents could cause, jurists furthermore stipulated that in cases when employing a non-maternal nurse was inevitable nursing must take place under the direct supervision of the mother or other relatives, and preferably always at the mother's home. On how to choose a suitable wet nurse both physicians and jurists offered a whole list of physical, mental and moral characteristics she ought to fulfill.

As I have pointed out elsewhere, the careful attention Muslim thinkers paid to children and childhood, their concern for the general welfare of the child, their insistence that it be guaranteed its rights and the treatment it deserves we find reflected in many medieval Arabic sources—Islamic scriptures, ethical, pedagogical, legal and theological writings and so on. Medical compilations reveal a relatively rich and varied knowledge regarding the physical development of children, diagnosis and treatment of childhood diseases, and child psychology.<sup>1</sup> The legal and medical discussions of breastfeeding as described and analyzed above exemplify this trend even further.

To be sure, the breastfeeding arrangements recommended by Islamic law are based on the patrilineal-patriarchal division of roles, according to which a woman's body, particularly in the domains of sexual relations and procreation, is submitted to the will and authority of a man, be he father, brother or husband. The concept of "sire's milk" (*laban al-fahl*), invoked to justify broadening the impediments to marriage to include the (strange) nurse's husband and his relatives, is itself rooted in the idea that the nurse's milk is

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<sup>1</sup> Giladi, *Children of Islam*, p. 117.

created, and therefore owned, not by the nursing woman herself, but by the man who made her pregnant: *li-anna 'l-laban li-l-zawj haythu huwa sababuhu*, as *Lisān al-'arab* puts it.<sup>2</sup> This also explains why the overall responsibility for the well-being of the child lies with the husband, who has to provide the economic support of his nursing wife, also when she has been divorced, and has the task of selecting and contracting a wet nurse when necessary, and who also pays for a wet-nursing agreement. That a husband rules over not just her body but also her bodily resources entails the view that any woman, including a free and noble one, is obliged to breastfeed her own (or rather, her husband's) child.

At the same time, it is the special sensitivity so clearly expressed by the Qur'ān, concerning the weak in society, especially women and children, which in the course of time helped to create within the patriarchal domain a sort of female autonomy, a "kingdom of the mothers". The foundations of this autonomy were laid with a mother's rights to breastfeeding (during at least two full years) and custody (during six-seven years for boys and until marriage for girls), since, because of the physical and psychological dependence they created, these enabled women to establish intense relationships with their children, particularly males.

To the factors which could strengthen ties between mother and nursing at the expense of wife-husband relations, one may add the medical recommendation (also supported, albeit not unequivocally, by legal ethical writings) for nursing women to abstain from sex during the lactation period. Not only did this help space pregnancies—and thus have a general demographic effect—but it also meant that mothers were shielded, at least to some extent, from physical and psychological exhaustion and thus able to foster deeper emotional ties with the child they were nursing.

For a few jurists, a husband's rights override those of the wife and the child in the sense that, in their eyes, he is allowed to deny his wife the right to nurse not just a strange nursing and the infant she bore another man, but their own infant as well when this stands in the way of his right to sexual fulfillment. But this seems to have been a highly exceptional position. On the whole, Islamic law sets clear limits to the authority of men within the family in the way it

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<sup>2</sup> Ibn Manẓūr, *Lisān al-'arab*, s.v. *l.b.n.*

restricts their power to control feeding procedures and to separate children from their mothers.

It has been observed that as social, cultural and historical animals, “what is ‘natural’ or ‘instinctive’ in us [human beings] is always overlaid by or channelled through various forms of socialization”<sup>3</sup> and that “without our cultures we simply would not know how to feel.”<sup>4</sup> How true this is for Islamic cultures can be gauged from their recognition of maternal nursing as the best way for newborn infants to be fed, nurturing as it does the ties that bind mother and child together, and from the wider social fabric woven from the rules and regulations which that recognition inspired.

Non-maternal wet nursing was regarded as the only safe alternative to maternal nursing when maternal breastfeeding was out of the question, whether due to natural causes—e.g., a mother’s health problems or when she was no longer alive—or social causes, among which divorce was probably the most common. However, according to certain legal schools, not only divorced but also free married women (free women of higher social groups only, in the Mālikite view) were allowed to choose whether to breastfeed by themselves or, so that they could maintain their figure and avoid the complications that always could arise from breastfeeding, to entrust another woman with this task, unless the nursling rejected a stranger’s milk.

Mercenary wet nursing was known in pre-Islamic and early Islamic Arab societies, as evidenced, for instance, in the Qur’ān and the Prophet’s biographies. The *ḥadīth* literature maintains an almost total silence on the subject, and it is only in later legal writings, particularly from the eleventh century AD onward, that we begin to find detailed discussions of the theme. Thus it is reasonable to conclude that mercenary breastfeeding was socially and legally consolidated only in the fully developed urban centres of the medieval Muslim world. This may well have been because of the high demand for mercenary wet nurses that had sprung up within the circles of rich and noble families in the cities—voluntary non-maternal feeding by relatives, members of the nursling’s extended

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<sup>3</sup> Wilson, “The Myth of Motherhood”, p. 197.

<sup>4</sup> Schepher-Hughes, *Death without Weeping*, p. 431, as cited in Carmi Parsons and Wheeler (eds.), *Medieval Mothering*, p. X.

family, and neighbours probably remained the custom among lower social groups in the cities as well as in the countryside.

That it was crucial for the survival and well-being of the nursling for a nurse to abstain from sex was an idea which in medieval Europe encouraged parents to hand infants over to wet nurses. As such it was less effective, it seems, in Muslim societies. While Muslim physicians categorically prohibited sexual activity of nursing women, most religious authorities take a much more lenient attitude. Also, as they allowed polygamous marriages and sexual relations with female slaves, Islamic family laws made abstinence less acute from the male point of view. Yet in order to reduce possible tension between husband and wife, it was recommended that when hiring a wet nurse, preference be given to unmarried women, viz., widows and divorced women, in other words, that married women not hire themselves out as wet nurses.

On the whole, religious as well as medical normative writings discourage optional alternatives by emphasizing the overall advantages of maternal nursing. Still, their authors appear aware that wet nursing may become inevitable in certain circumstances. Because they draw a realistic, rather than idealistic, profile of the favourite wet nurse, Muslim jurists strengthen the impression that wet nursing may well have played a significant role. Assuming that the legal rules Islam put in place concerning wet nursing were at least partially applied, it is likely that the practice meant less harm and suffering for mother and child than in medieval and Renaissance Europe, if only for the Islamic laws of custody which were intended to prevent an infant from ever being totally separated from its mother or, in her absence, its cognate relatives.

The Qur'anic idea (probably unparalleled among the monotheistic religions) that wet nursing creates impediments to marriage between a nurse and her nursling, as well as between male and female (strange) nurslings suckling from the same nurse, is based on a pre-Islamic Arabic concept. To lend "scientific" support to this prohibition, Arabic medical writings adopt the notion, found among the ancient Greeks, that biologically a woman's breastmilk is essentially identical with the blood of her uterus.

When he adopted this idea, Muḥammad must have been aware of the social significance it could have as a mechanism for establishing pseudo-kinship ties. Assuming that the Prophet's biographies

reflect patterns of social behaviour prevalent in the first centuries of Islam, one may conclude that wet nursing functioned as a means of creating relations, for instance, between sedentary communities (like that of Mecca) and the tribes of the desert. More practically, though, creating milk kinship with neighbours, who often would be members of the same extended family, reduced the options of endogamous marriages and encouraged exogamous ones. All this must have fallen into line with the Prophet's idea of creating a religious-political community (*umma*) based on common values and aims, rather than on blood ties. Muḥammad's intentions found their full expression posthumously when, by enlarging the prohibitions of marriage stemming from breastfeeding to include also the (strange) nurse's husband and his relatives, *ḥadīth* literature virtually equated incest among milk-kin with that among blood relatives.

There are indications that breastfeeding was typically used for the purpose of establishing relations between unrelated families. Ibn Bābawayh, in the tenth century AD, no doubt had this in mind when he distinguished between wet nurses who offer their services in order to make a living (*innamā za'arat min(a) 'l-faqr*), and those who seek nurslings in order to gain nobility and glory (*innamā za'arat ṭalab(a) 'l-'izz wa-'l-fakhr*).<sup>5</sup> But it was the effect wet nursing had in obstructing the common practice of paternal-cousin marriages which probably first aroused reservations. Some of this can already be found in *ḥadīth* collections, but it is when later jurists came up against the question of how to reconcile the practice with the established patrilineal-patriarchal traditions and interests, that quite a few of them began to look for ways to reduce the effect of the rules on prohibitions of marriage.

Since it is difficult to assess to what extent legal and medical normative writings affected everyday practices of infant feeding in pre-modern Muslim societies on the basis of the historical sources I have relied upon in this study, it will be interesting to examine what influence the Islamic heritage has had in this regard on contemporary Muslim societies.

A survey of a small sample of recently published religious and medical writings on the subject reveals that contemporary '*ulamā'*

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<sup>5</sup> Ibn Bābawayh, *Man lā yaḥḍuruḥu 'l-faqīh*, Vol. 4, p. 119.

and physicians alike make extensive use of classical Islamic sources. These sources are said to be as relevant today as they were in the past, particularly when it comes to questions of marriage, maintenance (*nafaqa*), the rights of women and children, the treatment of infants, and family planning.<sup>6</sup> We find that a whole series of arguments taken from early Islamic sources are called upon in order to support maternal nursing and to reject the Western institution of milk banks, thus underscoring the advantages of maternal breastfeeding; the beneficial effect of the milk on the physical as well as psychological development of the nursling; the relationship between the nurse and her nursling; the duration of the lactation period; the responsibility of each of the parents for the well-being of the suckling infant; the permission to use, in cases of urgent need, the services of non-maternal wet nurses, including mercenary nurses; and the concept of impediments to marriage stemming from breastfeeding.<sup>7</sup>

As much as with their medieval predecessors, encouraging maternal breastfeeding as the safest and best method of feeding infants appears to be a major aim of religious scholars and medical doctors writing on the subject today. Both sectors seek support in early Islamic sources for the recommendations of modern medicine in this regard. Thus, the editing of a legal text from the eleventh century AD, al-Māwardī's *Kitāb al-raḍā'*, is justified in terms of the relevance and usefulness it has for the modern reader. In his Introduction, the text's editor, Dr. 'Āmir Sa'īd al-Zaybārī, uses modern scientific arguments to emphasize the various advantages of maternal breastfeeding. But he also accepts as irrefutable the traditional Islamic view, still popular (as demonstrated in anthropological works) among contemporary Muslims, that milk transmits a nurse's traits,<sup>8</sup> arguing that the Prophet Muḥammad had discovered this fact long before Western medicine.<sup>9</sup>

<sup>6</sup> Al-Māwardī, *Kitāb al-raḍā'*, p. 7 (Editor's Introduction); see also Donna Lee Bowen, "Abortion, Islam and the 1994 Cairo Population Conference", *International Journal of Middle East Studies* 29 (1997), pp. 161-184, esp. pp. 166ff.

<sup>7</sup> 'Abdallāh Mabruk al-Najjār, "Mawqif al-islām min bank laban al-ummahāt", *Majallat al-Azhar* 59 (1986), pp. 447-455, and see below, Appendix Two.

<sup>8</sup> Hilma Granqvist, *Birth and Childhood Among the Arabs*, Helsinki, 1947, p. 111; Ammar, *Growing Up in an Egyptian Village*, p. 102; Friedl, "Parents and Children in a Village in Iran", p. 202.

<sup>9</sup> Al-Māwardī, *Kitāb al-raḍā'*, pp. 5, 6 (Editor's Introduction).

Similar efforts to harmonize between the *sharī'a* and modern medical and psychological ideas is to be found in the chapter on nursing in *Ri'āyat al-ṭufūla fī 'l-sharī'a 'l-islāmiyya* ("Child Care According to Islamic Religious Law") by Dr. Amīn 'Abd al-Ma'būd Zaghlūl of the Law Faculty (*Kulliyat al-Sharī'a wa-'l-Qānūn*) at al-Azhar University. Here the main purpose is to refute the fashionable trend to abandon breastfeeding in favour of alternative food. Stressing that modern science agrees with Islamic law, Dr. Zaghlūl goes to great lengths to show the vital importance of the colostrum, and urges mothers to start breastfeeding as soon after giving birth as possible.<sup>10</sup>

Significantly, physicians in Islamic countries today, in their support of maternal breastfeeding, also rely on religious and medical sources from the Middle Ages. *Al-Riḍā'a min laban(i) 'l-umm: mādhā takhsaru 'l-umm min 'adam irḍā'ihā* ("Maternal Breastfeeding: What Does A Mother Lose by Abandoning Breastfeeding")<sup>11</sup> is an illuminating example. The author, Dr. Ḥassān Shamsī Bāshā, tries to counteract the prevailing Western influence on young mothers and to convince them to adopt the natural way of maternal breastfeeding. His main purpose is to encourage a return to traditional practices which he supports by the findings of modern medicine, on the one hand, and Islamic principles, on the other.<sup>12</sup> Opening his book with quotations from the Qur'ān, the author dedicates three short chapters to medieval Islamic attitudes towards breastfeeding as reflected in the Qur'ān, *ḥadīth* and medical writings. He follows this by an interesting discussion, based, again, on the findings of modern medicine as well as on early Islamic tradition, of the contraceptive effect of breastfeeding. Side by side with the quotations from a report, published under the title "Breastfeeding as a family planning method" in the British medical journal *The Lancet* in 1988, the author refers to the Qur'ānic ruling concerning the normative lactation period (of two years) as a sign of the divine wisdom

<sup>10</sup> Amīn 'Abd al-Ma'būd Zaghlūl, *Ri'āyat al-ṭufūla fī 'l-sharī'a 'l-islāmiyya*, Cairo, 1991, pp. 223-252, esp. pp. 227-233. The author, for his purpose, bypasses the negative attitude of medieval Muslim doctors towards the colostrum, which has been prevalent in Islamic societies even in this century; see, for instance, Granqvist, *Birth and Childhood*, pp. 92-93.

<sup>11</sup> Published in Jeddah, in 1991.

<sup>12</sup> See the Introduction by Dr. Ṭalāl Baṣrāwī, Director of the Pediatric Wing at the King Fahd Military Hospital in Jeddah, p. 9.

guaranteeing a reasonable spacing between births for the benefit of mother and infant alike.<sup>13</sup>

For many women in Islamic countries, as elsewhere, it is obviously their awareness of the contraceptive effect of breastfeeding which prompts them to prolong the lactation period.<sup>14</sup> As Umm 'Abdullāh, a Palestinian woman, puts it: "I didn't want to stop breastfeeding—oh no! As soon as I stopped breastfeeding I'd always get pregnant. If I continued to breastfeed for two or three years, then I wouldn't get pregnant."<sup>15</sup>

Some popular beliefs such as the conviction that the milk transmits the nurse's traits to the nursling,<sup>16</sup> that a nursing woman should have no sexual relations, i.e., abstinence during the whole lactation period,<sup>17</sup> and the view that the milk of a pregnant woman should be avoided,<sup>18</sup> may have their roots in local traditions, not

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<sup>13</sup> Ḥassān Shamsī Bāshā, *al-Riḍā'a min laban al-umm*, pp. 115-118; cf. Zuhayr Aḥmad al-Sibā'ī and Muḥammad 'Alī al-Bār, *al-Ṭabīb: adabuhu wa-fiqhuhu*, Damascus and Beirut, 1993, pp. 279-280.

<sup>14</sup> Granqvist, *Birth and Childhood*, p. 108: "How long does a mother nurse her child? I asked; and the women answered by quoting the following saying: 'The boy is suckled two and a half years and God does not reward thee.' This saying is to be understood as follows: that God certainly rewards the mother for nursing the girl so long as a year and a half, but that a boy can never be nursed long enough"; cf. Friedl, "Parents and Children in a Village in Iran", p. 203. A different attitude in Silwa, in Upper Egypt, is described by Ammar (*Growing Up in an Egyptian Village*, p. 101): "It is also recognized that a boy is usually nursed less than a girl, which also differs from the custom in Artas [reported by Granqvist]. The purpose is that though both should be infused with the mother's compassion, the girl is supposed to be imbued with more of it than the boy, and consequently her nursing should be longer." On the other hand, "Premasticated food is used more in the case of boys than girls, to help mother's milk in accelerating growth" (*ibid.*, p. 103).

<sup>15</sup> Michael Gorkin and Rafiq Othman, *Three Mothers, Three Daughters: Palestinian Women's Stories*, Berkeley, Los Angeles, London, 1996, p. 121; cf. Granqvist, *Birth and Childhood*, p. 109. For the custom of breastfeeding for a long period of time in contemporary Egypt, see, for instance, Nayra Atiya, *Khul Khaal: Five Egyptian Women Tell Their Stories*, Cairo, 1993, p. 3; Dana Raphael and Flora Davis, *Only Mothers Know*, pp. 70, 143.

<sup>16</sup> Friedl, "Parents and Children in a Village in Iran", p. 202; Khatib-Chahidi, "Milk Kinship in Shi'ite Islamic Iran", p. 120 and n. 10; Ammar, *Growing Up in an Egyptian Village*, p. 102.

<sup>17</sup> Granqvist, *Birth and Childhood*, p. 248, n. 4 (referring to *The Future of Marriage* by the Finnish anthropologist Edward Westermarck, who worked in the rural areas of Morocco between 1904 and 1930).

<sup>18</sup> Granqvist, *ibid.*, p. 109: "Thus Alya reproached a village woman Zarife Saleh: 'She is pregnant and her daughter drinks a pregnant woman's milk. It is a sin. The girl is very weak.' Yet the popular saying Granqvist heard in Artas, namely, "Milk of a pregnant woman, it shows in the rider", reminds one of a *ḥadīth* report (see

necessarily in early Islamic religious or medical thoughts. On the other hand, the Bedouin of the Sinai Peninsula, at the beginning of this century, are described as rigorously applying the Qur'ānic ruling concerning the two-year lactation period, again, "with the special intention of protracting the time during which a woman is not likely to be with child."<sup>19</sup> This is also true for Muslims in nineteenth-century Cairo, as well as Muslims in contemporary Oman<sup>20</sup> among whom "the mother is prohibited, by the Muḥammadan law, from weaning her child before the expiration of two years from the period of its birth, unless with the consent of her husband."<sup>21</sup>

In her *Birth and Childhood Among the Arabs*, the Finnish anthropologist, Hilma Granqvist, writes:

One of the last things I noticed in Artas [near Bethlehem in Palestine] before I left in the year 1931 was that the rubber teat and feeding-bottle had found their way into the village. I saw a woman using them, and it seems extremely probable that this novelty will be increasingly used. It is curious to think that when such a small thing has once been introduced, it will mean the definite end of a series of important customs. The milk of animals will be used as a substitute for women's milk. Then nursing by another person will not be necessary; then the relationship of foster-brother and -sister will also come to an end; and this in its turn will have an effect on the question of adoption which, in this form, may gradually disappear.<sup>22</sup>

Indeed, though she could not have foreseen the fatal consequences the process would have for nurslings in non-industrial areas with their low sanitary conditions, Granqvist's forecast has come true in Palestine as well as in other Arab societies. Yet traditional ways of feeding infants, and the Islamic ethics of breastfeeding surrounding them are still very much alive, particularly the rules concerning milk relationships between a nursling and a non-maternal nurse (and her relatives). How important a role such questions still play today can be gleaned from contemporary *fatāwā* literature.

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above, Chapter 1, n. 74); cf. Friedl, "Parents and Children in a Village in Iran", p. 203.

<sup>19</sup> Jennings-Brameley, "The Bedouin of the Sinaitic Peninsula", PQS 39 (1907), p. 22, as cited by Granqvist, *Birth and Childhood*, p. 248, note 4.

<sup>20</sup> Lane, *Modern Egyptians*, Vol. 1, p. 79, as cited by Granqvist.

<sup>21</sup> Unni Wikan, *Behind the Veil in Arabia: Women in Oman*, Baltimore and London, 1982, p. 77.

<sup>22</sup> Granqvist, *Birth and Childhood*, p. 116.

The following examples, taken from *Majallat al-Azhar*, the monthly periodical issued by al-Azhar University, point to the prevalence of non-maternal breastfeeding in Egypt,<sup>23</sup> and there is evidence that the custom is practiced in other parts of the Middle East today.<sup>24</sup> Moreover, they show that common believers are aware of the legal consequences of breastfeeding in creating impediments to marriage. In other words, the rules laid down by the Qur'an and subsequently elaborated in *ḥadīth* and *fiqh* literatures still influence strategies of marriage and hence family structures in our days.<sup>25</sup>

"A young man wishes to marry his paternal cousin, but as an infant he suckled from his paternal grandmother more than five times. What is the law (in this regard)?" asks Ibrāhīm Aḥmad in an *istiftā'* directed to *Lajnat al-fatāwā* of al-Azhar University,<sup>26</sup> a

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<sup>23</sup> Ammar (*Growing Up in an Egyptian Village*, p. 102) testifies that in the village of Silwa, province of Aswan, during the 1950s "a few incidents occur of women nursing other women's children, even when the mothers are alive, but only for special reasons, e.g., when the mother's milk is not sufficient, or when a mother has a thin underweight baby, giving hers to a fat mother with fat babies. The incidents are known and the marriage taboo is observed."

<sup>24</sup> See, for instance, Altorky, "Milk-Kinship in Arab Society", pp. 233-234, and Madawi al-Rasheed, *Politics in an Arabian Oasis: The Rashidi Tribal Dynasty*, London and New York, 1991, pp. 131-132 (on Saudi Arabia in the nineteenth and twentieth centuries); Vanessa Maher, "Possession and Dispossession: Maternity and Mortality in Morocco", in Hans Medick and David Warren Sabean (eds.), *Interest and Emotion: Essays on the Study of Family and Kinship*, Cambridge, 1984, p. 107; Mohammed Fadhel Jamali, *The New Iraq: Its Problems of Bedouin Education*, New York, 1934, Appendix, Letters, A: "Information secured from sheikh Ḥassān al-Suhail regarding the tribe of Banī Tamīm", pp. 122, 123: "I was born on the 12th of Rajab of the year 1307 A.H. My father put me in the care of an Arabian wet-nurse as is the custom [...], and when I was nine years he took me back home... A child with us is born in the lap of a midwife... If he is a sheikh's child he is given to a nurse who brings him up in the usual manner: feeds him her milk and swaddles him until weaning." On the case of a Jew who was nursed by a Muslim in contemporary Iraq, see Anwar Sha'ul, *Qisṣat ḥayātī fī Wādī al-Rāfīdaynī*, Jerusalem, 1980, p. 22 (I wish to thank Ms Nogah Efrati for drawing my attention to the latter two books); al-Sibā'ī and al-Bār, *al-Ṭabīb: adabuhu wa-fiqhuhu*, p. 358. For Artās, in Palestine in the first half of this century, see Granqvist, *Birth and Childhood*, pp. 109-111, 113-114, 250, n. 7; it is interesting to note the husband's role in cases of non-maternal nursing: "The Arab teachers in Jerusalem said to me: 'Among Muḥammadans a woman may not give of her milk to another person's child without asking permission of her husband...' 'The husband is the owner of the milk'" (*ibid.*, p. 112).

<sup>25</sup> Altorky, "Milk-Kinship in Arab Society", pp. 241-243, and see Ammar, above, note 8.

<sup>26</sup> *Majallat al-Azhar* 58 (1985-6), p. 1116; *Lajnat al-fatāwā*: The committee in charge of giving legal responsa at al-Azhar University.

question also put by K. M. al-Sharqāwī from Asyūṭ.<sup>27</sup> Both men approached the *Lajna* prior to their actual marriage. The case of A. J. Aḥmad is more complicated: Only after contracting marriage with his paternal cousin was he told by his mother—whose testimony he accepts without doubt—that, as an infant, he had suckled from his paternal grandmother, and he now wonders whether his marriage is valid.<sup>28</sup> M. A. ‘Abd al-Nabiyy, from Cairo, asks whether his marriage with his paternal cousin is valid when he had actually been suckled by his paternal uncle’s wife (not the mother of his intended wife).<sup>29</sup> And what is the rule in the case of a young man who wishes to marry a young woman whose father discovers he had suckled, as an infant, from the man’s mother at least five times?<sup>30</sup> Is marriage between a man and the maternal cousin of his father possible if the woman’s mother nursed the man’s paternal uncle together with the deceased sister of his intended wife?<sup>31</sup>

In Shī‘ite Islam the rules of milk kinship were developed along more or less the same lines as in the Sunni law. The discussion of marriage prohibitions incurred through milk kinship in the writings of such contemporary Shī‘ite religious authorities as Khomeini, Khoyi, Khonsari and Shahrestani, reveals, however, some differences. For instance, according to Khomeini, a minimum of fifteen suckling sessions in succession are needed to create a milk relationship between a nursling and a non-maternal nurse, and the milk must be suckled at the breast. Moreover, it is recommended that the wet nurse be a practising Twelver Imāmi Shī‘a Muslim.<sup>32</sup> In any case, Shī‘ite religious scholars, like their Sunni counterparts, are well aware of the complex Islamic legislation concerning breast-feeding and its social implications.

On the popular level, Jane Khatib Chahidi argues that in Iranian society during recent decades non-maternal nurses have been employed only when it was absolutely essential, that is, in the case of the death or illness of the mother or the onset of another pregnancy while a child was still being breastfed. As to using milk kinship to prevent marriages, she adds, the Iranians’ concern when

<sup>27</sup> *Majallat al-Azhar* 59 (1987), p. 1391.

<sup>28</sup> *Majallat al-Azhar* 59 (1986), p. 207.

<sup>29</sup> *Majallat al-Azhar* 58 (1986), p. 1878.

<sup>30</sup> *Majallat al-Azhar* 59 (1987), p. 1559.

<sup>31</sup> *Majallat al-Azhar* 68 (1994), pp. 779-80.

<sup>32</sup> Khatib Chahidi, “Milk Kinship in Shī‘ite Islamic Iran”, pp. 116-117.

practising the custom was to avoid the choice of a wet nurse which could affect future marriage arrangements. However, no one seemed to have any idea of the extent to which milk kinship affected the prohibition of marriage between persons so related beyond that between milk siblings.

The discussion, in contemporary writings, whether milk banks (commonly used in industrial countries for infants born prematurely) are compatible with the Islamic laws concerning milk kinship is another example of the practical relevance these laws still have today as well as the intellectual efforts Muslims dedicate to defending the achievements of their heritage against the inroads of Western technology and science (see Appendix Two). That, unlike for Sunnites, for Shi'ites only direct suckling from the breast creates milk relationships may make milk banks more acceptable in Shi'ite areas, but there is no indication as to whether or not this is actually the case.<sup>33</sup>

In recent years, organizations such as the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) have initiated campaigns to promote breastfeeding in the face of the aggressive pushing by commercial companies of artificial infant formulas, particularly in non-industrial countries where the consequences of the growing popularity of such formulas are disastrous for the infants concerned and ruinous for programmes of family planning.<sup>34</sup> Where such a campaign is being planned in Muslim societies there can be no doubt that it will be able to take advantage of the fact that Islamic legal-ethical attitudes towards breastfeeding are still very influential in the Muslim world.<sup>35</sup>

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<sup>33</sup> Ibid., p. 128.

<sup>34</sup> *Historical Perspectives on Breastfeeding*, p. 7 (Preface).

<sup>35</sup> Khatib-Chahidi, *ibid.*



## APPENDIX ONE

### GLOSSARY OF ARABIC TERMS DESIGNATING CHILD FEEDING BASED ON IBN SĪDA'S *AL-KITĀB AL-MUKHAṢṢAS*

Abū al-Ḥasan 'Alī b. Ismā'il Ibn Sīda, an Andalusian philologist and lexicographer of the eleventh century AD (d. 1066),<sup>1</sup> is the author of *al-Kitāb al-mukhaṣṣas*, generally regarded as “the apogee of fullness and skill” of the Arabic branch of classified, categorized dictionaries. In it he dedicated two chapters to infant and child feeding,<sup>2</sup> one on “Breastfeeding, weaning, food and other sorts of child nourishment”,<sup>3</sup> the other on “Food that is bad for children”<sup>4</sup> (see below). Together these two chapters contain around eighty terms drawn from lexicographical works compiled earlier in the Muslim world, synonyms and explanations. Even if we assume that many of these terms may not have been in regular use in the everyday life of Arabic speakers,<sup>5</sup> their number is impressive and points to the great attention child rearing was given in this domain, too. The following glossary is based on these two chapters in *al-Kitāb al-mukhaṣṣas*.

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<sup>1</sup> On the author and his work, see: s.v. “Ibn Sīda”, *ET*<sup>2</sup>, Vol. 3, p. 940 (M. Talbi); J. A. Haywood, *Arabic Lexicography: Its History and Its Place in the General History of Lexicography*, Leiden, 1965, pp. 64-67, 113-114.

<sup>2</sup> *Ibid.*, pp. 4-5.

<sup>3</sup> Abū al-Ḥasan 'Alī Ibn Sīda, *al-Kitāb al-mukhaṣṣas*, Bulaq, 1316/1898-9, Vol. 1, pp. 25-29.

<sup>4</sup> *Ibid.*, pp. 29-30. Ibn Sīda included both chapters in the first part of *al-Mukhaṣṣas*, dealing with human beings and the things that concern them—clothes, food, sleep, weapons and fighting. He then turned to animals and plants; then man in social life—travel, work and play. See Haywood, p. 114.

<sup>5</sup> L. Kopf, “Arabic Lexicography—Its Origin, Development, Sources and Problems”, in *Studies in Arabic and Hebrew Lexicography* (ed. by M.H. Goshen-Gottstein), Jerusalem, 1976, pp. 29-34 (Hebrew section).

## THE ARABIC TEXT

٢٥

## الرِّضَاعُ وَالْفِطَامُ وَالغِذَاءُ وَسَائِرُ ضُرُوبِ التَّرْبِيَةِ

\* أبو عبيد \* رَضَعَ الصَّبِيَّ أُمَّهُ وَرَضَعَهَا يَرْضَعُهَا وَأَنْشَدَ الْأَصْبَغِيَّ قَالَ أَنْشَدَنَا عَيْسَى بْنُ عَمْرِوهُمَا <sup>1</sup>  
ابن مُرَّة

وَدَمُّوْنَا الَّذِي يَارِهِمْ يَرْضَعُونَهَا \* أَفَاوِيقَ حَتَّى مَا يَدْرِ لَهَا نَعْلُ

النَّعْلُ - الزِّيَادَةُ فِي ضَرْعِ الشَّاةِ \* ابْنُ دَرِيدٍ \* رَضَعَهَا رَضَعًا \* ابْنُ السَّكَيْتِ \* هُوَ الرِّضَاعُ  
وَالرِّضَاعُ وَالرِّضَاعَةُ وَالرِّضَاعَةُ \* قَالَ أَبُو عَبِيدٍ \* إِذَا أَدَخَلْتَ الْهَاءَ فَلَا يَكُونُ إِلَّا بِالْفَتْحِ وَهُوَ  
الرِّضْعُ \* غَيْرُ وَاحِدٍ <sup>2</sup> \* أَرْضَعْتَهُ أُمَّهُ وَهِيَ مُرَضِعٌ عَلَى النِّسْبِ وَأَمَّا قَوْلُهُ تَعَالَى تَذَهُلُ كُلُّ مُرَضِعَةٍ  
عَمَّا أَرْضَعَتْ عَلَى الْفِعْلِ وَسَيَأْتِي ذِكْرُ مِثْلِ هَذَا مَا سَتَقْصِي فِي فَصْلِ الْمَذْكُورِ وَالْمَوْثُفِ مِنْ هَذَا

الْكِتَابِ إِنْ شَاءَ اللَّهُ <sup>3</sup>

\* أَبُو عَبِيدٍ \* امْرَأَةٌ مُرَضِعٌ إِذَا كَانَ لَهَا الْبَنُّ رِضَاعٌ <sup>4</sup> وَمُرَضِعَةٌ إِذَا كَانَتْ تُرَضِعُ وَلَدَهَا \* غَيْرُهُ \* يُقَالُ  
لِلْمَوْلُودِ رَضِعٌ وَرَضِعٌ وَرَضِعٌ وَرَضِعٌ \* وَجَاءَ أَهْلُهُ لِيَسْتَرْضِعُونَ لَهُ أَيُّ يَطْلُبُونَ لَهُ الْمُرَضِعَ <sup>5</sup> \* وَالرَّوَضِعُ \*  
أَسْتَنَانُ الْمَوْلُودِ قَبْلَ أَنْ تَسْقَطَ وَقِيلَ الرِّوَضِعُ سِتٌّ مِنْ أَعْلَى وَسِتٌّ مِنْ أَسْفَلِ \* وَالرَّاضِعَتَانِ \*  
السِّنَانُ الْمَتَقَدِّمَتَانِ اللَّيْنَانِ شَرِبَ عَلَيْهِمَا اللَّبَنَ وَقِيلَ كُلُّ سِنٍّ تَتَعَرَّضُ رَضِعَةٌ <sup>6</sup> \* وَرَضَعْنَا فِي بَنِي  
فُلَانٍ - أَيُّ أَرْضَعُوا النَّوَارِضَ عَلَيْنَا وَهِيَ الرِّضَاعَةُ \* ابْنُ السَّكَيْتِ \* <sup>8</sup> الْهَبَّيْحَةُ - الْمُرَضِعَةُ

ويقال \* لَبَنَتْهُ أُمُّهُ تَلْبُنُهُ لَبْنَا - أرضعته \* وقال \* هو أخوه بلبان أمه ولا يقال بلبين أمه وأنشد

فإن لا يكُنْها أو تكُنْه فأنه \* أخوها غَدَنَه أمه بلبانها

\* أبو علي \* اللَّبَانُ فِي الْإِنْسَانِي وَاللَّبَنُ فِي سِوَاهُمْ وَمَا سُمِّيَ مِنْهُ مَسْتَعَارًا فِي غَيْرِ الْخَيَوانِ  
فهو اللَّبَانُ كقول الشاعر

وَأَرْضِعْ حَاجِبَةَ بِلَانِ أُخْرَى \* كَذَاكَ الْحَاجُّ رُضِعَ بِالْبِلَانِ

قال أنشدني أبو بكر عن نعلب عن ابن السكيت \* أبو عبيد \* أَرْضَعَتِ الْمَرْأَةُ وَهِيَ مُرْغِلٌ<sup>11</sup>  
- أَرْضَعَتْ \* وَالْمِلْحُ وَالْمَالِحَةُ - الرضاع وأنشد

لَا يُعِيدُ اللَّهُ رَبُّ الْعَبَا \* د وَالْمِلْحُ مَا وُلِدَتْ خَالِدَه

ومنه قوله

وَإِنِّي لَأَرْجُو لَهْفَهَا فِي بَطُونِكُمْ \* وَمَا بَسَطَتْ مِنْ جِلْدِ أَسْعَثَ أَعْبَا

وذلك أنه كان نزل عليه قوم فأخذوا باله فقال أرجوا أن ترعوا ما ترون من ألبانها وما بسطت من  
جلود قوم كانت قد بسيت فسموا منها \* و13مِلْحٌ - رَضِعَ ومنه قول بهض مستشفعي بنى سعد النجبي

صلى الله عليه وسلم لومئذ العرث بن أبي شمر أو النعمان بن المنذر \* وقال \* أَسْجَمَتِ الْمَرْأَةُ لِلْمَوْلُودِ  
وهي أول رضعة أرضعته أمه \* على \* هذه حكاية لفظه رضعة والصواب إرضاعة لقولهم أَرْضَعْتَهُ

\* ابن السكيت \* مَا حَجَّمَ الصَّبِيُّ نُدَى أُمِّه - أَي مَامَصَهُ \* على \* حَصَّ بِهِ بِالْحَدِّ وَذَكَرَهُ نَعْلَبُ فِي  
الواجب \* ابن دريد \* الرِّيبِكَةُ وَالضُّبَيْكُ - أَوَّلُ مَصَّةٍ يَعْصِمُ الْمَوْلُودَ مِنْ أُمِّهِ وَغَيْرِهَا \* ابن

السكيت \* الْمَنْعَلُ - اللَّبَنُ الَّذِي تُرَضِعُهُ الْمَرْأَةُ وَوَلَدُهَا وَهِيَ حَامِلٌ وَقَدْ مَغَلَّتْ بِهِ وَأَمَغَلْتَهُ وَهِيَ تَمُغِّلُ  
وَمُغِّلَةٌ \* أبو عبيد \* مِلْحُ الصَّبِيِّ أُمُّهُ بِمَلْحِهَا مَلْحًا \* غيره \* مَلْحِهَا مَلْحًا كَمَا هَا حَادُوا أُمَّ مَلْحَتَهُ

هي \* صاحب العين \* الْمَلِجُ - تَنَاوَلُ النَّدَى بِأَدْنَى الْقَمِ \* ابن دريد \* مَلِكُ الصَّبِيِّ نُدَى أُمِّهِ  
مَكَاوِمُ كَكَّةَ - اسْتَقْصَى مَصَّهُ وَهَذَا اسْتِقَاقُ مَكَّةَ لِقَوْلِهِ الْمَاءُ فِي الْأَنْهَامِ كَانُوا يَسْتَكُونُ الْمَاءَ

أَي يَسْتَخْرِجُونَهُ \* وقال \* أَمَسَ الصَّبِيُّ نُدَى أُمِّهِ لَهَا - لَطَعَهُ بِلِسَانِهِ وَلَمَّا مَصَّهُ \* وقال  
حَصَّ الصَّبِيُّ حَصًّا - ارْتَضِعَ حَتَّى امْتَلَأَتْ أَنْفَعَتُهُ \* أبو زيد \* عَرَمَ الصَّبِيُّ أُمَّهُ بِعَرِمِهَا<sup>22</sup>

رَضَعَهَا وَأَنْشَدَ

لَا تُلْدُنِينَ كَأَمِّ الْغُلَا \* مَ إِن لَأَلْحِدُ عَارِمَاتِ عَرِمَ

يقول ان لم تجد من يرضعها حلبت نديها وربما مصته ونجته \* وقال صاحب العين<sup>24</sup> رَضَعَتِ الْأُمُّ وَلَدَهَا بِاللَّيْلِ الْقَلِيلِ - جعلته في فيه شيئا بعد شي حتى يقوى على المص وقيل الترشيح التزبية ومنه «فلان يرضع لكنا» أي يربب ويؤهل

أبو زيد \* أرَضَعَتِ الْمَرْأَةُ - اذا مالكتها ولدها ومشى معها \* أبو زيد<sup>25</sup> رَعَتِ الْمَوْلُودُ امه يَرَعُهَا رَعًا - رضعها المرعها والمرع - الموضع وجعه رَعَاتٍ والرُعوث أيضا ولدها \* صاحب العين \* المَصْدُ - الرضاع مَصْدَهَا مَصْدَهَا مَصْدًا \* ابن دريد<sup>27</sup> مَرَزَ الصَّبِيَّ نَدَى امه - عَصَرَهُ بِأَصَابِهِ فِي رِضَاعِهِ \* أبو عبيد<sup>28</sup> التَعْفِيرُ - أن ترضع المرأة ولدها ثم تدعه وذلك اذا أرادت أن تَقْطِعَهُ \* ابن دريد<sup>29</sup> قَطَعَتِ الْمَوْلُودَ أَقْطِعَهُ قَطْأً - قطعت عنه الرضاع والاسم القَطَامُ والصبي قَطِيمٌ والاني قَطِيمٌ وقطيعة وكل دابة تَقْطِمُ والام فاطمٌ وبه سميت المرأة فاطمة على الهاء للعلمية \* ابن دريد \* أصله التَطْعُ قَطَعَتِ الشَّيْءَ تَطْعُتُهُ \* ابن الاعرابي<sup>32</sup> حَمَمَتُهُ - قَطَمَتِهِ وَحَقِيقَةُ الْحَسْمِ الْقَطْعُ أَيْضًا

قال صاحب العين<sup>33</sup> العَرَارُ وَالْعَرَارَةُ الْمُجْلَانُ عَنِ الْقَطَامِ \* أبو زيد<sup>34</sup> فَصَلْتُهُ أَفْصَلُهُ فَصْلًا كَذَلِكَ \* أبو حاتم \* فَصَلْتُهُ وَأَفْصَلْتُهُ وَالاسْمُ الْفِصَالُ \* صاحب العين<sup>35</sup> عَدَّوْتُ الْمَوْلُودَ عَدًّا وَعَدَّيْتُهُ وَأَعَدَّيْتُ وَتَعَدَّيْتُ وَهُوَ الْعَدَاءُ فِي الْاسْمِ وَالْمَصْدَرُ

قال<sup>36</sup> قَرِمَ الصَّبِيُّ يَقْرِمُ قَرْمًا وَقَرْمًا وَقَرْمًا - تناول الاكل أدنى تناول وقَرَمْتُهُ أَنَا \* أبو عبيد \* عَدَّبْتُ الْوَلَدَ حَسَّنْتُ غِذَاءَهُ وَاسْمُ الْغِذَاءِ الْعَدْلُوجُ \* أبو عبيد<sup>38</sup> سَرَعْتُهُ وَسَرَعْتُهُ - مثل عَدَّبْتُهُ وَأَنْشِدُ سَرَعْتُهُ مَا سَنَّتْ مِنْ سُرْعَافٍ \* قال أبو علي \* ومنه قيل سُرْعُوفٌ وَهُوَ النَّعَامُ الرِّيَّانُ وَامْرَأَةٌ سُرْعُوفَةٌ - ناعمة طوييلة \* قال \* وكلُّ نَامٍ سُرْعُوفٌ وَالسَّرْعُوفَةُ النَّعَامُ \* ابن دريد \* سَرَعْتُهُ كَذَلِكَ وَأَنْشِدُ قَدَسَرَعْتُهُ هِيَ أَيْ سُرْعَافٍ \* وكذلك خَرَجْتُهُ \* أبو علي \*

أصل الخرجة التسم والتوسع ومنه خرج النبات وهو ناعم وزاهره صفة وبعضهم يجعله مصدرًا \* أبو زيد<sup>41</sup> بَجَّوْتُ الْوَلَدَ وَبَجَّيْتُهُ بَجًّا وَبَجَّيْتُ وَالْأَنْثَى بَجِيَّةٌ - عَلَّيْتُهُ بِالطَّعَامِ وَأَخْرَجْتُ رِضَاعَهُ وَقَدَعْتُ جِيًّا إِذَا مَنَعَ اللَّبَنَ وَعَدَّيْتُ بِالطَّعَامِ وَالاسْمُ الْجُجُوعَةُ وَالْجُجُوعَةُ الْفِعْلُ \* الزجاجي<sup>42</sup> الجيجي من الناس الذي عوت أمه فيقام عليه فان مات أبوه فهو يتييم وان ماتا معافه وطيم \* صاحب العين \* سَحَرَهُ يَسْحَرُهُ سَحْرًا وَسَحَرَهُ غَدَاهُ وَأَنْشِدُ وَنَسَحَرُ بِالطَّعَامِ وَالنَّسْرَابُ \* وَأَنْشِدُ أَيْضًا \* عَصَافِيرٌ مِنْ هَذَا الْإِنَامِ الْمَسْحَرُ \* وقوله تعالى انما أنت من المسحورين يكون من

الخدبيعة ويكون من التغذية أى الجوفين المتغذين \* ابن دريد \* الخبز بفتح الخاء والتعجيل والزمن على -  
 الحسَنُ الغداء \* صاحب العين \* 47 الحماية - الغداء للصبي بما به حياته \* صاحب العين \*  
 اللحاء - الغداء للصبي سوى الرضاع وقد التقي \* 49 والثرف - تنعيم الغداء للصبي وغيره \* غيره \*  
 المعزهل والمُعَهز \* 51 - الحسَنُ الغداء \* وقال \* سَمِّتَهُ - أحسنتُ غداءه \* قال أبو علي \*  
 والتسغيم يكون في غير الأنامي سَمِّتُ الزرع - أحسنتُ سَمِّيه وكذلك سَمِّتُ التبراس  
 بالزيت وأنشد

أومصابج رهاب في يقصاع \* سَمِّمُ الزَّيْتِ ساطعاتِ الدُّبَالِ

\* وقال صاحب العين \* سَمِّتَهُ وَسَمِّتَهُ بِالعينِ والغين \* قال \* والشمرجة - حُسن قيام الحاضنة  
 على الصبي والصبي مُشْرِج \* وقال \* المرأَةُ تَعْلَلُ الصَّبِيَّ بشئٍ من المرز وغيره ليجزأ به عن اللبن  
 قال تَعَلَّلَ وهى ساغبهُ يَبْمَا \* بأنفاسٍ من الشَّمِّ القَرَّاحِ  
 واسم ما علته به العُلالة والتعللة \* ابن جنى \* أصلُ من التعلُّل وهو التشاغلُ بالشئِ وتعلَّلتُ  
 بالشئِ وَعَلَّلْتُهُ به \* أبو عبيدة \* 55 اللدود - ما يلين للصبي من الطعام \* أبو عبيد \* اللدود -  
 ما كان من السقي في أحد شقي الفم وقد لدذنه وألوجور - في الفم أى الفم كان يعنى في الفم  
 كله وقد وجزته وأوجزته والنشوع - ألوجور وقد نشعته نشعاً وأنشعته \* صاحب  
 العين \* الحاضن والحاضنة - المؤكلان بالصبي يحفظانه ويؤتيانه والزهرقة والزهرزاق -  
 ترقيصُ الام للصبي \* صاحب العين \* دَعَرْتُ الصَّبِيَّ أدغره دغراً - وهو دفع الورم الذى فى الخلق  
 وفى الحديث لا تغدبن أولادك بالذغر \* وقال \* رَيْبُ الصَّبِيِّ أَرْبُهُ رِبَا وَرَيْبُهُ وَرَيْبُهُ وَرَيْبُهُ  
 وَرَيْبُهُ وَرَيْبُهُ وَرَيْبُهُ وَرَيْبُهُ - إذا أحسنت القيام عليه ووليتته حتى يفارق الطفولة  
 كان ابتكاً أو لم يكن والصبي مر بوب وريب والريبة - الحاضنة والريب - ولداً امرأة  
 الرجل والانى ريبه والراب - زوج الام وروى عن مجاهد أنه كره أن يتزوج الرجل امرأة  
 رايه \* أبو زيد \* رَبَّتِ الْمَرْأَةُ ابْنَهُ رَيْبَةً لِأَغيرِ وَرَبَّتْ وَلَدَ غَيْرِهَا رَبُّهُ رَبًّا وَرَبَّتْ تَرْبَةً جَمِيعاً  
 \* ابن السكيت \* رَبُّوتُ فى حجب - ره وريب \* أبو حاتم \* 65 الظنن من النساء - التى عطفت على  
 ولد غيرها \* صاحب العين \* الذكروالانى فى ذلك سواء والجمع أظنار وأظور \* سيبويه \* والنظوار  
 اسم للجمع \* ابن السكيت \* ونظوار \* أبو زيد \* ظاءرت مظارة - اتخذت ظنراً  
 \* صاحب العين \* أظارت ظنراً كذلك \* الاصمعي \* وقد يكون الظنن فى الإبل وسبأى ذكروه

ان شاء الله \* ابن جني \* الدابة<sup>66</sup> - انظر عربي فصيح وانشد لفرزدق  
رَبِيَّةٌ دَابَاتٌ ثَلَاثٌ رَبِيَّتُهَا \* يَلْقَمْنَهَا مِنْ كُلِّ شَيْءٍ وَبَارِدٍ

وقال آخر

جاءت اليه طفلة تهذرك \* فأصعبت داباتها تدمر \* بادياتا أين الاميرالا كبر  
\* ابن السكيت \* المسبع - المدفع الى الطويرة وانشد  
إِنْ تَمَّهَا الْيَرَّاضِعُ مُسْبَعًا \* وَلَمْ تَلِدْهُ أُمُّهُ مُقْبَعًا

### الغذاء السبي للولد

\* أبو عبيد<sup>67</sup> السغل والوعل - السبي الغذاء وكذلك الخن وقد يحن بجن أو بجنته \* أبو زيد<sup>69</sup>  
وهي الخانة وقول الشماخ \* بدرتهم أفري بجن قنين \* عني القراد لدمامته وقول النمر \* فأنتبنا نباتا  
غير بجن \* هو مخفف عن بجن \* أبو عبيد \* الخن أيضا البطي والشباب والفعل والمصدر كالفعل  
والمصدر<sup>70</sup> والجذع - السبي الغذاء وقد جعد جعدا وأجدعته \* غيره \* وجدعته \* قال أبو علي \*

أخبرني أبو بكر بن يزيد عن عبد الرحمن بن عمار قال سمعت المفضل يوما يشد بيت أوس بن حجر  
\* نُسكتُ بالماء تولىباجدما \* فقلت له جعدا فانف وصاح فقلت والله لنفخت في شبور  
هم ودي لارويته بعد اليوم الأجدما تكلم كلام التمل وأصب وقيل ان هذا جرى بينه وبين  
أبي عمرو الشيباني \* أبو عبيد \* الحئل - السبي الغذاء وانشد غيره بيت منهم

وَأَرْمَلَةٌ تَسْمَى بِأَسْعَتِ حُمَّلٍ \* كَفَرَخَ الْخُبَارَى رَأْسَهُ قَدْ نَصَّوَعَا<sup>72</sup>

\* والحئل - سوء الغذاء والرضاع وقد حئل حنلا \* والحئل - الحئل \* ابن دريد \* صبي محسوم<sup>71</sup>  
سبي الغذاء وقد تقدم أن المحسوم القطيم \* وقال \* صبي زعبل - سبي الغذاء وكادى الشباب  
ومن أمثالهم \* لا يكلم زعبل \* غيره \* هو الذي لم ينجم فيه الغذاء فدق عنقه وعظم بطنه \* أبو زيد \*

زَلَّتْ غِذَاءَهُ وَقَرَّقَمَهُ أَسَانُهُ \* أَبُو عَبِيدٍ \* الْقَرَّقَمُ الْبَطِيُّ الشَّبَابُ وَأَنْشَدَ<sup>75</sup>

أَشْكُو إِلَى اللَّهِ عَمَّا لَدَّرَدَا \* مَرَّقَيْنِ وَبِحُورًا سَلَمَا

وهي السبي الخلق \* قال الفارسي \* هذا مما صحف فيه أبو عبيد انما هو سملق بالسين غير المعجمة  
\* قال أبو علي \* القرقة الدقة ومنه قول العرب \* وما قرقي إلا الحسب \* أبو عبيد \* المودن<sup>77</sup>

الذي يؤادضون \* ثعلب \* وهو البطي الشباب \* صاحب العين \* غلام قصيع ومقصوع<sup>79</sup>  
- كادى الشباب والاني قصيعه وقد قصع قصاعة \* أبو عبيد \* هومن القصع وهو شمك  
الشيء وقصع عليه كانه مردود الخلق بعضه الى بعض فليس يطول

## GLOSSARY\*

- 'adhhlaja** [37]: *'adhhlajtu 'l-walada*: I fed or nourished the child well.
- 'affarat** (inf. n. *ta'fir*) [28]: A woman left her infant after having breastfed him with the intention of weaning him.
- aḥjamat* [14]: *aḥjamat(i) 'l-mar'a li-l-mawlūd*: The woman suckled the new-born child for the first time.
- 'ajā** [41]. *'ajawtu 'l-walad*: I diverted [the attention of] or occupied the child with a bit of food, by which he is rendered contented to be restrained from milk.
- 'ajiyy** [42]: A motherless child fed by a foster mother.
- 'allalat** [54]: *al-mar'a tu'allilu 'l-ṣabiyya bi-shay' min(a)'l-marw wa-ghayrihi li-yajza'a bihi 'an(i)'l-laban*: The woman diverts [the attention of] or occupies the child with a piece of *marw* (an aromatic plant) and other things in order to make him feel satisfied with these instead of milk.
- 'arama** [23]: *'arama 'l-ṣabiyy ummahu*: The child sucked the breast of his mother.
- 'arār, 'arāra** [33]: Certain plants urging (or precluding from?) weaning.
- arḍa'at* [2]: *arḍa'athu ummuhu*: His mother suckled him.
- arḡhalat** [10] = *arḍa'at*.
- ḍabik* [17] = *rabika*.
- dagħara** [60]: *dagħartu 'l-ṣabiyya*: I (a mother) pressed the throat or face of the child to remove a swelling.
- dāya* [66] = *zi'r*.
- faṣalat** [34] = *faṭamat*.
- faṭamat** (inf. n. *faṭm*; n. *fīṭām*) [29]: *faṭamtu 'l-shay'*: I cut, severed it; *faṭamtu 'l-mawlūd*: I (a woman) weaned the infant.
- faṭīm** [30]: A weaned infant.
- fāṭīm, fāṭīma** [31]: A suckling woman weaning a suckling.
- ghadhā** [35]: *ghadhawtu 'l-mawlūd, ghadhdaytuhu*: I fed the new-born infant.
- ghamallaj** [45] = *khabarnaj*.
- habayyakha** [8] = *murḍi'a*.

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\* The glossary follows the English alphabetical order. Explanations are based mainly on Lane's *Arabic-English Lexicon* and Hava's *al-Farā'id al-duriyya*.

*hādīn, hādīna* [58]: A man or a woman in charge of taking care of a child, rearing or nourishing him.

*hajama* [15]: *hajama 'l-ṣabiyy thadya ummihi*: The child sucked the breast of his mother.

*hajīn* [69] = *saghil*; also: A child growing up slowly.

*haṣa'a* [22]: *haṣa'a 'l-ṣabiyyu*: The child sucked his fill of the milk.

*ḥasamat* [32] = *faṭamat*, see also s.v. *maḥsūm* below.

*ḥathl* [71]: Ill-feeding or ill-breastfeeding a child.

*jadi'* [70] = *saghil*.

*khabarnaj* [44]: Good nourishment.

*kharfaja* [40] = *'adhlaja*.

*labanat* [9]: *labanathu ummuhu* = *arḍa'athu*.

*ladūd* [55]: Food softened for the child; drink given to a child through the corner of the mouth.

*lahasa* [21]: *lahasa 'l-ṣabiyy thadya ummihi wa-lam yamṣaṣhu*: The child licked his mother's breast but did not suck it.

*likhā'* [48]: Nourishment for a child other than breast milk.

*maghl* [18]: The milk of a pregnant female.

*maḥsūm* [72]: A child badly fed.

*makka* [20]: *makka 'l-ṣabiyy thadya ummihi*: The child sucked his mother's breast to the utmost.

*malaha* [13] = *raḍi'a*.

*malaja* [19]: *malaja 'l-ṣabiyy ummahu*: The child took his mother's nipple with the extremity of his mouth.

*maqṣū'* [79] = *qaṣi'*.

*maraza* [27]: *maraza 'l-ṣabiyy thadya ummihi*: The child squeezed his mother's breasts with his fingers while sucking.

*marbūb* [62] = *rabīb*.

*maṣd* [26] = *raḍā'*.

*milḥ* (*mumālaḥa*) [12]: The act of sucking the mother or any nurse, syn. *raḍā'*.

*mu'azhal* [50] = *khabarnaj*.

*mūdan* [77]: born slender-bodied, slowly growing up.

*muḥāyāt* [47]: vital nourishment for a child with that whereby is his life.

*mula'haz* [51] = *khabarnaj*.

*muqarqam* [76]: (A child) growing up slowly.

*murḍi'* [3]: A mother (or another woman) having with her a child which she suckles (a possessive epithet) or: Having milk (though not having a child that is suckled).

- murđi'a* [4]: A mother (or another woman) suckling .
- murghil* [11] = *murđi'*.
- nashū'* [57] = *wajūr*.
- qarama* [36]: *qarama 'l-ṣabiyy*: The child began to eat dry things.
- qarqama* [75] = *zallama*.
- qaṣī'* [78]: *ghulām qaṣī'*: A child whose growth has been stunted.
- rābb* [63]: The mother's husband.
- rabba, rabbaba, tarabbaba* [61]: *rababtu 'l-ṣabiyya*: I took good care of the child (either my own or another's) acting as his guardian until he attained to puberty.
- rabīb* [63]: A child who is taken care of until the age of puberty; a man's wife's son (step-son).
- rabība* [63]: A step-daughter. Also: the wife of a father who has a child by another wife (a step-mother).
- rabīka* [16]: The first sucking an infant sucks from its mother or from another woman.
- rāḍa'ū* [7]: *rāḍa'nā fi banī fulān*: They suckled (a child or children) for us and we did the same for them.
- rađi'* and *rāđi'* (pl. *ruđḍa'*) [5]: A child suckling.
- rađi'a* [1] (inf. n. *al-riḍā', al-radā', al-riḍā'a, al-radā'a*): *rađi'a 'l-ṣabiyy ummahu*: The infant sucked the breast of his mother.
- raghatha* [25] = *raḍa'a*.
- rashshahat* [24]: *rashshahat(i) 'l-umm waladahā bi-'l-laban(i) 'l-qalīk*: The mother fed her child with a little milk, putting it into his mouth by little and little, until he became strong enough to suck.
- rawāđi'* (sing. *rađi'a*) [6]: The teeth of an infant before they fall out (in the period of sucking).
- saghghama* [52]: *saghghamtuhu* and *sa'amtuhu*: I nourished him well.
- saghil* [67]: Malnourished.
- saḥara, saḥhara* [43]: *saḥarahu, saḥḥarahu*: He fed him.
- sar'afa* [39] = *'adhłaja*.
- sarhada* [38] = *'adhłaja*.
- shamraja* [53]: Good sustenance supplied by a nurse to a child.
- ta'fir*, see *'affarat*.
- taraf* [49]: Pleasantly feeding a child.
- waghil* [68] = *saghil*.

*wajūr* [56]: The pouring of drink (or medicine) into a child's mouth; into any part of his mouth or into the middle of his mouth.

*za'bal* [73]: A child badly fed; one for whom feeding is not beneficial and therefore his neck becomes thin and his belly swollen; one whose growth has been retarded.

*zahzaqa, zihzāq* [59]: (A mother) dancing or dandling her child or making her child to leap or spring or bound in her arms or on her knee.

*zallama* [74]: *zallamtu ghidhā'ahu*: I made his food badly; I ill-fed him.

*zama'laq* [46] = *khabarnaj*.

*zi'r* [65]: A woman who inclines to, or feels for the young one of another (and suckles or fosters it).

## APPENDIX TWO

### MILK BANKS: SOME ISLAMIC POINTS OF VIEW

#### *Introduction*

Milk banks were first introduced a few decades ago after wet nursing in contemporary industrial societies had almost completely disappeared from the scene and following scientific evidence that babies breastfed by their own mothers or by wet nurses showed a lower mortality rate than artificially fed infants. After the American Academy of Pediatrics published its first recommendations in favour of human milk banks in 1943, the history of milk banks in the US has had its ups and downs, but milk banking is still a common practice in parts of Europe, and many countries in Central America and the Caribbean have set up milk banks as part of national campaigns encouraging breastfeeding.

To be sure, milk banks serve a small population of infants, by supplying sterilized human milk whose nutritional and immunogenic properties have been preserved, in the case of premature and low birth-weight babies, mal-absorption and feeding intolerance conditions, and the like. But their role is undeniably important in societies which cannot offer the alternative of wet nursing when a nursing mother cannot breastfeed herself.<sup>1</sup>

In developing countries, where maternal breastfeeding and wet nursing are still common, there is little need for banked milk. Moreover, the financial and technological requirements involved in operating milk banks form a much heavier burden here than in industrial countries, especially if we consider that the number of those who really need it will always be small.

In Islamic countries, the practice common in the West to pool the milk of several donors for potential consumers is particularly problematical from a religious point of view. Thus, while in social and medical terms milk banks play only a marginal role in these

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<sup>1</sup> Lois D.W. Arnold, "Issues in Human Milk Banking", in J. Riordan and K. G. Auerbach (eds), *Breastfeeding and Human Lactation*, Boston and London, 1993, pp. 597-598; Zuhayr Ahmad al-Sibā'ī and Muḥammad 'Alī al-Bār, *al-Ṭabīb: adabuhu wa-fiqhuhu*, pp. 351ff.

countries, the idea behind them is passionately discussed by religious scholars as well as physicians, most of whom reject it completely.<sup>2</sup> The milk bank stands at the heart of these discussions not so much as a concrete institution but rather as a symbol of western values and family moral practices, which are presented in sharp contrast to the Islamic ones. Here, too, we find how the basic principles of the Islamic ethics of breastfeeding, which were consolidated within the formative period of Islam, still serve as guidelines for observant Muslims who seek to apply them in every-day life.

A medical point of view concerning milk banks is presented in Chapter 8 of *al-Ṭabīb—adabuhu wa-fiqhuhu* (“The Physician—his Conduct and Learning”) written by two Sa‘udi doctors, Zuhayr Aḥmad al-Sibā‘i, Head of the Department of Family and Social Medicine in King Faṣṣal University in al-Dammām and Muḥammad ‘Alī al-Bār, a consultant of Islamic medicine in King Fahd Centre for Medical Research, King ‘Abd al-‘Azīz University, Jeddah.<sup>3</sup> Interestingly, their arguments are interwoven with a wealth of religious considerations.

The chapter opens with a factual survey, involving as yet no religious-ethical evaluation, of the history of milk banks, the *raison d’être* of their existence, the way in which they function, their advantages and the categories of infants they serve. The Islamic world view of the authors emerges, however, in their discussion of the difficulties connected with the operation of milk banks. Beside the financial, the technological and the hygienic problems which are particularly severe in developing countries, they emphasize that, from an Islamic point of view, the practice of mixing the milk of several mothers threatens the legitimacy of future marital relationships between nurslings fed through milk banks.

Significant furthermore is that, as physicians, the authors devote a large part of the chapter to the opinions of jurists—medieval and contemporary alike—on the different ways of indirect milk transmission, which they regard as analogous, in the way this creates impediments to marriage, to the use of banked milk. They quote the rule, accepted by the main four schools of law, that when an infant has consumed milk gathered from more than one woman

<sup>2</sup> In addition to the following texts, see, for instance, ‘Abdallāh Ibrāhīm Mūsā, *al-Mas‘ulīyya ‘l-jasadiyya fi ‘l-Islām*, Beirut, 1995, pp. 315-323.

<sup>3</sup> *Al-Ṭabīb-adabuhu wa-fiqhuhu*, Chapter 8, pp. 351-367.

this establishes a prohibition of marriage between the nursling and all the donors, and conclude that the same rule should be applied to banked milk. It is clear that this makes operating milk banks in any Muslim society very difficult, if not impossible.

The authors also raise some interesting social arguments against milk banks: the fact that, compared with the West, a high percentage of mothers in Islamic countries (85% in Egypt, for instance) breastfeed their own newborns; that governments (again the Egyptian case is mentioned) supply wet nurses (!) and milk substitutes for mothers who cannot themselves suckle; and that non-maternal breastfeeding by women of the same extended family is still a common practice; the fear that poor nursing women could be exploited by milk banks for the benefit of the more affluent rich ones and that poor women be tempted to sell their breastmilk and replace it with animal milk for their own nurslings, thus endangering the health, even the lives, of the latter.<sup>4</sup>

The awareness contemporary Muslim physicians reveal of the religious rules of breastfeeding, as exemplified in *al-Ṭabīb—adabuhu wa-fiqhuhu*, parallels, in a way, the attention religious scholars give to medical considerations. ‘Abdallāh Mabrūk al-Najjār, a teacher of Islamic law at al-Azhar University in Cairo,<sup>5</sup> is the author of “Mawqif al-islām min bank laban al-ummahāt” (“The Islamic Attitude towards Human Milk Banks”), an article which was published in *Majallat al-Azhar*. In it he offers a critical examination of the idea of milk banks from the Islamic point of view, but his religious-legal discussion is clearly also based on some knowledge of the system of milk preservation as well as the scientific arguments in favour of the use of preserved human milk.<sup>6</sup>

Aware that behind the western idea of milk banks lies a special sensitivity towards the well-being of children, al-Najjār set out to show that this is no less true for Islam which has always “been eager to ensure the welfare of the infant (...) by encouraging that its supply of maternal milk is as abundant as possible. When supporters of the idea of milk banks agree that their aim is to ensure the infant’s health this is nothing new, for Islam has always been

<sup>4</sup> *al-Ṭabīb—adabuhu wa-fiqhuhu*, pp. 355-360.

<sup>5</sup> Jakob Skovgaard-Petersen, *Defining Islam for the Egyptian State: Muftis and Fatwas of the Dār al-Iftā’*, Leiden, 1997, p. 326.

<sup>6</sup> *Majallat al-Azhar* 59 (1986), pp. 447-455.

most eager to realize the best opportunities for feeding infants (in general) and breastfeeding (in particular). Moreover, Islam has always been ahead (of other religions and cultures) in the domain of infant care and the welfare of mankind as a whole.” This latter observation, betraying a somewhat antagonistic and apologetic attitude towards the West, is based on a detailed discussion the author supplies of the rules that the Qur’ān and then later legal sources formulated regarding parents’ responsibilities, wet nursing, the legal meaning of *radāʿ*, the legality of the sale of human milk, etc. Al-Najjār concludes that “Islam has left no room for the activity of these banks within Islamic society, including Egypt. (In this society) most infants are breastfed by their mothers, and those who somehow are left without maternal nursing will always have the good fortune to find a substitute mother according to Islamic law. This nurse, through breastfeeding, becomes the nursling’s mother with the consequent prohibition of marriage. In the light of what was said above, no infant will ever be left without human nursing except in a few rare cases. It follows that the importance attributed (to milk banks) is imaginary and has no basis in reality.” Like al-Sibāʿī and al-Bār, al-Najjār is aware of the damage which might be caused to infants whose mothers, because of economic hardship, could be tempted to donate their milk to a milk bank rather than using it for the benefit of their own infants.

Al-Najjār accepts the idea that milk transfers moral traits and regards as very dangerous for Muslims the practice of exchanging milk between banks from different countries, as the result will be “that infants consume the milk of infidels, free thinkers or adulterers”. Above all, however, milk banks should be rejected because the idea is incompatible with the Islamic prohibitions of marriage. It “may cause the destruction of one’s lineage and bring about a mixture of lineages. A man is liable to marry his milk-mother or sister, thus offending against the Book’s wording as well as that of the *sunna* and going against the consensus of Muslim jurists... Milk banks serve as tools for perpetrating the unlawful through dispersing offspring, mixing lineages, loss of rights, spreading adultery and the birth of children of sin.”

*The Arabic Texts*

## موقف الإسلام من بنك لبن الأمهات\*

بقلم : د. عبد الله مبروك النجار

يثور الكلام في هذه الأيام حول فكرة يطرحها أصحابها باسم مصلحة الطفل ورعايته، وهذه الفكرة تتمثل في إنشاء بنك للبن الأمهات يقوم بتجميع ألبان الآدميات عن طريق البيع أو التبرع، ثم تبريده وحفظه في ثلاجات للمدة التي يصلح فيها للاستعمال<sup>١</sup>، أو تجفيفه وإعطائه للأطفال المحتاجين للرضاعة، أو تعبئته وبيعه للناس في معلبات، مثل معلبات الألبان التي تباع حالياً للأطفال، فهو في فكرته يقوم على غرار بنك الدم الذي يقوم بتجميع فصائله وتقديمها للمحتاجين إنقاذاً لحياتهم ومحافظة على أرواحهم<sup>٢</sup>.

ومن مبررات هذه الفكرة عند أصحابها، ما صدر عن منظمة الصحة العالمية من منشورات تعكس وجهة النظر العلمية والطبية التي تؤكد على أن لبن الأم هو أفضل غذاء للطفل لما يحتوي عليه من قيمة

\* مجلة الأزهر، ج ٥٩ سنة ١٩٨٦، ص ٤٤٧-٤٥٥.

<sup>١</sup> أثبتت البحوث الطبية أن لبن الأم يمكن أن يحفظ في الثلاجة لمدة أربع وعشرين ساعة دون أن يتلف، راجع الندوة العلمية لجمعية أصدقاء لبن الأم، في ٢٨/١٠/١٩٨٥، إعداد دكتورة هدى زكي خليل، وأخرجات، ص ٥٥، منشورات جمعية أصدقاء لبن الأم بمستشفى الحسين الجامعي.

<sup>٢</sup> راجع في مضمون فكرة بنك اللبن: دكتور السيد عبد الحكيم عبد الله - "أهمية الرضاعة الطبيعية صحياً ودينياً" - ص ٨٤ - هدية مجلة الأزهر عن شهر ذي القعدة سنة ١٤٠٦ هجري.

غذائية عالية تتناسب مع عمر الطفل وتتزايد مع نموه، كما انه يكسبه مناعة ضد كثير من الأمراض التي تصيب الأطفال، فضلا عن التكوين النفسي للطفل، وهو أمر لا يقل خطورة عن نموه الجسماني<sup>٣</sup>، ولما كان بعض الأطفال الرضع لا يجدون هذا اللبن عند والدتهم، فان من المصلحة لهم أن يتوافر البديل له عن طريق أمهات أخريات من اللاتي يتوافر عندهن اللبن ولا يحتجن إليه، ولا يمكن تحقيق الفائدة المنشودة إلا من خلال هذا البنك المأمول، فمصلحة بعض الأطفال تقتضي وجوده.

### اهتمام الإسلام بإرضاع الطفل:

وقبل أن نبين موقف الإسلام من فكرة هذا البنك، ونظرا لان الداعين إليها قد طرحوها تحت شعار مصلحة الطفل ورعايته، يجدر بنا أن نبين موقف الإسلام من الطفل واهتمامه به في ذلك الجانب الحيوي من جوانب حياته وهو الرضاع والتغذية، حيث لم يدخر الإسلام وسعا في سبيل تحقيق تلك الغاية، بما يعكس الأهمية المنوه عنها للبن الأم كأنسب غذاء للطفل واعظم أداة لتكوينه بدنيا ونفسيا، ومن ثم جاء توجيه الإسلام في تلك الحالة مرشدا ومحددا، فأناط القيام بعبء هذا الواجب على من هم أولى الناس به، واجدرهم برعايته، وأقدرهم على القيام بشأنه، وهما والداه، الأم بالإرضاع، والأب بالإنفاق والكسوة، يشير إلى هذا المعنى، قول الله تعالى: ﴿ وَالْوَالِدَاتُ يُرْضِعْنَ أَوْلَادَهُنَّ حَوْلَيْنِ كَامِلَيْنِ لِمَنْ أَرَادَ أَنْ يُتِمَّ الرَّضَاعَةَ وَعَلَى الْمَوْلُودِ لَهُ رِزْقُهُنَّ

<sup>٣</sup> راجع في فوائد الرضاعة الطبيعية: المرجع السابق، ص ٣٣، وما بعدها، ونشرة منظمة الصحة العالمية "وحدة صحة الأم والطفل" إدارة صحة الأسرة، سنة ١٩٧٩ م.

وَكِسَوْتُهُنَّ بِالْمَعْرُوفِ لَا تَكْلَفُ نَفْسٌ إِلَّا وَسْعَهَا، لَا تَضَارُّ وَالِدَةٌ بِوَلَدِهَا وَلَا مَوْلُودٌ لَهُ بِوَلَدِهِ»<sup>٤</sup>، حيث يرشد هذا القول الكريم الوالدات إلى أن يرضعن أولادهن حولين كاملين، وقد جاء التعبير القرآني بالوالدات وليس بالأمهات، ليشير إلى أولوية دور الوالدة وواجبها في هذا المقام، حتى لا يتحول عنها ويسند إلى غيرها وهي الأم البديلة التي تستأجر لإرضاعه إلا للضرورة، وهو واجب على الوالدة يقابله واجب على الأب متمثلاً في الإنفاق والبدل من أجل مصلحة الطفل بالمعروف ومن غير تعسف أو ضرر<sup>٥</sup>، فهو واجب للام وحق لها معاً. وإذا كان إرضاع الوالدة لطفلها هو الأصل، كما أنه هو الأعم الأغلب، إلا أنه قد لا يتيسر في بعض الأحيان، منها مثلاً حين لا يوجد عند الأم لبن أصلاً، فقد لا ينزل اللبن في ثدي بعض الأمهات، أو قد يوجد اللبن عند الأم، ولكنها تمتنع عن الإرضاع كيذا لوالده في بعض الحالات، فيأتي مسلكها مخالفاً لقول الله تعالى: «لَا تَضَارُّ وَالِدَةٌ بِوَلَدِهَا» "الآية"، أو طلباً لأجر معين لا يقدر عليه الوالد<sup>٦</sup>، وقد قدر الشارع سبحانه وهو العليم بخلقه وقوع مثل تلك الحالات، فشرع لها الحلول، وأوجد لها البدائل، فأجاز استئجار امرأة أخرى غير الأم لتقوم بمهمة إرضاعه، حفاظاً على الطفل، واهتماماً به حين يوجد مانع من قبل الوالدة سواء كان بإرادتها أم بغير إرادتها، ومن ثم شرعت إجارة الظئر، ومعناها: أن تلزم المرأة نفسها بإرضاع طفل لا تلزم شرعاً

<sup>٤</sup> سورة لقمة - آية ٢٣٣.

<sup>٥</sup> راجع في هذا المعنى: مختصر تفسير ابن كثير - ج ١ - ص ٢١١ وما بعدها - تحقيق الأستاذ الصابوني - دار القرآن الكريم بيروت.

<sup>٦</sup> دكتور زكريا البري - أحكام الأولاد في الإسلام - ص ٣٢ - الدار القومية للطباعة والنشر - سنة

بإرضاعه نظير أجر<sup>٧</sup>، وقد دل على مشروعيتها الكتاب والسنة وإجماع الأمة.

### ١. من الكتاب :

يقول الله تعالى: « فَإِنْ أَرْضَعْنَ لَكُمْ فَآتُوهُنَّ أُجُورَهُنَّ »<sup>٨</sup>. حيث أشارت الآية الكريمة إلى وجوب دفع الأجرة عند الإرضاع، وفي ذلك دليل على مشروعيتها، سواء كانت المرضعة هي الأم وانفصلت عن زوجها بالطلاق، أو كانت غيرها<sup>٩</sup>.

### ٢. ومن السنة :

ما روى أن النبي صلى الله عليه وسلم قال: " يحرم من الرضاع ما يحرم من النسب"<sup>١٠</sup>، حيث دل الحديث الشريف، على مشروعية الرضاع، وعلى آثاره التي تتمثل في كونه سببا للتحريم كما يحرم النسب، وقد استرضع النبي صلى الله عليه وسلم لولده إبراهيم<sup>١١</sup>.

### ٣. ومن الإجماع :

حيث اجمع الفقهاء على مشروعية الرضاع، وقد حكى هذا الإجماع ابن قدامة حيث قال: "اجمع أهل العلم على جواز استئجار الظئر"<sup>١٢</sup>.

<sup>٧</sup> الفتاوى الهندية - ج ٤ ص ٣٤٥.

<sup>٨</sup> سورة الطلاق - آية ٦.

<sup>٩</sup> تفسير النسفي - ج ٤ - ص ٢٦٧.

<sup>١٠</sup> نيل الاوطار - للشوكاني - ج ٦ - ص ٣١٧.

<sup>١١</sup> المغني لابن قدامة - ج ٦ - ص ٧٣.

<sup>١٢</sup> المرجع والمكان السابقين.

هكذا كان الإسلام حريصاً على مصلحة الطفل ورعايته، وتوفير اللبن الطبيعي له قدر ما يمكن، فدعوى أصحاب تلك الدعوة، ان الهدف هو مصلحة الطفل ليست جديدة على الإسلام، لأنه احرص ما يكون على تحقيق احسن الفرص لتغذية الطفل وإرضاعه، بل هو الأسبق دائماً في مجال مصلحة الطفل ومنفعة البشرية جمعاء.

### ضوابط المشروعية في الرضاع :

ولكن الإسلام حين شرع الرضاع لمصلحة الطفل ورعايته، قدر انه حين يوجد بشروطه من القدر والمدة ووصوله إلى جوف الرضيع مع بقاءه على صفاته إذا خلط بغيره فانه على تلك الهيئة ينبت اللحم، وينشز العظم، وبالتالي فانه يصبح علة للتحريم لما فيه من شبهة الجزئية بين الرضيع ومن أرضعته<sup>١٣</sup>، فيحرم منه ما يحرم من النسب، وقد ثبتت مشروعية التحريم به من الكتاب والسنة وإجماع الأمة على نحو ما سنرى.

### تقييم فكرة بنك اللبن:

وإذا ما أردنا تقييماً لتلك الفكرة يستهدف بيان جدواها، ومدى أهميتها في حياة المجتمع الإسلامي بصفة عامة، ومقدار تحقيقها لمصلحة الطفل بصفة خاصة، يستبين لنا إنها تنطوي على كثير من المحاذير التربوية والمضار الاجتماعية، فضلاً عن تعارضها مع مبادئ التشريع الإسلامي، ويمكن إبراز تلك المآخذ على النحو التالي:

<sup>١٣</sup> في هذا المعنى: دكتور محمود الطنطاوى -الأحوال الشخصية في الشريعة الإسلامية- ص ١١٤ -

### أولاً: أهمية الفكرة موهومة:

وإذا كان قيام هذه الفكرة قد بني في جانب كبير منه على الأهمية التي يعلقها أصحابها عليها، فإننا بعد بيان مدى اهتمام الإسلام بالطفل وإجازته للرضاع من أجل مصلحته وحسن رعايته، يتضح لنا بجلاء إن تلك الأهمية المنتظرة، لا تعدو أن تكون ضرباً من ضروب الوهم، بما يجعل وجود مثل هذه البنوك لا مبرر له، ولا جدوى تعود من ورائها، حيث لم يترك الإسلام لعملها مجالاً في المجتمع الإسلامي ومنه مصر، ذلك أن الغالبية من الأطفال ترضعهم والدااتهم، ومن يتبقى منهم دون إرضاع من والدااتهم يمكن أن يجد حظه عند أم بديلة على النحو المعهود شرعاً، لكنها بالرضاع تصير أمه، ويترتب عليه حرمة المصاهرة، وبعد هذه وتلك لن يبقى طفل دون رضاعة أمومية، اللهم إلا في القليل النادر، وبالتالي تكون تلك الأهمية موهومة ولا وجود لها فعلاً، بل وليست هناك حاجة ملحة إلى قيامها<sup>١٤</sup>.

### ثانياً: الفكرة تجافي مصلحة الطفل :

ومن المتوقع بل ومن المؤكد أيضاً، أن هذه الفكرة لن تقوم إلا على انقراض المصلحة المزعومة للطفل عند أصحابها، لأن إنشاء مثل هذه البنوك سيكون مدخلاً لكثير من المفاسد والشور، ومنها ضياع مصلحة الطفل ذاته، لأن هذه البنوك ستعمل على تشجيع الأمهات من أجل تقديم ألبانهن لها، كما أن الحاجة، وارتفاع تكاليف المعيشة، وضيق ذات اليد عند كثير من الأمهات، قد يدفع بهن كل ذلك إلى بيع

<sup>١٤</sup> وقد أقر ذلك المجمع الفقهي لمنظمة المؤتمر الإسلامي الذي عقد مؤخراً بجدة، راجع جريدة

الأخبار - العدد رقم ١٠٧٤٥ الصادر يوم الجمعة ٢٤/١٠/١٩٨٦ - ص ٦.

ألبانهم لتلك البنوك<sup>١٥</sup>، وحرمان أولادهم منها، فكل ما ستؤدي إليه هذه الفكرة أنها سترضع فئة من الأطفال على حساب فئة أخرى هي الألق بالرضاع والأولى به شرعا وطبعا وعقلا، وفي ذلك من المفسدة ما هو أكبر من المصلحة، وأقل ما فيه من فساد انه يقدم أمرا على حساب الأهم، ولا يخفى ما في تلك الفكرة من اضطراب وفساد. كما أن الفكرة سترتب عليها كثير من الأضرار النفسية والأدبية في مقتبل حياة الطفل ومستهل رجولته، وطوال عمره، حين يتسع نطاقها، فيشمل كثيرا من الدول، وفي ظل هذا الاتساع ستعمل كل دولة على مساعدة الأخرى ومنها بلاد الإسلام، بفائض ألبان نسائها، وقد يترتب على هذا أن يطعم الطفل لبن امرأة كافرة أو زانية أو فاجرة، فتكون أما له وبالتالي يظل عارها يلاحقه طوال حياته. والرضاع من الأم المشتركة يجعلها أما لها حرمة الأم مع شركها، وربما مال إليها الرضيع في محبة سلوكها المشين، ولهذا كره الرضاع بلبن الحمقاء كيلا يشبهها الولد في الحمق، فانه يقال إن الرضاع يغير الطباع<sup>١٦</sup>، وفي ذلك من الأضرار ما يهدد مستقبل الرضيع، ويوجب حمايته منها ولن يتأتى ذلك إلا من خلال سد الذرائع أمام هذه الفكرة، وقطع أسباب وجودها.

### ثالثا: بيئة الفكرة غير إسلامية :

وإذا كان لمثل هذه الفكرة وجود في كثير من المجتمعات الأوروبية، فان وجودها في مثل تلك الدول قد يكون له مبرر عند أهلها، لأنهم لا

<sup>١٥</sup> دكتور السيد عبد الحكم عبد الله-نفس المراجع-ص ٨٥.

<sup>١٦</sup> المعنى لابن قدامة -ج٧- ص ٥٦٢.

يعرفون الحلال والحرام، ولا يعرفون ما شرعه الإسلام لمصلحة الطفل وإرضاعه من أحكام، ومن ثم فإنهم قد ابتدعوها كأي فكرة بعيدة عن هدية، دون وازع من دين، أو ضابط من عقيدة<sup>١٧</sup>. أما نحن فإننا نملك البديل الشرعي كما أن عندنا التوجيه الإلهي وهو الرضاع المنظم شرعا بآثاره وأحكامه، وبالتالي فإن مكان هذه الفكرة غير أرضنا الطيبة ومجتمعنا المسلم، لأنها لا تصلح فيه، ذلك من زاوية المصلحة والعقل والمنطق، وذلك هو المهم، أما الأهم منه فضلا عن هذا وذلك: تتعارض مع القواعد الشرعية التي تتأى بها عن المشروعية وتجعلها وسيلة لاستباحة ما حرمه الله تبارك وتعالى، وذلك هو الادمي والأخطر، فالفكرة تتعارض مع أحكام الشريعة الإسلامية، وتتطوي على كثير من وجوه الحرمة فيها، وذلك ما نود أن نبرزه في هذا المقام.

### أولاً: الفكرة تتعارض مع أحكام الشريعة:

ورغم أن فكرة إنشاء بنك للبن الأمهات عديمة الأهمية وليس لها ما يبرر وجودها فضلا عن مجافاتها لمصلحة الطفولة ورعايتها، وهو الشعار الذي رفعه مروجوها، وعدم ملاءمتها لتربيتنا المسلمة، فإنها تتعارض مع أمر معلوم من الدين بالضرورة، وهو حرمة المصاهرة بسبب الرضاع، وفي ذلك ضياع للنسب واختلاط للأنساب، وقد يترتب

<sup>١٧</sup> وفي هذا المعنى يقرر المجمع الفقهي لمنظمة المؤتمر الإسلامي: إن التجربة قامت في بعض الدول الغربية وسرعان ما ظهر الكثير من سلبياتها الفنية والعلمية فانكشفت وقل الاهتمام بها، راجع: جريدة الأخبار - المكان السابق.

عليها أن يتزوج الرجل أمه من الرضاع أو أخته وفي هذا مخالفة لنصوص الكتاب والسنة وإجماع الأمة.

### ١. أما الكتاب :

فيقول الله تعالى في آية المحرمات: ﴿ وَأُمَّهَاتُكُمُ اللَّاتِي أَرْضَعْنَكُمْ وَأَخَوَاتُكُم مِّنَ الرَّضَاعَةِ ﴾<sup>١٨</sup>، حيث نص على تحريم الأمهات والأخوات من الرضاع، كما دلت الآية على تحريم غيرهما بطريق الإشارة. لان الله تعالى، لما سمى المرأة التي قامت بالإرضاع أمًا، وسمى أولادها بأخوات الرضيع دل ذلك على وجود الصلة التي تربط بين هذا الرضيع وبين هذه الأصناف كلها على أساس الجزئية التي حدثت عن طريق الرضاع فيكون له حكم التحريم بالنسب<sup>١٩</sup>.

### ٢. وأما السنة :

فقد وردت بها الأحاديث الكثيرة التي تدل على حرمة المصاهرة بالرضاع، اقتصر منها على ما رواه الإمام علي رضي الله عنه عن النبي - صلى الله عليه وسلم - انه قال: إن الله حرم من الرضاع ما حرم من النسب<sup>٢٠</sup>، حيث دل هذا الحديث الشريف على ما ذهب إليه الآية الكريمة، من أن الرضاع يترتب عليه حرمة المصاهرة وذلك حكمه وتلك هي آثاره.

<sup>١٨</sup> سورة النساء - آية ٢٣.

<sup>١٩</sup> دكتور محمود الطنطاوي - المرجع السابق - ص ١٠٨.

<sup>٢٠</sup> نيل الاوطار للشوكاني - ج ٦ ص ٣١٧ وما بعدها.

### ٣. أما الإجماع :

وقد دل الإجماع على أن الرضاع محرم للمصاهرة في الجملة وأنه يحرم منه ما يحرم من النسب، وقد حكى هذا الإجماع ابن رشد حيث قال: " اتفقوا على أن الرضاع بالجملة يحرم منه ما يحرم من النسب"<sup>٢١</sup>، وهكذا دلت النصوص الشرعية من كتاب الله تعالى وسنة نبيه صلى الله عليه وسلم، وإجماع الفقهاء على أن الرضاع يحرم منه ما يحرم من النسب، ولا شك أن إنشاء بنك للبن الأمهات ينطوي على مجافاة لتلك النصوص الشرعية ومخالفة لأحكامها، وبالتالي فإنه سيكون وسيلة لارتكاب المحرم متمثلاً في تبيد النسل واختلاط الأنساب وضياع الحقوق، وشيوع الفاحشة، ووجود أولاد من حرام، وذلك حرام، وما يؤدي إلى الحرام يأخذ حكمه وذلك بناء على قاعدة أن الوسيلة إذا كانت مغضية إلى مفسدة أخذت حكمها من تحريم أو كراهية<sup>٢٢</sup>، وبالتالي يكون حكم إنشاء مثل هذا البنك وفقاً لتلك القاعدة الفقهية حراماً، ذلك أن أقل ما فيه يتعارض مع أمر معلوم من الدين بالضرورة.

### ثانياً: وجوه التحريم في بنوك اللبن :

ولا شك أن أحكام الشريعة يجب أن تراعى في روحها وأهدافها ومقاصدها لأن الله سبحانه وتعالى حين يحرم علينا أمراً إنما يحرمه لمصلحة مؤكدة تعود علينا من وراء ذلك التحريم سواء باننا علته

<sup>٢١</sup> بداية المجتهد، ونهاية المقتصد - ج ٢ ص ٣٥ - مطبعة الاستقامة.

<sup>٢٢</sup> راجع: ابن القيم - أعلام الموقعين - ج ٣ ص ١٤٧ - الطبعة الأولى مطبعة الاستقامة. والموافقات للشاطبي - ج ٤ ص ١١٢ المطبعة السلفية - ومحمد سلام مذكور - المدخل للفقه الإسلامي - ص ٢٤٢ ومل بعدها - الطبعة الرابعة - دار النهضة العربية.

أو خفيت علينا، ومن ثم وجب الاحتياط في هذه المسائل بالبعد عن شبهة الحرام فيها ومنها الرضاع الذي يحرم منه ما يحرم من النسب، ومن المؤكد أن التساهل في أمر الإرضاع والابتدال فيه، يتضمن تجاسرا على أحكام الله، وجرأة على مقاصد شريعته، ومخالفة لكتابه، وسنة نبيه وإجماع الفقهاء وما هو معلوم من الدين بالضرورة.

### ١. حقيقة الرضاع في الشريعة الإسلامية :

ولا يقلل من خطورة التحريم بالرضاع أن يتعسف البعض فيقصر التحريم به على ما كان عن طريق الثدي، إذ أن حقيقة الرضاع كما عرفه الفقهاء، هو اسم لحصول لبن امرأة أو ما حصل منه في جوف طفل<sup>٢٣</sup>. وقد عرفه الدسوقي في حاشيته على الشرح الكبير بقوله : حصول لبن امرأة للجوف ولو شكا للاحتياط<sup>٢٤</sup>، ويتضح من خلال هذا التعريف للرضاع، انه يسوي بين حصول الطفل على اللبن بطريق الثدي أو بغيره كتناوله بواسطة البزازة أو الكوب أو الملعقة، كما يسوي بين حصوله على اللبن سائلا أو غير سائل كان يتناوله جينا أو زبادي أو مجففا أو غيره، وعلى هذا فان فكرة إنشاء بنك اللبن سيؤدي إلى تناول الطفل لغير لبن أمه ممن جمع اللبن منهن بطريق مباشر أو غير مباشر وبالتالي تتعلق به الحرمة في كل الصور احتراماً للحكم في اللبن الصافي، وبعدا عن الشبهة في المختلط بغيره أو الذي خرج عن طبعه بأي وجه من الوجوه، فان سائر الوسائل غير مص الثدي

<sup>٢٣</sup> دكتور عبد الفتاح حسيني الشيخ- حكم الدين في إنشاء بنك اللبن الأمهات -فتوى موجودة بكلية الشريعة والقانون بالقاهرة.

<sup>٢٤</sup> حاشية الدسوقي على الشرح الكبير - ج ٢- ص ٥٠٢ وما بعدها.

تأخذ حكمه، لأنها تصل بالبن إلى جوف الطفل ويحصل بها إنبات اللحم وانشاز العظم، فوجب أن تأخذ حكمه وهو التحريم<sup>٢٥</sup>.

### إذا اجتمع الحلال والحرام غلب الحرام :

والقول بهذا الحكم هو الذي يجب أن يكون لان فيه حيلة في الدين، وبعدا عن مواطن الحرام وشبهته، كما انه هو الذي يتفق مع القواعد الكلية للفقهاء الإسلامي، حيث أن الشيء إذا تردد بين الحل والحرمة كان جانب التحريم أولى، ومن القواعد المقررة في هذا الصدد، انه إذا اجتمع الحلال والحرام في شيء غلب الحرام<sup>٢٦</sup> الأمر الذي يرجح جانب التحريم عند من يشتبهون في حرمة.

### ما يوصل إلى الحرام يأخذ حكمه :

والتعامل مع بنك اللبن على فرض وجوده حرام سواء كان بعوض أم بغير عوض أي عن طريق التبرع، لأنه سيكون وسيلة إلى ارتكاب محذور، لان السيدات اللاتي يقمن بإعطاء لبنهن للبنك سيقعن ضحية للجهالة ولن يعرفن وقتها مصير ألبانهن، ولا من الذي تعاطاها من الأطفال، فنقع الحرمة ويختلط النسب وهذا حرام، فيأخذ ما يوصل إليه حكمه حتى ولو كان بذل اللبن من المرأة سبيل التبرع للبنك. فإذا أرادت بيعه وقع البيع باطلا عند جميع الفقهاء من منطلق الرجوع إلى قواعد الفقه الكلية التي تقر أن ما يوصل إلى الحرام يأخذ حكما سدا

<sup>٢٥</sup> دكتور عبد الفتاح حسيني الشيخ- المرجع السابق.

<sup>٢٦</sup> الأشباه والنظائر- لابن نجيم- ص ١٠٩- مؤسسة الخليلي سنة ١٩٦٨م، والأشباه والنظائر للسيوطي-ص ١٠٥ وما بعدها- الطبعة الأخيرة شركة مصطفى الخليلي.

لذريعة الفساد والإفساد، فلا يعقل أن يقرر أحد الفقهاء جواز بيع لبن المرأة، وهو يعلم انه سيكون ذريعة لاختلاط الأنساب وانتهاك ما حرمة الله، لا يمكن أن يقرر أحد الفقهاء ذلك فيضع نفسه في موقف حرج مع ربه حين يجيء وأي هذا مخالف لكتاب الله تعالى وسنة نبيه صلى الله عليه وسلم وإجماع الأمة في تحريم المصاهرة بالرضاع، أقول: لا يعقل ولا يمكن أن يتصور هذا.

والمسألة واضحة في مذهب أبي حنيفة، وقد جاء فيه انه لا يجوز بيع لبن امرأة في قح<sup>٢٧</sup>، إذ هو جزء من الأدمي مكرم مصون عن الابتدال بالبيع<sup>٢٨</sup>، ولان الإجماع قد انعقد على أن اللبن ليس بمال فلا يجوز بيعه<sup>٢٩</sup>، كما أن اللبن لا يباح الانتفاع به شرعا على الإطلاق، وإنما لضرورة تغذية الطفل، وما ينتفع به إلا على وجه الضرورة لا يكون ما لا فلا يجوز بيعه بوجه<sup>٣٠</sup>.

وإذا كان بعض الفقهاء قد أجاز بيعه للضرورة<sup>٣١</sup>، فانه لا يقصد مطلقا أي وجه لمشروعية قيام هذا البنك، لأنه لا يعقل كما قررنا أن يخرق بمثل هذا الرأي الحرمة الواضحة ويستحل ما حرمة الله بالرضاع، فان التحريم به ثابت بإجماع الفقهاء، ولا يمكن أن يخالف أحد الفقهاء ما اجمع عليه، وإنما الفهم السليم لمثل تلك الإجازة لهذا اللون من

<sup>٢٧</sup> وهذه أحد جوانب التعامل مع هذا البنك المزعوم.

<sup>٢٨</sup> فتح القدير - للكمال بن الهمام - ج ٥ ص ٢٠١ والهداية عليه، شرح العناية عليه للبايرني، نفس المكان السابق، وسعد حلي نفس المكان.

<sup>٢٩</sup> بدائع الصنائع للكاساني - ج ٥ ص ١٤٥.

<sup>٣٠</sup> المرجع والمكان السابقين.

<sup>٣١</sup> راجع: بداية المجتهد - ج ٢ ص ١٢٧، ومغنى المحتاج - ج ٢ ص ٣٣٤ وما بعدها، والمغنى

والشرح الكبير عليه - ج ١ ص ٧٤.

التعامل باللبن لا يتعدى حالات نادرة، كما لو كان الطفل على شفا الهلاك، وامتنعت المرأة عن بذله إلا بمقابل مثلاً، وحتى في هذه الصورة النادرة، فإن الضرورة غير قائمة في حق من بذلته فيكون تصرفها حراماً، ومثل حالات الضرورة هذه غير موجودة في زماننا، بعد أن تنوعت أساليب التغذية، وتعددت أنواع الألبان التي تحقق تلك الغاية، ومن ثم لم يبق لمثل هذه الحالات أدنى تصور في وقتنا، وذلك الفهم هو الذي يستقيم قياساً على ما تصبوا إليه في مسائل مشابهة حيث قرروا بطلان صور مشروعة من البيع لما يترتب عليها من غاية فاسدة مثل بيع السيف لمن يعلم انه سيقتل به أو العنب لمن يتخذه خمرًا وهكذا<sup>٣٢</sup>.

<sup>٣٢</sup> راجع: حاشية الدسوقي على الشرح الكبير - ج ٢ - ص ٥٠٣ حيث يقول: "لو خلط لبن امرأة بلبن أخرى صار ابناً مطلقاً لهما تساويًا أم لا" وراجع: نفس المرجع - ج ٣ ص ١٥ حيث يقول: "من شروط المعقود عليه عدم حرمة لبيعه"، وتبين الحقائق للزيلي - ج ٦ ص ٢٩، وراجع: مغني المحتاج - ج ٢ ص ٣٧-٣٨ حيث يقول: "ولا يجوز بيع الرطب والعنب لعاصر الخمر، أي لمتخذها كذلك بان يعلم فيه ذلك أو يظنه غالباً، ومثله بيع الغلمان المرد "البيض" من عرف بالفسوق والفجور وبيع السلاح من باغ وقاطع طريق ونحوها وكذلك كل تصرف يفضي إلى معصية". والمغني لابن قدامة ج ٤ ص ٢٢، حيث يقرر: ولا يجوز شراء ما فيه شبهة لوجود الحلال والحرام فيه. والروضة الندية شرح الدرر البهية - للفتوح البخاري - ج ٢ ص ٩٩، حيث يقول: ولا يجوز بيع العصير إلى من يتخذه خمرًا. وهكذا تواترت نصوص الفقهاء على بطلان صور كثيرة من البيع، لما تؤدي إليه من فساد، أو غاية خبيثة تتصل بأمر محرم في الإسلام ومثل ذلك من تقوم ببيع لبنها حيث يترتب عليه فساد كبير يتصل باختلاط الأنساب وانتهاك حرمة الرضاع، وهو ما سيقوم به ذلك البنك المزعوم، ومما تجدر الإشارة إليه، إن المجتمع الفقهي لمنظمة المؤتمر الإسلامي قد انتهى بعد مناقشات فقهية وطبية إلى منع إنشاء بنوك لبن الأمهات في العالم الإسلامي وحرمة الرضاع منه، راجع: الأخبار المشار إليه.

### عمل غير صالح، وغير إسلامي :

وعلى هذا النحو يكون إنشاء هذا البنك عملاً غير إسلامي، ولا يتواءم مع أحكام ديننا الحنيف الذي تقرر تحريم المصاهرة بالرضاع، وهو لا يتعدى في فكرته وفي دوافعه، وفي الغايات التي تهدف إلى تحقيقها، أقول: لا يتعدى كونه فكرة خبيثة تستهدف الإطاحة بجانب حيوي من جوانب شريعة الله التي تصون النسب وتحفظ الأعراض، وتقيم الحقوق على أساس من الطهر والمشروعية ولهذا فإنه يكون حراماً والله اعلم.

# الطبيب أدبه وفقهه

## تأليف

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الدار الشامية  
بيروت

دار القلم  
دمشق

١٩٩٣

## الفصل الثامن

### بنوك الحليب (اللبن)

#### تمهيد:

ظهرت في السبعينات من القرن العشرين في أوروبا والولايات المتحدة فكرة بنوك الحليب، بعد أن انتشرت من قبل مجموعة من البنوك، مثل بنوك الدم، بنوك القرنية، وبنوك المنى وبنوك الأعضاء. وتتخلص الفكرة: في جمع اللبن من أمهات متبرعات (أو بأجر) يتبرعن بشيء مما في أثنائهن من اللبن، إما لكونه فائضا عن حاجة أطفالهن... وإما لكون الطفل قد توفي وبقي في الثدي اللبن. ويؤخذ هذا اللبن بطريقة معقمة من المتبرعة، ويحفظ في قوارير معقمة بعد تعقيمه مرة أخرى في بنوك الحليب. ولا يجفف هذا اللبن بل يبقى على هيئته السائلة حتى لا يفقد ما به من مضادات الأجسام (Antibodies) التي توجد في اللبن الإنساني، ولا يوجد مثلها في لبن الحيوانات مثل الأبقار والجواميس والأغنام.

#### ١. أهمية بنوك اللبن:

وتأتي أهمية هذا اللبن من الآتي:

١. احتوائه على العناصر المناسبة للطفل للإنساني.
٢. احتوائه على مضادات الأجسام (Antibodies) وأجسام المناعة (Immunebodies).

٣. عدم وجود حساسية منه للطفل، كما قد يحدث في ألبان الأبقار أو الجواميس أو الأغنام أو الماعز.
٤. لبن الأمهات يحمي الأطفال من مختلف أنواع الاخماج (Infections) (الالتهابات) التي تصيب الجهاز الهضمي، والجهاز التنفسي، وغيرهما من الأجهزة.
٥. لبن الأمهات وخاصة اللبا الذي يحتوي على خلايا المناعة، بكمية كبيرة، كما يحتوي على كمية كبيرة جدا من اجسام المناعة، وخاصة من نوع (IGA) الذي يلعب دورا في حماية الجهاز الهضمي والتنفسي للطفل.
٦. لبن الأمهات يحتوي على نسبة من الزنك، بينما لبن الأبقار أو الجواميس أو غيرها من الحيوانات لا تحتوي على الكمية الكافية منه. ولذا فان الأطفال الذين ينشأون على لبن غير إنساني يتعرضون لاحتمال الإصابة بأعراض نقص الزنك التي تؤدي إلى حدوث أعراض جلدية، إما حادة، أو مزمنة متمثلة في بثور وطفح جلدي، وسرعان ما يمتلأ بالصدید، أو الدم وخاصة في مخارج الجسم: حول الفم والشرج وفي الأطراف. ويصحب ذلك إسهال قد يكون شديدا. لهذه الأسباب ولغيرها يدعو الأطباء الأمهات إلى إرضاع أطفالهن، لما يشمله من فوائد عديدة للطفل والأم على السواء.
- وبما أن الأم قد لا تستطيع إرضاع طفلها لنضوب لبنها، أو لوجود مرض معدي، أو لأي سبب من الأسباب التي تمنع الإرضاع، مثل وجود خراج بالثدي، فان البديل لذلك هو إيجاد مرضعة.

وبما أن المرضعات قد اختفين من الوجود في المجتمعات الغربية (أوروبا وأمريكا) وكثير من بقاع العالم، لذا ظهرت إلى السطح فكرة تكوين بنوك الحليب.

وتعتمد هذه الفكرة على تجميع اللبن الفائض أو غير المرغوب فيه من الأمهات المتبرعات، وحفظه حفظاً جيداً في ثلاجات خاصة، ثم إعطائه مجموعة من الأطفال هم في أشد الحاجة إليه، ومع ذلك فإن أمهات هؤلاء الأطفال لا يستطعن القيام بإرضاعهم.

## ٢. لمن يستخدم لبن البنوك؟

وهؤلاء الأطفال هم:

أ. الأطفال الخدج (Premature babies):

أي الذين ولدوا قبل الميعاد (أقل من تسعة أشهر)، وكلما كان ذلك أقل من التسعة أشهر، كلما كانت حاجة الطفل أكبر.

ومن المعلوم أن الأطفال الذين قد جاوزوا ستة أشهر، يمكن أن يعيشوا، وعلى هذا حكم الشرع، وهو الحكم الذي استنبطه الإمام علي رضي الله عنه عندما ولدت امرأة بعد زواجها بستة أشهر، فعرضت على عثمان رضي الله عنه. فأراد أن يتهمها بالزنا لاتهام زوجها لها بذلك، فأبان له الإمام أن حملها وولادتها ستة أشهر ممكنة وذلك لقوله تعالى: «وَحَمْلُهُ وَفِصَالُهُ ثَلَاثُونَ شَهْرًا».

وقال تعالى: «وَفِصَالُهُ فِي عَامَيْنِ»

كما قال تعالى: «وَالْوَالِدَاتُ يُرْضِعْنَ أَوْلَادَهُنَّ حَوْلَيْنِ كَامِلَيْنِ لِمَنْ أَرَادَ أَنْ يُتِمَّ الرَّضَاعَةَ».

فتبين من ذلك أن أقل الحمل ستة أشهر.

ب. الأطفال ناقصو الوزن عند الولادة (Small for date):  
رغم انهم قد اكملوا مدة الحمل الطبيعية تسعة اشهر ( ٢٨٠ يوما من  
آخر حيضة حاضتها المرأة أو ٢٦٦ يوما منذ التلقيح)، قد تزيد قليلا  
أو تنقص.

ج. الالتهابات الحادة التي قد تصيب الطفل:  
والانتانات تجعله في حاجة شديدة للبن إنساني لما يحتويه من مضادات  
الأجسام.

لهذه الأسباب قامت فكرة بنوك اللبن.. والقصد منها إنقاذ مجموعة من  
الأطفال الذين يحتاجون بصورة خاصة للبن الإنساني في الوقت الذي  
لا تستطيع فيه أمهاتهم أن يقمن بالرضاعة. ولا يوجد في هذه  
المجتمعات مرضعات باجر أو بغير اجر يقمن بهذا العمل الإنساني  
النبيل.

### ٣. بنوك الحليب في الولايات المتحدة :

هذه الفكرة قامت ونفذت بالفعل في أوروبا والولايات المتحدة. وهي  
فكرة لها ما يبررها من الناحية العملية، وخاصة في أوروبا وأمريكا.  
ومع هذا فان بنوك اللبن قد انكشفت بصورة خاصة في الولايات  
المتحدة.

يقول الدكتور ماهر حتوت (رئيس قسم الأمراض الباطنية بأحد  
المستشفيات الجامعية بالولايات المتحدة):

"إن حجم المشكلة اصغر مما قد تم تصويره ابتداءً: لان الألبان  
الصناعية (الحيوانية) تكفي، وانحصر الاستعمال لمن لهم حساسية  
خاصة للألبان الصناعية أو لمن لا يستطيعون هضمه. ونسبة الأطفال

الخدج حوالي ٧% من المواليد. من هؤلاء اقل من ١% من ال ٧% (الذي يحتاجون للبن الإنساني) وقد قمت بالاتصال ببنوك الألبان. فلقد انكمش إلى ثلثه في الولايات المتحدة، ثم اتصلت بمستشفى الأطفال في لوس انجلوس للسؤال عن عدد المرات التي استخدموا فيها بنوك اللبن في العامين الأخيرين فكان العدد صفراً. ولذلك فإن المشكلة صغيرة ومنكمشة. ولكن الاحتمال موجود ومطروح. وقد تختفي المشكلة ثم تظهر بعد ذلك.

وكنت قد قمت بسؤال مجموعة من أطباء الأطفال العاملين في الولايات المتحدة عندما كنت في زيارة لها في يناير ١٩٨٣ فذكروا لي أن بنوك الأطفال في الولايات المتحدة في مرحلة الاحتضار وذلك للأسباب التالية:

١. الحاجة إليها نادرة.
٢. تكلفتها عالية جداً.
٣. ندرة الأمهات المتبرعات باللبن.
٤. يتعرض اللبن المتجمع للفساد مع الزمن، رغم حفظه في البنيك، فهو معرض لإصابته بالميكروبات، كما انه معرض لتحلل بعض المواد الموجودة فيه، فيفقد بذلك بعض مزاياه وفوائده.

#### ٤. ما هي محاذير استعمال بنوك اللبن ؟

١. إن أول هذه المحاذير التي ينبغي أن نركز عليها في المجتمعات الإسلامية هو المحذور الديني، وذلك أن جمع اللبن من أمهات متعدّدات وخلطه، ثم إعطائه الأطفال يؤدي إلى عدم معرفة مَنْ مِنَ النساء ارضعن مَنْ مِنَ الأطفال؛ فإذا حدثت الجهالة فقد يؤدي ذلك إلى

أن يتزوج الأخ أخته من الرضاع، أو خالته، أو عمته، والرسول صلوات الله عليه يقول: "يحرم من الرضاع ما يحرم من النسب" وسناقش فيما بعد بإيجاز أقوال الفقهاء المحدثين والسابقين في هذا الموضوع الحساس.

٢. إن بنوك اللبن حتى في البلاد المتقدمة تقنياً مثل الولايات المتحدة، محفوفة بمجموعة من المحاذير التي سبق الإشارة إليها، وهي أن كلفتها عالية جداً وإن اللبن المتجمع يتعرض إما لإصابته بالميكروبات، وإما لفقدان بعض خصائصه وميزاته، نتيجة تحلل المواد الموجودة فيه، مع تقادم الزمن. ولندرة الحاجة إليه.

٣. إن بنوك اللبن في البلاد النامية تتعرض لهذه المصاعب بصورة اشد واعتى، لأن درجة التقنية والنظافة أقل بكثير مما هي عليه في الغرب، بالإضافة إلى كونها باهظة التكاليف جداً بالنسبة للبلاد الفقيرة، وتعتبر غير ذات فائدة كبيرة لتعرض اللبن إلى الإصابة بالميكروبات، ولتحلل مواده الهامة بالتخزين الطويل.

يقول الدكتور ممدوح جبر وزير الصحة السابق في مصر، وأستاذ طب الأطفال ورئيس نقابة الأطباء: "إن الفكرة تطرح في مصر قليلاً جداً. ولدى فئة متخصصة قليلة، وهي المهمة بشؤون الأطفال المبتسرين (أي الخدج) لأنهم يحتاجون بشدة إلى الرضاعة الطبيعية. ولا يمكن للطفل من الحصول المباشر عليه.. ولكن رغم أن الفكرة (أي فكرة بنوك الحليب) تم تنفيذها في بعض البلدان الأوروبية، وفي

أمريكا، وتحقق نجاحا كبيرا هناك (سبق أن قلنا: إن بنوك الحليب في الولايات المتحدة تحتضر) إلا أنه يصعب تنفيذها هنا داخل مصر، أولا لان الرضاعة الطبيعية ليس فيها مشكلة في مصر لان نسبة ٨٥% من الأمهات المصريات يرضعن أبناءهن رضاعة طبيعية، والباقي توفر له الحكومة الألبان الطبيعية (أي المرضع)، والباقي توفر له الحكومة الألبان الصناعية المناسبة، وبعض البدائل الأخرى من الرضاعة.

ثانيا، تنفيذ المشروع يحتاج إلى تكاليف مرتفعة جدا إذا أردنا توفيره للأطفال العاديين، لان طريقة جمع اللبن نفسها سوف تحتاج إلى كثير من الجهد والوقت، كما أن عمليات التعقيم والتبخير والحفظ تحتاج إلى كثير من العمليات، وكثير من التكلفة، حتى تصل إلى الطفل الثاني الذي سوف يحصل على هذا اللبن، إلى جانب أن طريقة إعطاء اللبن للطفل أيضا سوف تعرضه إلى التلوث، إما عن طريق الرضاعة التي سيتناول بها أو عن طريق الماء وغيره".

ويقول الدكتور مصطفى حمامي وكيل وزارة الصحة للرعاية الأساسية: "إن الفكرة تطبق في الخارج على اعتبار أن لبن الأم هو أعلى قيمة غذائية يمكن أن تعطى للطفل، وأنه إذا أمكن توفيره لدى أم أخرى لا تحتاج إليه في إرضاع طفلها يأخذه طفل آخر. ولكن في مصر يصعب جدا تنفيذ الفكرة على أساس أن أقصى كمية يمكن أن تجمع من الأم الجيدة الإدرار يوميا لا تزيد عن لتر واحد من اللبن. فهل تكفي هذه كمية لإرضاع طفل آخر أو حتى طفلين. ثانيا: إن من أهم أغراض الإرضاع هو تحقيق الارتباط بين أم وطفل، وتوفير جو من الحنان له. وهذا طبعا لا يمكن تحقيقه عن طريق البنك. وأيضا

كيف توفر الأم التي ستعطينا اللبن؟ هل ستكون متبرعة إذا مات طفلها أو فطم؟ وهل ستولي طفلا إن كان صحيا يحتاج بشدة هذا اللبن عن طفلها. كل هذه الأسئلة مطروحة أمام فكرة التنفيذ. وكيف سيودع هذا الحليب؟ هل سيودع في المستشفيات للحالات الخاصة والمحتاجة بشدة له، أم سيمنح للقادرين ماديا والذين يستطيعون الحصول عليه".

ويقول الدكتور عبد الصادق حامد الأعرج المدرس بكلية الطب في بنها بعد أن ذكر فوائد الرضاعة الطبيعية: "فهل تستطيع الأم مشاركة طفلها مع آخر يوفر له الحماية الضرورية عن طريق البنك، أم انه سوف يتحول إلى نوع من التجارة واستغلال إمكانيات الفقيرات وتوجيهها إلى الأغنياء، مما يضعف هؤلاء الأمهات ويؤثر تأثيرا مباشرا على صحتهن، وصحة من يرضعن من أطفالهن، إلى جانب انه ثبت علميا أن نسبة حدوث النزلات المعوية في الرضاعة الصناعية خمسة أضعاف الرضاعة الطبيعية، فهل تحقق الفكرة القضاء على النزلات المعوية كعلاج؟".

ويقول الدكتور علي فهمي بالمركز القومي للبحوث الاجتماعية والجنائية بالقاهرة: "انه لو دخل هذا المشروع نطاق التنفيذ فسيكون فاشلا، وسيخلق جيلا فاشلا اجتماعيا لا يمكن أن يتكيف مع المجتمع، والبيئة التي يعيش فيها. وبالتالي سيخلق جيلا ضعيفا مليئا بالأمراض والأوبئة لأنه سيحرم كثيرا من الأطفال الأصليين أبناء هؤلاء الأمهات اللاتي سيتعاملن مع هذا البنك، مما سيترتب عليه حرمان هؤلاء الأطفال من حقهم الطبيعي في الغذاء، مقابل بيع هذا اللبن، كما سينتج عنه تشجيع كثير من الأمهات على امتنان هذه المهنة (مثل الاتجاه

بييع الدم) وسيكون هؤلاء الأمهات من الطبقات الدنيا التي لا شك أن لديهن كثيرا من الأمراض.

"ولا أتصور أن تكون هذه العملية إنسانية، لأنها تعمل على تشجيع الأمهات على الامتناع عن إرضاع أولادهن رضاعة طبيعية. هذا إلى جانب الناحية النفسية للطفل. فقد أكدت البحوث والدراسات أن تربية الطفل الرضيع ليست عملية تغذية فقط، إلا أنه إلى جانب ذلك تعطي للطفل جرعة من الإشباع في الحنان والحب والدفء والعطف من الأم".

ورغم أن الدكتور علي فهمي لم يفهم الفكرة الأساسية من بنوك اللبن، وهي إعطاء لبن إنساني للأطفال الخدج أو غيرهم ممن هم في حاجة ماسة إليه، وليس بديلا عن الرضاعة الطبيعية، وإنما هو حالة استثنائية لمن لا تستطيع أن ترضع طفلها المحتاج للرضاعة، إلا أن ما ذكره من احتمال وجود طبقة من الأمهات الفقيرات يبعن لبنهن في مقابل دريهمات، ويضعن أولادهن في خطر المسغبة، أو إعطاء أولادهن اللبن الصناعي (اللبن الحيواني)، مما يعرض هؤلاء الأولاد لمخاطر التغذية بالألبان الصناعية، إلا أن ذلك أمر وارد وخاصة في البلاد النامية، حيث رأينا أن التبرع بالدم قد تحول إلى تجارة حيث يقوم الفقراء والمحتاجون ببيع دمائهم لمراكز الدم.

أما الدكتور محمد فؤاد إسماعيل أخصائي حفظ وتبريد الألبان في مصر فيقول: "إن الله عز وجل كرم الإنسان وفضله على سائر مخلوقاته. وبتطبيق نظام بنك ألبان الأمهات (ومع تقديري للأمهات) إلا أنها تتمثل بالبقرة الحلوب أو الجاموسة أو النعاج بجمع لبنها،

وتعامل بوسائل الحفظ المختلفة من تبريد وتجفيف. هذه الطريقة لا يمكن أن يتقبلها الإنسان لا شكلا ولا موضوعا".

وقد قمت بسؤال بعض المختصين في هذا الموضوع، وهم الأستاذ الدكتور محمود حسن أستاذ طب الأطفال ورئيس قسم الأطفال بمستشفى الأطفال والولادة بجدة، والدكتور محمد أمين صافي الأستاذ المساعد بقسم الكائنات الدقيقة بكلية الطب جامعة الملك عبد العزيز، وصاحب عدة أبحاث في اللبن وخواصه المناعية، والدكتور احمد خالد حميدة الأستاذ المساعد بطب الأطفال بجامعة الملك عبد العزيز. وكانت خلاصة آرائهم تتفق في الآتي مع آراء كاتب هذه السطور:

١. لا توجد حاجة حقيقية لبنوك اللبن في البلاد الإسلامية بصورة خاصة، والبلاد النامية بصورة عامة. وذلك لانتشار الرضاعة من الأم، وإذا لم تتيسر الرضاعة من الأم فإن المرضعات لا يزلن بحمد الله موجودات. ولا تزال المجتمعات الإسلامية تعيش نوعا من التكافل والترابط الأسرى. ففي الأسرة الكبيرة التي عادة ما تضم العمات والخالات هناك أكثر من امرأة تستطيع الإرضاع في الأسرة فإذا تعذر على واحدة منهن إرضاع طفلها، كان هناك من القريبات، أو الجارات، أو الصديقات، من يقمن بهذا العمل الإنساني العظيم. وإذا تعذر ذلك كله، وهو نادر الحدوث فهناك أيضا المرضعات باجر أو غير أجر احتسابا للثواب عند الله تعالى.

٢. رغم أن الطفل الخديج (Premature baby) قد يبقى في مستشفى الأطفال لمدة شهر، بينما لا تستطيع أمه البقاء معه طوال هذه المدة لحاجة الأطفال الآخرين والزوج إليها، فقد وفرت المستشفيات النظام

الحديث الذي يطبق الآن في الغرب وفي المملكة، فهو يسمح للام بالحضور إلى المستشفى في الوقت المناسب لها عدة مرات يوميا، لإرضاع طفلها، وإذا لم تتمكن من ذلك، أمكن حضور العمّة، أو القريبة أو المتبرعة بالرضاعة فترضعه. وبذلك يحصل الطفل على فوائد الرضاعة كاملة، ويتجنب مزاللق وسيئات اللبن الصناعي، أو اللبن الذي جمع وحفظ في بنوك اللبن. كما أن المرضع تكون معروفة معلومة، فتصبح أما للطفل الذي أرضعته، ويصبح زوجها أباه، لأنه صاحب اللبن. وتعرف بذلك دائرة المحرمات من الرضاع.

٣. إن تنفيذ بنوك اللبن حتى في البلاد المتقدمة تعترضه المصاعب والعقبات، وهو مكلف، باهظ التكاليف، بالنسبة للبلاد النامية الفقيرة فإن إقامة بنوك اللبن أمر مكلف للغاية، إذا أريد أن يكون على المستوى الصحي المطلوب.

٤. في البلاد النامية هناك محاذير أخرى فبالإضافة إلى احتمال عدم التعقيم الجيد، وفقدان بعض المواد الهامة بالتخزين والحفظ، فإن هناك احتمالا لتحول الأمر إلى تجارة. وان تضطر الفقيرات المعدمات إلى بيع لبنهن وترك أولادهن للمسغبة أو لمستحضرات الألبان الصناعية.

٥. إن الأمهات المرضعات موجودات، واستبدال الأدنى بالذي هو خير، شبيه بما فعله بنو إسرائيل عندما طلبوا البصل والثوم والعدس وتركوا المن والسلوى.

٦. هناك احتمال إذا انتشرت هذه البنوك أن تتقاعس الأمهات السليمات والقادرات على الرضاعة، وخاصة الطبقة الثرية المترفة، أو الموظفات عن واجب الرضاعة، واستبدال ذلك اللبن الإنساني المأخوذ من بنوك اللبن على اعتبار انه يمثل اللبن الإنساني المطلوب، والأفضل بكثير من لبن الأبقار والجواميس والأغنام. وهذا بدوره يؤدي إلى عدة مخاطر ومحاذير وهي:

(أ) فقدان الفوائد الجمة للرضاعة للام، فالرضاعة تفيد الأم كثيرا، وذلك إن عملية مص الثدي تؤدي إلى إفراز مادة الاكسبرتوسين (Oxyrtocin) التي تساعد الأم على عودة الرحم إلى وضعه الطبيعي بعد الولادة. كما أن الرضاعة تساعد الأم الوالدة إلى عودة جسمها إلى وضعه الطبيعي، وتمنع بذلك الترهل، على عكس ما هو شائع من أن الرضاعة تسبب الترهل. فالرضاعة تساعد الأم في العودة إلى رشاققتها، كذلك فإن الرضاعة الطبيعية تساعد الأم على منع الحمل لفترة الرضاعة، وتجنبها أخطر حبوب منع الحمل أو اللوليب. هذا بالإضافة إلى الفائدة النفسية الهامة، لان عملية الإرضاع والزاق الطفل بالصدر، يعطي الأم فوائد جمة نفسيا وبدنيا. ويزيد من ارتباطها بطفلها.

(ب) الفوائد المتعددة للرضاعة للطفل لا تتحقق بأخذ اللبن الإنساني فقط، لان عملية الرضاعة بحد ذاتها تفيد الطفل في نموه النفسي والجسدي. والتقام الطفل الثدي يمنع عنه أذى الميكروبات، كما يمنع عنه أذى الاضطرابات النفسية المستقبلية. وتجعله متوازنا نفسيا، ومنسجما مع مجتمعه. وقد وجد أن الأطفال الذين لم يرضعوا من

أمهاتهم أكثر تعرضاً للانحرافات الخلقية، والنفسية، والأمراض العقلية، والسلوك الإجرامي.

(ج) إن عدم الرضاعة يؤدي إلى نقص إفراز اللبن من الثدي. وإن سحب اللبن من الثدي وحده لا يقوم مقام الطفل الذي يمص الثدي. وذلك لأن إفراز هرمون البرولاكتين الذي يزيد من إفراز اللبن مرتبط بعملية المص ذاتها.

(د) إن اللبن الإنساني المحفوظ في بنوك اللبن معرض للتلوث، إما عند جمعه، أو أن عملية التعقيم غير مجدية ولا كافية. أو — وهذا متوقع — عند تناوله إذ يعطى في قوارير تحتاج إلى تعقيم شديد، وهذا أمر قد تهمل فيه الأم التي تعطي طفلها اللبن.

وهذا ما يحدث عادة بالنسبة للألبان الصناعية إذ تكون هي في ذاتها معقمة، ولكن عدم التعقيم يأتي من جهل الأمهات، وطريقة تحضيرهن لهذا اللبن، وقد أدى ذلك كما تقول منظمة الصحة العالمية إلى إصابة أكثر من عشرة ملايين طفل بنوبات الإسهال سنويا في العالم الثالث. وإلى أن يموت نصفهم في كل عام نتيجة استعمال الألبان الصناعية. كما أن عدداً آخر تضعف مقاومتهم للأمراض التي تصيب الجهاز التنفسي نتيجة استخدام الألبان الصناعية فيؤدي ذلك إلى مزيد من الوفيات. وتقدر الهيئات الطبية أن حوالي عشرة ملايين طفل يلاقون حتفهم سنويا بسبب عدم إرضاع أمهاتهم لهم. ومعظم هذه المحاذير موجودة أيضاً في لبن البنوك الباهظة التكاليف.

هذا مجمل لأقوال الأطباء في موضوع بنوك اللبن، فما هو يا ترى قول أو أقوال الفقهاء في هذا الموضوع؟

## ٥. أقوال الفقهاء في بنوك اللبن:

رغم أن هذا الموضوع (بنوك اللبن) حديث جدا، ولم يكن موجودا في السابق بل انه غير موجود حتى الآن، سوى في مراكز معدودة في أوروبا والولايات المتحدة وبعض البلاد المتقدمة تقنيا ولا يوجد إلى الآن في بلاد المسلمين خاصة وبلاد العالم الثالث عامة لصعوبة تنفيذه ولعدم الحاجة له، أقول رغم أن هذا الموضوع حديث جدا إلا أن الفقهاء القدماء قد تعرضوا له بإسهاب في كتبهم عندما تحدثوا عن الرضاعة وسقي الطفل اللبن من غير النقام للثدي بل تعرضوا لتحويل اللبن إلى جبن أو جعله اداما في خبز وأكله. وهل يحرم ذلك؟ أي يجعل من تناوله من الأطفال يدخل في تحريم الرضاع (أي الأخت الأم الخالة العممة... الخ من الرضاع).

ولم يبحثوا ذلك فحسب بل بحثوا أيضا موضوع رضاع الكبير، وهل يسبب التحريم أم لا؟ كما بحثوا السعوط والحقنة.

ولا تنتج النية هنا إلى استعراض أقوال الفقهاء في هذا الباب فهو باب طويل من أبواب الفقه، ويهم الفقهاء تفاصيله، وما يهم الإنسان العادي الذي ليس من أهل الفقه مثلي هو مجمل أقوالهم في القديم والحديث.

## ٦. معنى الرضاع:

(أ) رأي الشيخ يوسف القرضاوي:

يقول الشيخ يوسف القرضاوي: " أما معنى الرضاع الذي رتب عليه الشرع التحريم، فهو عند جمهور الفقهاء، ومنهم الأئمة الثلاثة أبو حنيفة، ومالك، والشافعي، كل ما يصل إلى جوف الصبي عن طريق حلقه، مثل الوجور وهو أن يصب اللبن في حلقه، بل الحقوا به

السعوط، وهو أن يصب اللبن في انفه، بل بالغ بعضهم فالحق الحقنة عن طريق الدبر بالوجور والسعوط".

وخالف في ذلك كله الإمام الليث بن سعد، معاصر الإمام مالك ونظيره، ومثله الظاهرية، وهو إحدى الروائتين عن احمد. فقد ذكر العلامة ابن قدامة عنه روايتين في الوجور والسعوط، الأولى وهي أشهر الروائتين عنه والموافقة للجمهور هي أن التحريم يثبت بهما. أما الوجور فلأنه ينبت اللحم، وينشز العظم، فأشبهه الإرضاع. وأما السعوط فلأنه سبيل لفطر الصائم، فكان سبيلا للتحريم بالرضاع كالقم.

الرواية الأخرى: انه لا يثبت بهما التحريم لأنهما ليسا برضاع. ورجح صاحب المغني الرواية الأولى بحديث ابن مسعود عن أبي داود: "لا رضاع إلا ما انشز العظم وانبت اللحم".

(ب) رأي ابن حزم والظاهرية:

وخلاصة رأي ابن حزم والظاهرية: أن الرضاع لا يطلق إلا على ما امتصه الراضع من ثدي المرضعة بفمه فقط، قال ابن حزم في المحلى:

" وأما صفة الرضاع المحرم فإنما هو ما امتصه الراضع من ثدي المرضعة بفمه فقط. فأما من سقى لبن امرأة فشرب من إناء، أو حلب في فمه فبلعه، أو أطعمه بخبز، أو طعام أو صب في فمه، أو انفه، أو في أذنه، أو حقن به. فكل ذلك لا يحرم شيئاً، ولو كان ذلك غذاءه دهره كله. برهان ذلك قول الله عز وجل: ﴿ وَأُمَّهَاتُكُمُ اللَّاتِي أَرْضَعْنَكُمْ وَأَخَوَاتُكُم مِّنَ الرَّضَاعَةِ ﴾".

وقال رسول الله ﷺ: "يحرم من الرضاع ما يحرم من النسب".

(فلم يحرم الله ولا رسوله في هذا المعنى نكاحا إلا بالإرضاع، والرضاعة والرضاع فقط. ولا يسمى إرضاعا إلا ما رضعته المرأة المرضعة من ثديها في فم الرضيع... ولا يسمى رضاعة ولا رضاعاً إلا أخذ المرضع أو الرضيع بفيه الثدي وامتصاصه إياه. تقول: رضع يرضع رضاعا ورضاعة. وأما كل ما عدا ذلك مما ذكرنا فلا يسمى شيء منه إرضاعا، ولا رضاعة، ولا رضاعا. إنما هو حلب وطعام وسقاء وشرب وأكل وبلع وحقنة وسعوط وتقطير. ولم يحرم الله عز وجل بهذا شيئا).

واستطرد ابن حزم وافاض، ورد على الجمهور في احتجاجهم بقوله ﷺ: "إنما الرضاعة من المجاعة".

### (ج) رأي المذاهب الأربعة:

وخلاصة هذا الكلام أن المذاهب الأربعة وهي الشافعية والمالكية الحنابلة والحنفية يرون أن تناول خمس رضاعات (وهناك خلاف في العدد) مشبعات توجب التحريم بين المرضعة والرضيع، ويحرم بالتالي جميع ما يحرم بالنسب لقوله ﷺ: "يحرم بالرضاع ما يحرم بالنسب".

ولا فرق في ثبوت التحريم بالرضاع بين أن يرتضع الطفل من الثدي مباشرة أو أن يشرب لبن المرأة من الزجاجة بعد حلبه. حتى لو صار لبن المرأة جبنا أو مخيضا فإنه يثبت به التحريم عند الشافعية والحنابلة. وقال أبو حنيفة: إذا صار جبنا أو مخيضا لا يثبت التحريم لزوال الاسم. وهذا كله في لبن المرأة. أما لبن البهيمة فلا يتعلق به

تحريم أصلاً، كما يقول السيد عمر حامد الجيلالي في جوابه عن بنوك الحليب.

(د) المخالفون للمذاهب الأربعة من القدماء والمحدثين:

وقد شذ عن هذا الرأي الظاهرية، وعلى رأسهم ابن حزم، والليث بن سعد كما تقدم.

وأما من المحدثين فقد مال الشيخ يوسف القرضاوي في بحثه الطويل عن بنوك الحليب المقدم إلى ندوة الإنجاب بالكويت إلى رأي الظاهرية. وهو أن الرضاعة تستلزم شقين: تناول اللبن وتناول الثدي. ولم يوافق الشيخ يوسف القرضاوي الظاهرية في أن الرضاعة من الكبير توجب التحريم. ومال إلى رأي الجمهور بأن هذا كان خاصاً بسالم مولى أبي حذيفة. فقد كان سالم متبنياً لأبي حذيفة قبل أن يحرم الإسلام التبني. فلما حرم الإسلام التبني شق على أبي حذيفة وزوجته ذلك، فقد كانا يعتبران سالماً ابنتهما، ولم يكن لهما إلا بيت واحد حينئذ. قال رسول الله ﷺ لزوجة أبي حذيفة: "ارضعيه تحرمي عليه".

أخرجه مسلم وأبو داود، وتفصيل القصة رواها الإمام مالك في الموطأ وعبد الرزاق في مسنده. فحلبت له في إناء فشربه.

واتفق الجمهور على أن هذا كان خاصاً بسالم، وإن الرضاع المحرم لا يعتبر إلا ما انشز العظم، وانبت اللحم لقوله ﷺ: "لا رضاع إلا ما انشز العظم وانبت اللحم" [أخرجه أبو داود].

وأورد الشيخ يوسف القرضاوي حجة أخرى في أن لبن بنوك الحليب لا يحرم لأنه مختلط من أمهات كثيرات غير معلومات، وإن الشك يعتريه، وما دام الشك فيه لا يثبت الرضاع لأن الأصل عدم الرضاع.

وقد أفتى الشيخ عبد اللطيف حمزة مفتي مصر بأنه لا تحرم رضاعة أي طفل من لبن البنوك، واستند المفتي في قوله ذلك إلى مذهب أبي حنيفة الذي ينص على أن الرضاع لا يحرم إلا إذا تحققت شروطه، ومنها أن يكون اللبن الذي يتناوله الطفل لبن امرأة، وان يصل إلى جوفه عن طريق الفم، ولا يكون مخلوطا بغيره، كالماء، أو الدواء أو لبن الشاة، أو بجاف من أنواع الطعام، أو بلبن امرأة أخرى، فان خلط بنوع من الطعام، وان طبخ معه على النار، فلا يثبت التحريم باتفاق أئمة المذهب الحنفي. وإذا لم تمسه النار فلا يثبت به التحريم أيضا، عند أبي حنيفة سواء أكان الطعام المضاف غالبا أو مغلوبا، لأنه إذا خلط الجاف بالمائع صار المائع تبعا، فيكون الحكم للمتبوع والعبارة بالغلبة، ولو خلط لبن امرأتين فان العبارة للغلبة أيهما كان اكثر، فانه يثبت التحريم دون الآخر. وان استويا ثبت التحريم بهما.

والرضاع لا يثبت بالشك. ولا يحل اللبن رائبا أو جينا، فان تناوله الصبي لا تثبت به الحرمة، لان اسم الرضاع لا يقع عليه. وإذا صار اللبن جافا مسحوقا فقد زال عنه اسم اللبن، وإذا خلط بالماء بعد ذلك لم يعد محرما. وإذا جمع اللبن من نساء غير محصورات ولا متعينات بعد الخلط فلا مانع في رأي المفتي الشيخ عبد اللطيف حمزة من الزواج بين من تناولوا هذا اللبن، لعدم إمكان إثبات التحريم ولعدم تعيين من تبرعن باللبن.

أما إذا كان اللبن محفوظا على هيئته السائلة، ثم أعطي للأطفال فان عامل الجهالة يبقى دائما، ومن ثم لا يكون هناك مانع من الزواج بين الذين رضعوا من هذا اللبن المجهول.

وقد رد كثير من الفقهاء على المفتي الشيخ عبد اللطيف حمزة، والشيخ يوسف القرضاوي، وخالفوهما في الرأي المبيح، وذهبوا إلى الحرمة. وإلى رأي الجمهور، نذكر منهم عددا اشترك في ندوة الإنجاب بالكويت، وطالبوا بوضع احتياطات مشددة إذا دعت الحاجة القصوى إلى مثل هذه البنوك، ومنها، أن يكتب على كل قارورة اسم المتبرعة، ويسجل ذلك في سجل، ويكتب اسم الطفل الذي تناول هذا اللبن، ويسجل فيه الطفل، ويعلم أهل الطفل اسم هذه المرضعة. وبذلك ينتفي المحذور. نذكر من هؤلاء الشيخ بدر المتولي عبد الباسط أمين الموسوعة الفقهية بالكويت، والدكتور محمد الأشقر الخبير بالموسوعة الفقهية، والشيخ إبراهيم الدسوقي وزير الأوقاف في مصر، والدكتور عمر الأشقر الأستاذ بكلية الشريعة بالكويت، والشيخ عز الدين توني باحث بالموسوعة الفقهية والشيخ عبد الرحمن خالق بوزارة التربية والتعليم بالكويت، والدكتور زكريا البري مستشار بيت التمويل الكويتي، ومجموعة من الأطباء من بينهم الأستاذ الدكتور حسان تحتوت أستاذ أمراض النساء والولادة بجامعة الكويت.

ومن خارج الندوة أفاض الدكتور عبد الرحمن النجار في الرد على جواب مفتي مصر الشيخ عبد اللطيف حمزة. وقال: "إن هذا المشروع حرام شرعا. وليس هناك أدنى شبهة في حرمة هذا المشروع مع احترامي الشديد للرأي الذي أعلنه فضيلة الشيخ عبد اللطيف حمزة مفتي جمهورية مصر العربية، إلا أنني لا أوافق على هذا الرأي إطلاقا، لأن النص في التحريم كان صريحا. لأن مذهب الشافعية أقر غير ذلك وحرمه، وكان النص صريحا، وكما يحرم اللبن الباقي على أصل خلفته، يحرم بعد تغييره عن هيئة حالة انفصاله عن الثدي،

كالجبن، والزبد، وما عجن به دقيق، أو خالطه ماء، أو نحوه، وغلب اللبن على الخليط بأن ظهرت إحدى صفاته الثلاث، وهي الطعم، واللون، والرائحة، لوصل عين اللبن إلى الجوف، وحصول التغذية به، ويشترط في ثبوت التحريم في ذلك شرب الجميع فلو شرب بعضه متحققا انه وصل منه شيء إلى الجوف، كان بقي من المخلوط اقل من قدر اللبن حرم".

وبمثل هذا الرأي كتب إلى الأهرام الشيخ محمد حسام الدين رئيس الإدارة المركزية لمكتب شيخ الأزهر.

وقد ذكر السيد محمد احمد الشاطري في رده على الأسئلة الموجهة إليه من قسم الطب الإسلامي بجامعة الملك عبد العزيز بعد أن افاض في موضوع الرضاع وأقوال الفقهاء في ذلك قال: "بناء على ما تقدم فإني انصح بعدم تأسيس هذه البنوك كما أن على مستشفيات الولادة أن لا تتساهل في إرضاع طفل لبن غير لبن أمه تجنبا للوقوع في المحظور شرعا مستقبلا".

"وأصل الحكمة في التحريم بالرضاع أن التغذية بلبن المرضع كالتغذية بلبن الأم الحقيقية، وفي ذلك شعور بالأمومة والحنان أيضا. خصوصا إذا اقترن بانشاز العظم وانبات اللحم كما في الحديث الذي رواه أبو داود وهو : "لا إرضاع إلا ما انبت اللحم وانشر العظم"، ومعلوم أن المذاهب اختلفت في الكمية والكيفية من الرضاع. ومذهب كل من الإمامين أبي حنيفة ومالك التحريم بالرضعة الواحدة. ومذهب الشافعي واحمد لا بد من خمس رضعات متفرقات".

## ٧. الخلاصة :

إن موضوع بنوك الحليب (اللبن) أمر غير مرغوب فيه، ولا حاجة له طبياً، وخاصة في البلاد الإسلامية، فبنوك الحليب فيها كثير من المحاذير الطبية، حيث أن كلفتها باهظة، ولا تقوم مقام الرضاعة من الثدي، وتحتمل إمكانية تلوثها بالميكروبات، وتفقد فوائد الرضاعة بالنسبة للام، وكثيراً من فوائد الرضاعة للطفل.

وقد تتحول إلى تجارة وتؤدي إلى عدم الإرضاع من الأمهات المترفات أو الموظفات، كما تؤدي إلى حرمان أطفال الأمهات الفقيرات من الرضاعة، لأن الأم تبيع لبنها للبنك بثمن جيد، وتعطي طفلها بدلاً من الرضاع اللبن الصناعي. وبذلك تزداد المخاطر على هؤلاء الأطفال.

وفي الوقت الحاضر على الأقل لا تبدو هناك أي حاجة في البلاد النامية بصورة عامة، والبلاد الإسلامية بصورة خاصة إلى إقامة بنوك الحليب.

أما من الناحية الدينية فإن الجمهور وهو رأي المذاهب الأربعة الشافعية والمالكية الحنابلة والحنفية، يقولون بالتحريم من رضاعة لبن يجمع من أمهات متعدّدات ويبقى على هيئته أي دون تجفيفه، وهذا ما يحدث في البنوك، وأما افتراض السعوط أو الحقنة أو الطعام أو تحويله إلى جبن أو زبد أو الانتدام به مع الخبز، فأمر غير وارد لأن هذا اللبن إنما يقصد به إنقاذ مجموعة من المواليد (الخدج أو ناقصي الوزن) في الفترة الأولى من حياتهم (لبضع أسابيع أو بضعة أشهر على أقصى مدى).

والمحاذير كثيرة طبيا واجتماعيا ودينيا. ولهذا نرى عدم الحاجة لهذه البنوك.

وليس علينا أن نتبع كل صيحة في الغرب، وان نجري وراء كل ناعق هناك، فقد حذر الرسول من إتباع سنن أهل الكتاب حتى لو دخلوا جحر ضب دخلنا وراءهم.

واللّٰه الهادي إلى سواء السبيل.

## BIBLIOGRAPHY

### Primary Sources

- Anonymous, *Kitāb manāfi' l-aghdhīya*, MS, The Bodleian Library, Oxford, Huntington 358.
- al-Anṣārī, Abū Zayd Sa'īd b. Aws, *Kitāb al-liba' wa-l-laban* (ed. L. Cheikho) in L. Cheikho and A. Haffner, *Dix anciens traités de philologie arabe*, n.p., 1908, pp. 141-145.
- 'Arīb b. Sa'īd, see al-Qurṭubī.
- al-Asrūshanī, Muḥammad b. Maḥmūd, *Jāmi' aḥkām al-ṣiḡhār*, Cairo, n.d.
- al-Balādhūrī, Aḥmad b. Yaḥyā, *Ansāb al-ashrāf* (ed. Muḥammad Ḥamidullāh), Cairo, 1959.
- al-Baladī, Aḥmad b. Muḥammad b. Yaḥyā, *Tadbīr al-ḥabālā wa-l-alfāl wa-l-ṣibyān wa-ḥiḏḏatihim wa-mudāwāt al-amrāḏ al-'arīḏa lahum* (ed. Maḥmūd al-Ḥājj Qāsim Muḥammad), Baghdad, 1987.
- Bāshā, Ḥassān Shamsī, *al-Ridā'a min laban al-umm: mādhā takhsaru l-umm min 'adam irdā'ihā*, Jeddah, 1991.
- Bell, Richard, *The Qur'ān: Translated with critical re-arrangements of the sūras*, Edinburgh, 1939.
- Elgood, Cyril (translator), "Ṭibb-ul-Nabiyy or Medicine of the Prophet being a translation of two works of the same name", *Osiris* 40 (1962), pp. 33-192.
- Galen on the Usefulness of the Parts of the Body*, translated from the Greek with an introduction and commentary by Margaret Tallmadge May, Ithaca, New York, 1968.
- Galen's Hygiene, A Translation of (De Sanitate Tuenda)* by Robert M. Green, Springfield, 1951.
- Galen, see also Jālinūs
- al-Ghazālī, Abū Ḥāmid Muḥammad, *Iḥyā' 'ulūm al-dīn*, Cairo, 1967.
- al-Ḥalabī, 'Alī b. Burhān al-Dīn, *Insān al-'uyūn fī sirāt al-amīn wa-l-ma'mūn*, Cairo, n.d.
- Ibn Abī Uṣaybi'a, Muwaffaq al-Dīn, *'Uyūn al-anbā' fī ṭabaqāt al-aṭibbā'*, Cairo, 1882.
- Ibn Bābawayh al-Qummī, *Man lā yaḥḏuruhu l-faqīh*, Najaf, 1958/9.
- Ibn Ḥabīb, 'Abd al-Mālik, *Mukhtaṣar fī l-ṭibb* (ed. Camilo Alvarez de Morales and Fernando Giron Irueste), Madrid, 1992.
- Ibn Ḥanbal, Aḥmad, *Chapters on Marriage and Divorce: Responses of Ibn Hanbal and Ibn Rāḥwayh*, translated with introduction and notes by Susan A. Spector, Austin, 1993.
- , *Musnad*, Cairo, 1312-13/1894-5.
- Ibn Ḥazm, 'Alī b. Aḥmad b. Sa'īd, *al-Muḥallā*, Cairo, 1347-52/1928-33.
- Ibn Hibāt Allāh, Abū al-Ḥasan Sa'īd, *Khalq al-insān*, MS., The Bodleian Library, Oxford, Pococke 66.
- Ibn Hibāt Allāh, Abū Sa'īd, *al-Mughnī fī tadbīr al-'ilal wa-l-amrāḏ*, MS, The Wellcome Institute, London, WMS Or. 93.
- Ibn Hishām, 'Abd al-Mālik, *Sīrat rasūl Allāh* (ed. F. Wüstenfeld), Göttingen, 1858 [English translation: Alfred Guillaume, *The Life of Muḥammad: A Translation of Ishāq's Sīrat Rasūl Allāh with Introduction and Notes*, Oxford, 1955].
- Ibn Hubal, 'Alī b. Aḥmad b. 'Alī, *Kitāb al-mukhtārāt fī l-ṭibb*, Haydarabad, 1362/1943.
- Ibn al-Jazzār, see al-Qayrawānī.

- Ibn Kathīr, Abū al-Fidā' Ismā'il b. 'Umar, *Mawlid rasūl Allāh ṣal'am wa-radā'uhu* (ed. Maḥmūd al-Arna'ūt and Yāsīn Muḥammad al-Sawās), Damascus and Beirut, 1987.
- Ibn Khallikān's Biographical Dictionary*, translated by M. de Slane, Repr. New York and London, 1961.
- Ibn Manzūr, Jamāl al-Dīn Muḥammad, *Lisān al-'arab*, Dār Ṣādir, Beirut, n.d.
- Ibn Qayyim al-Jawziyya, Shams al-Dīn Muḥammad b. Abī Bakr, *Tuḥfat al-mawdūd bi-ahkām al-mawlūd*, Bombay, 1961.
- Ibn Qudāma, 'Abdallāh, *al-Mughnī*, Beirut, 1972.
- Ibn al-Quff, Abū al-Faraj b. Ya'qūb b. Ishāq al-Masiḥī, *Jāmi' al-gharad fi ḥifz al-ṣiḥḥa wa-daf' al-amrād*, MS, The Wellcome Institute, London, WMS Or. 116.
- Ibn Qutayba, Abū Muḥammad 'Abdallāh, *Uyūn al-akhbār*, Beirut, 1982.
- Ibn Rushd, Abū al-Walīd Muḥammad b. Aḥmad, *Kitāb al-kulliyāt fi 'l-ṭibb* (ed. J.M. Forneas Besteiro and C. Alvarez de Morales), Madrid, 1987.
- , *Muqaddimat Ibn Rushd li-bayān mā 'qtadathu 'l-mudawwana min(a) 'l-ahkām*, Beirut, 1994.
- Ibn Sa'd, Abū 'Abdallāh Muḥammad, *Kitāb al-ṭabaqāt al-kabīr* (ed. E. Sachau), Vol. 1, Leiden, 1904.
- Ibn Sīda, Abū al-Ḥasan 'Alī, *Kitāb al-mukhaṣṣaṣ*, Bulaq, 1316/1898-9
- Ibn Sīnā, Abū 'Alī al-Ḥusayn b. 'Abdallāh, "Kitāb al-siyāsa" (ed. Lewis Ma'lūf), *al-Mashriq* 9(1906), pp. 968-1078.
- , *al-Qānūn fi 'l-ṭibb*, Bulaq, 1877.
- Ibn Taymiyya, Taqī al-Dīn, *al-Ikhtiyārāt al-fiqhiyya min fatāwī shaykh al-islām Ibn Taymiyya*, Beirut, n.d.
- , *Majmū'at fatāwā*, Cairo, 1326/1908.
- Ibn Zafar, Muḥammad b. 'Abdallāh, *Kitāb anbā' nujabā' al-abnā*, Cairo 1319/1901.
- al-Iṣfahānī, al-Rāghib, *Muḥāḍarāt al-udabā' wa-muḥāwarāt al-shu'arā' wa-l-bulaghā'*, Cairo, 1870.
- al-Jāhiz, 'Amr b. Baḥr, *Kitāb al-ḥayawān*, Cairo, 1938.
- Jālinūs, Kitāb manāfi' al-ḥayawān wa-'l-insān li-l-ra'īs al-fāḍil wa-'l-ḥabr al-kāmil mālik al-ṭibbā' Jālinūs* (attributed to Burhān al-Dīn Nafīs b. 'Iwaḍ al-Kirmānī) MS, The Bodleian Library, Oxford, Huntington 358.
- al-Jazirī, 'Abd al-Raḥmān, *Kitāb al-fiqh 'alā 'l-madhāhib al-arba'a*, Dār al-Irshād, n.p., n.d.
- al-Jūghī, Muḥammad b. Abī Bakr Imām Zādeh, *Shir'at al-islām ilā dar al-salām*, MS. La Bibliothéque Nationale, Paris, Ar. 6576.
- al-Majūsī, Abū al-'Abbās, *Kāmil al-sinā'a al-ṭibbiyya*, Bulaq, 1877.
- Mālik b. Anas, *al-Mudawwana al-kubrā*, Beirut, 1994.
- , *al-Muwatta'*, Cairo (?), Dār al-Nafā'is, 1977.
- al-Manbijī, Abū 'Abdallāh Muḥammad, *Tasliyat ahl al-maṣā'ib [fi mawt al-awlād wa-'l-aqārib]*, Medina 1380/1960.
- al-Māwardī, 'Alī b. Muḥammad b. Ḥabīb, *Kitāb al-raḍā'* (ed. 'Amir Sa'īd al-Zaybārī), Beirut, 1996.
- Muslim b. al-Hajjāj, *Ṣaḥīḥ*, Cairo, 1955.
- al-Najjār, 'Abdallāh Mabruk, "Mawqif al-islām min bank laban al-ummahāt", *Majallat al-Azhar* 59(1986), pp. 447-455.
- al-Nawawī, Yhyā b. Sharaf, *al-Majmū'* being a commentary on *al-Muhadhdhab* by Ibrāhīm b. 'Alī al-Shīrāzī, Beirut, 1991.
- al-Qayrawānī, Ibn al-Jazzār, *Siyāsat al-ṣibyān wa-tadbīrūhum* (ed. Maḥmūd al-Ḥabīb al-Hīla), Tunis, 1968.
- al-Qaysī, Nāṣir al-Dīn, *Bard al-akhbād 'inda faqḍ al-awlād* (attributed to Jalāl al-Dīn al-Suyūfī), Cairo, 1304/1886-7.

- al-Qurtubī, 'Arīb b. Sa'īd, *Khalq al-janīm wa-tadbīr al-ḥabālā wa-'l-mawlūdīn* (eds. Nūr al-Dīn 'Abd al-Qāder and Henri Jahier), Algier, 1965.
- al-Rāzī, Abū Bakr b. Zakariyyā', *Man lā yaḥḍuruḥu ṭabīb*, MS, The British Library, Or. 5620.
- al-Rāzī, Fakhr al-Dīn, *Māfatih al-ghayb*, Cairo, 1278/1862.
- al-Samarqandī, Abū al-Layth Naṣr, *Khizānat al-fiqh wa-'uyūn al-masā'il*, Baghdad, 1965.
- al-Sarakhsī, Shams al-Dīn, *Kitāb al-mabsūt*, Cairo, 1905-1906.
- Sha'ul, Anwar, *Qiṣṣat ḥayātī fi Wādī al-Rāfidaynī*, Jerusalem, 1980.
- al-Sibā'ī, Zuhayr Aḥmad and Muḥammad 'Alī al-Bār, *al-Ṭabīb: adabuhu wa-fiqhuhu*, Damascus and Beirut, 1993.
- Soranus, *Gynecology*, (translated by O. Temkin), Baltimore, 1956.
- al-Suyūṭī, Jalāl al-Dīn, *Zubdat al-laban*, MS, Library of the University of Leiden, Or. 474 (38), fols. 361b-363b.
- al-Ṭabarī, 'Alī b. Rabban, *Firdaus al-ḥikma*, (ed. M.Z. Siddiqi), Berlin, 1928.
- al-Ṭabarī, Muḥammad b. Jarīr, *Jāmi' al-bayān 'an ta'wīl āy al-Qur'ān*, Cairo 1302/1884-1321/1903 and 1374/1955.
- al-Ṭabarī, Muḥibb al-Dīn Aḥmad b. 'Abdallāh, *Huqūq al-awlād wa-ta'dībuhum wa-wiqāyatuhum al-nār wa-'l-ahl*, MS, Library of the University of Leiden, Or. 2427(2).
- al-Ṭabarsī, Abū 'Alī Faḍl Allāh, *Makārim al-akhlāq*, Cairo, n.d.
- al-Tanūkhī, Saḥnūn b. Sa'īd, *al-Mudawwana al-kubrā*, Cairo, 1323/1905-6.
- Tansillo, Luigi, *The Nurse*, English translation by William Roscoe, London 1798.
- al-Tirmidhī, Abū 'Isā, *Sunan* Cairo, 1956.
- al-Wansharīsi, Aḥmad, *al-Mi'yār al-mu'rib*, Rabat and Beirut, 1981-1983.
- al-Zamakhsharī, Maḥmūd b. 'Umar *Al-Kashshāf 'an ḥaqā'iq ghawāmiḍ al-tanzil wa-'uyūn al-aqāwīl fi wujūh al-ta'wīl*, Cairo 1343/1924-5; Cairo, 1373/1953.

### Secondary Sources

- Abū al-Ajḫān, Muḥammad, "In'āyat al-islām bi 'l-ḥufūla min khilāl kitāb *Shir'at al-islām*", *al-Baḥḥ al-'ibnī* 34 (1984), pp. 219-230.
- Abū Lailā, Muḥammad, "An Introduction to the Life and Work of Ibn Ḥazm", *The Islamic Quarterly* 29 (1985), pp. 75-100.
- Abu Lughod, Janet L., "The Islamic City — Historic Myth, Islamic Essence and Contemporary Relevance", *International Journal of Middle East Studies* 19 (1987), pp. 155-176.
- Al-Azhary Sonbol, Amira, "Adoption in Islamic Society: A Historical Survey", in Elizabeth Warnock Fernea (ed.), *Children in the Muslim Middle East*, Austin, 1995, pp. 45-67.
- Altorky, Soraya, "Milk-Kinship in Arab Society: An Unexplored Problem in the Ethnography of Marriage", *Ethnology* 19 (1980), pp. 233-244.
- Ammar, Hamed, *Growing Up in an Egyptian Village*, London, 1966.
- Ariès, Philippe, *L'homme devant la mort*, Paris, 1977, English translation by Helen Weaver, *The Hour of our Death*, London, 1981 (repr. 1987).
- Arnold Lois D.W., "Issues in Human Milk Banking", in J. Riordan and K. G. Auerbach (eds), *Breastfeeding and Human Lactation*, Boston and London, 1993, pp. 597-611.
- Atiya, Nayra, *Khut Khaal: Five Egyptian Women Tell Their Stories*, Cairo, 1993.
- al-Barā, Zakariyyā' Aḥmad, *Aḥkām al-awlād fi 'l-islām*, Cairo, 1964.
- Barkai, Ron, *Les infortunes de Dinah: ou la gynécologie juive au Moyen-Age*, Paris, 1991.

- Benedictow, Ole Jørgen, "On the Origin and Spread of the Notion that Breast-feeding Women Should Abstain from Sexual Intercourse", *Scandinavian Journal of History* 17 (1992), pp. 65-76.
- Bianquis, Thierry, "The Family in Arab Islam", in André Burguière et al. (eds), *A History of the Family*, Cambridge, 1996, Vol. I, pp. 601-647.
- Bos, Gerrit, "Ibn al-Jazzār on Women's Diseases and their Treatment", *Medical History* 37 (1993), pp. 296-312.
- Bouhdiba, Abdelwahab, *Sexuality in Islam*, London, 1985.
- , "The Child and the Mother in Arab-Muslim Society", in L. Carl Brown and Norman Itzkowitz (eds.), *Psychological Dimensions of Near Eastern Studies*, Princeton, 1977, pp. 126-141.
- Bousquet, G.H., *L'éthique sexuelle de l'Islam*, Paris 1990.
- Bowen, Donna Lee, "Abortion, Islam and the 1994 Cairo Population Conference", *International Journal of Middle East Studies* 29 (1997), pp. 161-184.
- Brenner, Athalya, *The Intercourse of Knowledge: On Gender, Desire and 'Sexuality' in the Hebrew Bible*, Leiden, 1997.
- Bulliet, Richard W., *Islam: The View from the Edge*, New York, 1994.
- Carmi Parsons, John and Bonnie Wheeler (eds.), *Medieval Mothering*, New York and London, 1996.
- "Consensus Statement: 'Breastfeeding as Family Planning Method'", *The Lancet*, July-December 1988, p. 1204.
- Cook, Michael, *Muhammad*, Oxford, 1983.
- Corsini, Carlo A., "Breastfeeding, Fertility and Infant Mortality: Lessons from the Archives of the Florence Spedale degli Innocenti", in *Historical Perspectives on Breastfeeding*, Florence, 1991, pp. 63-87.
- Creyghton, Marie-Louise, "Breastfeeding and *Baraka* in Northern Tunisia", in V. Maher (ed.), *The Anthropology of Breastfeeding*, pp. 37-58 (see Maher).
- Demaitre, Luke, "The Idea of Childhood and Child Care in Medieval Writings of the Middle Ages", *The Journal of Psychohistory* 4 (1976), pp. 461-489.
- DeMause, Lloyd, "The Evolution of Childhood", in idem (ed.), *The History of Childhood*, New York, 1974, pp. 1-73.
- (ed.), *The History of Childhood*, New York, 1974.
- Dols, Michael W., *Majnūn: The Madman in Medieval Islamic Society*, Oxford, 1992.
- , "Syriac into Arabic: The Transmission of Greek Medicine", *Aram* 1 (1989), pp. 45-52.
- Ebrahim, G.J., "Cross-cultural Aspects of Breast-feeding," *Breast-feeding and the Mother*, Ciba Foundation Symposium 45, Amsterdam, Oxford, New York, 1976, pp. 195-204.
- Elgood, Cyril, *Safawid Medical Practice*, London, 1970.
- Erikson, Erik H., *Childhood and Society*, London, 1984.
- Etienne, Robert, "Ancient Medical Conscience and the Life of Children", *The Journal of Psychohistory* 4 (1976), pp. 131-161.
- Ferneau Warnock, Elizabeth (ed.), *Children in the Muslim Middle East*, Austin, 1995.
- Fildes, Valerie, *Wet Nursing: A History from Antiquity to the Present*, Oxford, 1988.
- Freyer-Stowasser, Barbara, *Women in Quran, Traditions and Interpretations*, New York and Oxford, 1994.
- Friedl, Erika, "Parents and Children in a Village in Iran", in A. Fathi (ed.), *Women and the Family in Iran*, Leiden, 1985, pp. 195-211.
- Gavitt, Philip, *Charity and Children in Renaissance Florence. The Ospedale degli Innocenti (1410-1536)*, Ann Arbor, 1990.
- Giladi, Avner, *Children of Islam: Concepts of Childhood in Medieval Muslim Society*, Houndmills and London, 1992.

- , "Concepts of Childhood and Attitudes towards Children in Medieval Islam: A Preliminary Study with Special Reference to Reactions to Infant and Child Mortality", *Journal of the Economic and Social History of the Orient* 32 (1989), pp. 121-152.
- , "Gender Differences in Child Rearing and Education: Some Preliminary Observations with Reference to Medieval Muslim Thought", *Al-Qanṭara* 16 (1995), pp. 291-308.
- , "Islamic Consolation Treatises for Bereaved Parents: Some Bibliographical Notes," *Studia Islamica* 81 (1995), pp. 197-202.
- , "Ṣaghīr", *El<sup>2</sup>*, Vol. 8, pp. 821-827.
- , "'The child was small... not so the grief for him': Sources, Structure, and Content of al-Sakhāwī's Consolation Treatise for bereaved Parents", *Poetics Today* 14 (1993), pp. 367-386.
- Goitein, Shlomo Dov, *A Mediterranean Society*, Vol. 3: "The Family", Berkeley, Los Angeles and London, 1978.
- Gorkin, Michael and Rafiq Othman, *Three Mothers, Three Daughters: Palestinian Women's Stories*, Berkeley, Los Angeles, London, 1996.
- Granqvist, Hilma, *Birth and Childhood Among the Arabs*, Helsinki, 1947.
- Grant, J.P., *The State of the World's Children 1986*, UNICEF, Oxford, 1985.
- Green, Monica Helen, *The Transmission of Ancient Theories of Female Physiology and Disease through the Early Middle Ages* (unpublished Ph.D dissertation), Princeton, 1985.
- Grosvenor, Clark E. et al., "Hormones and Growth Factors in Milk", *Endocrine Reviews* 14/6; (1992), pp. 710-728.
- Hamarneh, Sami K., "Ibn al-Quff's Writings on Hygienic Regulations and the Preservation of Health", *Studies in the History and Archaeology of Jordan* [edited by Adnan Hadidi] 1 [1982], pp. 373-383.
- Hanawalt, Barbara A., "Childrearing Among the Lower Classes of Late Medieval England", *Journal of Interdisciplinary History* 8 (1977), pp. 1-22.
- Hareven, Tamara K., "The History of the Family as an Interdisciplinary Field", *The Journal of Interdisciplinary History* 2 (1971), pp. 399-414.
- Haywood, J.A., *Arabic Lexicography: Its History and Its Place in the General History of Lexicography*, Leiden, 1965.
- Heltzer, Michael, "Two Ancient Oriental Notes on Biblical Issues", in M. Heltzer et al. (eds.), *Studies in the Archaeology and History of Ancient Israel in Honour of Moshe Dotan*, Haifa, 1993, pp. 57-62.
- Héritier, Françoise, *Les deux sœurs et leur mère: Anthropologie de l'inceste*, Paris 1994.
- Hoodfar, Homa, "Child Care and Child Health in Low-Income Neighborhoods of Cairo", in E. Fernea (ed.), *Children in the Muslim Middle East*, pp. 146-167.
- Idleman Smith, Jane and Yvonne Yazbeck Haddad, *The Islamic Understanding of Death and Resurrection*, Albany, 1981.
- Isaacs, Haskell D., "Arabic medical literature", in M.J.L. Young et al. (eds), *Religion, Learning and Science in the 'Abbasid Period*, Cambridge, 1990, pp. 342-363.
- al-Īsawī, Aḥmad, *Aḥkām al-tijl*, Riyad, 1992.
- Jamali, Mohammed Fadhel, *The New Iraq: Its Problems of Bedouin Education*, New York, 1934.
- Juynboll, G.H.A., "The ḥadīth in the discussion on birth control," *Actas do IV Congresso de Estudos Arabes e Islâmicos*, Leiden, 1971, pp. 373-379.
- Keddie, Nikkie R., "Problems in the Study of Middle Eastern Women", *International Journal of Middle East Studies* 10 (1979), pp. 225-40.
- , "Introduction: Deciphering Middle Eastern Women's History", in Nikkie R. Keddie and Beth Baron (eds.), *Women in Middle Eastern History*, New Haven and London, 1991, pp. 1-22.

- Khatib-Chahidi, Jane, "Milk Kinship in Sh'ite Islamic Iran," in V. Maher (ed.), *An Anthropology of Breast-Feeding*, pp. 109-132.
- al-Kitānī, Muḥammad al-Muntaṣir, *Mu'jam al-salaf*, Mekka, 1984.
- Klapisch, Christiane, "L'enfance en Toscane au début du XV<sup>e</sup> siècle", *Annales de démographie historique*, 1973, pp. 99-122.
- Klapisch-Zuber, Christiane, *Women, Family and Ritual in Renaissance Italy*, Chicago and London, 1985.
- Kohlberg, Étan, "The Position of the *Walad al-Zinā* in Imāmī Shī'ism", *Bulletin of the School of Oriental and African Studies, University of London*, Vol. 48 (1985), pp. 237-266.
- Kopf, Lothar, "Arabic Lexicography—Its Origin, Development, Sources and Problems", in *Studies in Arabic and Hebrew Lexicography* (ed. by M.H. Goshen-Gottstein), Jerusalem, 1976, pp. 29-34 (The Hebrew section).
- Kottek, S., "Childhood in Medieval Jewry as Depicted in Sefer Hasidim (12-13th Century): Medical, Psychological and Educational Aspects," *Koroth* 8(1984)," pp. 377-395.
- Lane, Edward, W., *Arabic-English Lexicon*, London and Edinburgh, 1863.
- Le Roy Ladurie, Emmanuel, *Montaillou*, Harmondsworth, 1984.
- Lett, Didier, "La mère et l'enfant au Moyen Age", *L'Histoire* 152 (February, 1992), pp. 6-14.
- Linant de Bellefonds, Y., "Ḥaḍāna", *EF<sup>2</sup>*, Vol. 3, pp. 16-19.
- MacLehose, William F. "Nurturing Danger: High Medieval Medicine and the Problem(s) of the Child", in J. Carmi Parsons and B. Wheeler (eds), *Medieval Mothering*, pp. 3-24.
- Maher, Vanessa, "Breast-Feeding in Cross-cultural Perspective: Paradoxes and Proposals", in V. Maher (ed.), *The Anthropology of Breastfeeding*, pp. 1-35.
- , "Breast-Feeding and Maternal Depletion: Natural Law or Cultural Arrangements", in V. Maher (ed.), *The Anthropology of Breastfeeding*, pp. 151-180.
- , "Possession and Dispossession: Maternity and Mortality in Morocco", in Hans Medick and David Warren Sabean (eds.), *Interest and Emotion: Essays on the Study of Family and Kinship*, Cambridge, 1984, pp. 103-128.
- (ed.), *The Anthropology of Breastfeeding: Natural Law or Social Construct*, Oxford & Providence, 1992.
- Matthews Grieco, Sara F., "Breastfeeding, Wet Nursing and Infant Mortality in Europe (1400-1800)", in *Historical Perspectives on Breastfeeding*, Florence, 1991, pp. 15-62.
- McLaughlin, Mary Martin, "Survivors and Surrogates: Children and Parents from the Ninth to Thirteenth Centuries", in Lloyd DeMause (ed.), *The History of Childhood*, New York, 1974, pp. 101-181.
- Micheau, Françoise, *Savoir médical et société dans le Proche Orient arabe du IIe/VIIIe au VIIe/XIIIe siècle* (Habilitation à diriger des recherches), Paris, 1995.
- Motzki, Harald, "Child Marriage in Seventeenth-Century Palestine", in Muhammad Khalid Masud et al. (eds.), *Islamic Legal Interpretation: Muftis and Their Fatwas*, Cambridge Mass., 1996, pp. 129-140.
- , "Das Kind und seine Sozialisation in der islamischen Familie des Mittelalters", in J. Martin and A. Nitschke (eds.), *Zur Sozialgeschichte der Kindheit*, Munich, 1986, pp. 391-441.
- Mūsā, 'Abdāllah Ibrāhīm, *al-Mas'ūliyya al-jasadiyya fī 'l-islām*, Beirut, 1995.
- Musallam, Basim F., *Sex and Society in Islam*, Cambridge, 1983.
- Naish, Charlotte, F. *Breast Feeding: A Guide to the Natural Feeding of Infants*, London, 1956.
- "Nāzila", *EF<sup>2</sup>*, Vol. 7, p. 1052 (Ed.).
- Omidssalar, M. and Th., "Dāya", *Encyclopaedia Iranica*, Vol. 7, pp. 164-166.

- Ping-Chen, Hsiung, "To Nurse the Young: Breastfeeding and Infant Feeding in Late Imperial China", *Journal of Family History* 20 (1995), pp. 217-238.
- Powers, David, S. "Legal Consultation (*Futyā*) in Medieval Spain and North Africa", in Chibli Mallat (ed.), *Islam and Public Law*, London, 1993, pp. 85-106.
- Ransel, David L., *Mothers of Misery: Child Abandonment in Russia*, Princeton, 1988.
- Raphael, Dana and Flora Davis, *Only Mothers Know: Patterns of Infant Feeding in Traditional Cultures*, Westport, London, 1985.
- al-Rasheed, Madawi, *Politics in an Arabian Oasis: The Rashidi Tribal Dynasty*, London and New York, 1991.
- Robertson Smith, W., *Kinship and Marriage in Early Arabia*, London, 1907.
- Rodinson, M. "*Ghidhā*", *EI<sup>2</sup>*, Vol. 2, pp. 1057-1072.
- Rosenthal, Franz, "Child Psychology in Islam", *Islamic Culture* 26 (1952), pp. 1-22.
- , "Literature", in J. Schacht and C.E. Bosworth (eds.), *The Legacy of Islam*, Oxford, 1974, pp. 321-349.
- Ross, James Bruce, "The Middle Class Child in Urban Italy, Fourteenth to Early Sixteenth Century", in L. DeMause: *The History of Childhood*, pp. 183-228.
- Rugh, Andrea B., "Orphanages in Egypt: Contradiction or Affirmation in Family-Oriented Society", in E. Fernea (ed.), *Children in the Muslim Middle East*, pp. 124-141.
- Sadan, J., "*Mashrūbāt*", *EI<sup>2</sup>*, Vol. 6, pp. 720-723.
- , "Vin — fait de civilisation", in Myriam Rosen-Ayalon (ed.), *Studies in Memory of Gaston Wiet*, Jerusalem, 1977, pp. 146-158.
- Sandri, Lucia, *L'Ospedale di S. Maria della Scala di S. Gimignano nel Quattrocento: Contributo alla Storia dell'Infanzia Abbandonata*, Florence, 1982.
- Savage-Smith, Emilie, "Ibn al-Nafis's *Perfected Book on Ophthalmology* and His Treatment of Trachoma and Its Sequelae", *Journal for the History of Arabic Science* 4 (1980), pp. 147-187.
- Schacht, Joseph, *An Introduction to Islamic Law*, Oxford, 1964.
- Schacht, J., J. Burton and J. Chelhod, "*Raḍā*", *EI<sup>2</sup>*, Vol. 8, pp. 361-362.
- Schleifer, Aliah, *Motherhood in Islam*, Cambridge, 1986.
- Shahar, Shulamit, *Childhood in the Middle Ages*, London and New York, 1990.
- , "Infants, Infant Care and Attitudes towards Infancy in Medieval Lives of Saints," *The Journal of Psychohistory* 10 (1983), pp. 281-309.
- Shihāb Ṣabbāh, Qāsim, *ʿIlm al-naḥs al-nabawiyy*, Beirut, 1995.
- Short, R.V., "Lactation—The Central Control of Reproduction", in *Breast-feeding and the Mother: Ciba Foundation Symposium 45*, Amsterdam, Oxford, New York, 1976, pp. 73-86.
- Skovgaard-Petersen, Jakob, *Defining Islam for the Egyptian State: Muftīs and Fatwās of the Dār al-Iftā*, Leiden, 1997.
- Stern, Gertrude, *Marriage in Early Islam*, London, 1939.
- Stillman, Norman A., "Charity and Social Service in Medieval Islam," *Societas: A Review of Social History* 5(1975), pp. 105-115.
- Stone, Lawrence, *The Family, Sex and Marriage in England 1500-1800*, London, 1990.
- M. Talbi, "Ibn Sida", *EI<sup>2</sup>*, Vol. 3, p. 940.
- Tyan, E., "Fatwā", *EI<sup>2</sup>*, vol. 2, p. 866.
- Ullmann, Manfred, *Islamic Medicine*, Edinburgh, 1978.
- , *Die Medizin im Islam*, Leiden, 1970.
- Veyne, Paul, "From Mother's Womb to Last Will and Testament (in the Roman Empire)", in idem (ed.), *A History of Private Life, I. From Pagan Rome to Byzantium*, Cambridge, Mass. and London, 1987, pp. 9-32.
- Victora, Cesar G. et al., "Evidence for Protection by Breast-Feeding Against Infant Deaths from Infectious Diseases in Brazil", *The Lancet*, July-December 1987, pp. 319-321.

- Watt, W. Montgomery, *Muhammad at Medina*, Oxford, 1956.
- Wensinck, A.J., *A Handbook of Early Muhammadan Tradition*, Leiden, 1960.
- Whitehead, R.G., "Nutritional Aspects of Human Lactation", *The Lancet*, January-June 1983, p. 167-169.
- Wikan, Unni, *Behind the Veil in Arabia: Women in Oman*, Baltimore and London, 1982.
- Wilson, Stephen, "The Myth of Motherhood a Myth: the Historical View of European Child-rearing", *Social History* 9 (1984), pp. 181-198.
- Winnicott, Donald W. *The Child, the Family, and the Outside World*, Harmondsworth, 1973.
- Yalom, Marilyn, *A History of the Breast*, New York, 1997.
- Zaghlūl, Amīn 'Abd al-Ma'būr, *Ri'āyat al-ṭufūla fī 'l-sharī'a al-islāmiyya*, Cairo, 1991.

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