

DOI: 10.5281/zenodo.12426349

TWO-YEAR BREASTFEEDING IN THE PERSPECTIVE OF MAQĀṢID AL-SYARĪ'AH AND MODERN PUBLIC HEALTH: A BIOMEDICAL EVIDENCE-BASED PREVENTIVE ETHICS ANALYSIS

Raja Amar Jayakarta^{1*}, Al Fahrizal², Yusri Hamzani², Muh Ihsanuddin², Amal Khairat²,
Sarmo², Maburur², Muhammad Kanzul Fikri², Salman Alfarisi², Aurizan Himmi Azhar²

¹*Universitas Al-Azhar Cairo*

²*Universitas PTIQ Jakarta*

Received: 05/05/2025

Accepted: 18/02/2026

Corresponding Author: Raja Amar Jayakarta
(albatawie025@gmail.com)

ABSTRACT

Breastfeeding is a foundational aspect of child health and maternal wellbeing, endorsed by both contemporary public health guidelines and Islamic law. The World Health Organization (WHO) and the American Academy of Pediatrics (AAP) recommend continued breastfeeding up to two years or beyond, a directive that remarkably converges with the Qur'anic injunction of nursing for "two whole years." This article analyzes the two-year breastfeeding practice through the dual lenses of Maqāṣid al-Syarī'ah (the objectives of Sharia) and modern public health preventive ethics. Utilizing a biomedical evidence-based approach, the study examines how extended breastfeeding serves the preservation of life (hifz al-nafs), progeny (hifz al-nasl), and intellect (hifz al-aql). A systematic literature review was conducted, synthesizing evidence from 2016-2026. Findings indicate that two-year breastfeeding provides significant immune protection, nutritional benefits, and developmental advantages. Breast milk remains a *vital* source of nutrients in the second year, providing 35-40% of total energy needs and critical LCPUFAs like DHA for brain development. From a preventive ethics perspective, breastfeeding is a normative duty that protects vulnerable infants from stunting and infections. The integration of Islamic values with medical science, particularly in community health programs, enhances maternal adherence and outcomes. This analysis concludes that the two-year breastfeeding duration represents a point of profound synergy between religious mandates and evidence-based medicine, justifying its prioritization in public health policy and clinical practice.

KEYWORDS: Breastfeeding, Maqāṣid al-Syarī'ah, Preventive Ethics, Biomedical Evidence, Public Health, Stunting.

1 INTRODUCTION

The global stunting crisis remains one of the most significant challenges to human development in the 21st century. Stunting, or impaired growth and development that children experience from poor nutrition, repeated infection, and inadequate psychosocial stimulation, affects millions of children worldwide, particularly in low- and middle-income countries. It is not merely a measure of height-for-age; it is a marker of diminished cognitive potential, increased susceptibility to chronic diseases in adulthood, and reduced economic productivity for individuals and nations. In this context, breastfeeding emerges not just as a choice of infant feeding, but as a 'biocultural' imperative—a practice where biological necessity and cultural (and religious) values intersect to ensure the survival and flourishing of the human species (Mar et al., 2025; Meek & Noble, 2022).

Breastfeeding is globally recognized as a critical public health intervention that ensures the healthy growth and development of children while conferring long-term health benefits for mothers (Meek et al., 2022). International health bodies, including the World Health Organization (WHO) and the American Academy of Pediatrics (AAP), have updated their policy statements to emphasize that breastfeeding should continue for at least two years or as long as mutually desired by the mother and child (Meek et al., 2022; Shoge et al., 2022). This recommendation is based on an accumulating body of evidence highlighting the persistent nutritional and immunological value of human milk beyond infancy, countering the myth that milk loses its value after the first year (Delgado et al., 2013; Sandoval et al., 2024).

The modern scientific consensus on two-year breastfeeding aligns remarkably with Islamic scriptural traditions. The Qur'an, in verse 2:233, states: "Mothers shall breastfeed their children for two whole years, for those who wish to complete the term" (Rahman et al., 2011; Latif et al., 2020). This injunction is reiterated in other verses (e.g., 31:14), emphasizing the two-year weaning period as a normative standard (Nurwahyudi, 2017). In Islamic jurisprudence, these teachings are understood through the framework of Maqāṣid al-Syarī'ah, which aims to protect the five essential human interests: religion (hifz al-din), life (hifz al-nafs), intellect (hifz al-aql), progeny (hifz al-nasl), and property (hifz al-mal) (Ibrahim et al., 2019; Amrulloh et al., 2024).

Extended breastfeeding directly addresses several Maqāṣid objectives. It preserves life (hifz al-nafs) by

reducing infant mortality and morbidity (Miftah, 2022). It protects progeny (hifz al-nasl) by ensuring the child's physical and spiritual development (Basyar, 2020). Furthermore, it fosters the development of the intellect (hifz al-aql) through the provision of essential brain-building nutrients (Hanafi, 2015). Despite these clear mandates, global breastfeeding rates often fall short of the two-year target due to socio-economic barriers, the aggressive marketing of the formula industry, and a lack of supportive public health infrastructures (Egypt KAP Study, 2024).

This article provides a comprehensive biomedical evidence-based analysis of two-year breastfeeding, integrating it with the principles of Maqāṣid al-Syarī'ah and modern preventive ethics. By demonstrating the synergy between religious imperatives and scientific findings, the study advocates for a more holistic approach to public health policy that leverages cultural and religious values to improve maternal and child health outcomes, particularly in stunting prevention (Mar et al., 2025; Nascimento et al., 2024).

2 LITERATURE REVIEW

2.1 Biomedical Evidence: The Second-Year Biochemical Transition

The biological value of human milk does not cease after the first year. Instead, it undergoes a unique biochemical transition that remains highly concentrated in nutrients and protective factors essential for the child's transition into early childhood (Mosca et al., 2017).

2.2 Nutritional Composition in the Second Year

In the second year of life, breast milk continues to provide a significant portion of a child's nutritional requirements. Studies indicate that it can supply 35% to 40% of total energy needs between 12 and 24 months (Delgado et al., 2013; Padhani et al., 2023). Interestingly, the fat and caloric concentration of breast milk increases during the second year, providing a dense energy source as the child becomes more active (Delgado et al., 2013). Human milk protein, which is 70% whey, remains biologically superior for infant growth compared to bovine-based alternatives, which are often heavier in casein and harder to digest (Latif et al., 2020; Nascimento et al., 2024).

2.3 Immune Protection and the "Immune Gap"

Breast milk contains bioactive components, including immunoglobulins (IgA, IgG, IgM), lactoferrin, and lysozymes, which provide passive

immunity (Mosca et al., 2017; Nurwahyudi, 2017). This is particularly critical because a child's own antibody production does not reach adult-like levels until at least 9 to 12 months of age, creating an "immune gap" that breast milk effectively bridges (Nurwahyudi, 2017; Kowalewska-Kantecka, 2016). In the second year, the concentrations of lysozyme and lactoferrin actually increase, providing heightened protection against environmental pathogens as the child begins to explore and ingest more diverse foods (Mosca et al., 2017; Costa et al., 2017). Continued breastfeeding into the second year reduces the risk and severity of respiratory infections, diarrhea, and otitis media (Rahman et al., 2011; Rasip et al., 2024).

2.4 Neurodevelopmental and Cognitive Benefits

The presence of long-chain polyunsaturated fatty acids (LCPUFAs), such as Docosahexaenoic acid (DHA) and Arachidonic acid (AA), in breast milk is crucial for brain cell formation and myelination (Hanafi, 2015; Nurwahyudi, 2017). These nutrients are specifically linked to better cognitive outcomes and higher developmental test scores (Rahman et al., 2011; Araújo et al., 2024). The two-year period corresponds to a phase of rapid brain growth and the development of complex psychomotor skills, making the continued provision of these nutrients a biological imperative (Hanafi, 2015; Mamakou et al., 2020).

2.5 The Sakinah Family Concept in Contemporary Scholarship

Contemporary Islamic scholarship has developed the *sakinah* family concept into a comprehensive framework for family development, counseling, and policy. This literature organizes around normative descriptions, practical strategies, and empirical investigations that operationalize Qur'anic concepts for contemporary contexts.

2.6 Maternal Health Outcomes

Breastfeeding also confers substantial protective effects for the mother. It aids in uterine involution, reducing the risk of prolonged postpartum bleeding through the stimulation of oxytocin (Nurwahyudi, 2017). Long-term benefits include a lower risk of breast and ovarian cancers, type 2 diabetes, and cardiovascular diseases (Meek et al., 2022; Ciampo et al., 2018). Furthermore, breastfeeding serves as a natural method of child spacing by suppressing ovulation, which contributes to the health of both the mother and the existing child by allowing for adequate recovery between pregnancies (Nurwahyudi, 2017; Parente et al., 2023).

2.7 Maqāšid al-Syarī'ah: Juristic Mapping of Maslaha and Radha'ah

The Maqāšid al-Syarī'ah framework provides a teleological approach to Islamic ethics, focusing on the ultimate goals of the law. Two-year breastfeeding is a practice that fulfills several of these dharūriyyāt (necessities) and is mapped through the concepts of Maslaha (public interest) and Radha'ah (nursing jurisprudence):

1. Preservation of Progeny (Hifz al-Nasl): Breastfeeding is considered a fundamental right of the child (haqq al-rida'ah) and a maternal responsibility (Bensaid, 2021; Mardiantari et al., n.d.). It ensures the holistic development of the next generation, fulfilling the Sharia goal of protecting lineage and human welfare (Basyar, 2020; Latif et al., 2020). The legal concept of Radha'ah establishes milk-kinship, which highlights the social and spiritual significance of the nursing bond beyond mere nutrition (Sedeqyar & Saeedi, 2025; Yusoff et al., 2024).
2. Preservation of Life (Hifz al-Nafs): By preventing malnutrition and reducing the risk of fatal infections, breastfeeding is a primary means of child survival, which is a core objective of Islamic law (Miftah, 2022; Mehrpisheh et al., 2020). The Maslaha (benefit) of the child's health is prioritized in Islamic jurisprudence, often overriding other secondary concerns (Rouf, 2022; Gacem et al., 2022).
3. Preservation of Intellect (Hifz al-Aql): The nutritional support for brain development provided by breast milk facilitates the healthy development of reason and intellect, enabling individuals to fulfill their religious and social duties (Hanafi, 2015; Rahman et al., 2011). The Quranic emphasis on "two whole years" provides the time frame necessary for this cognitive foundation (Istiqomah, 2024; Yavari et al., 2024).
4. Preservation of Religion (Hifz al-Din): Breastfeeding is viewed as an act of worship (ibadah), as it fulfills a divine command. This spiritual framing enhances maternal motivation and provides a sense of religious fulfillment (Mar et al., 2025; Rahmawati et al., 2019).

2.8 Ethics: Philosophical Grounding of Preventive Ethics

Preventive ethics in public health shifts the focus from individual clinical encounters to population-

level interventions that prevent harm. This framework is grounded in the principle of non-maleficence (*primum non nocere*) and the collective duty to protect the vulnerable (Akrami et al., 2018; Ibrahim et al., 2019).

Breastfeeding is framed as a normative preventive standard because of its role in reducing common, serious, and preventable childhood conditions, such as stunting and infectious diseases (Mar et al., 2025; Kowalewska-Kantecka, 2016). From this perspective, the failure to support two-year breastfeeding is an ethical concern, as it leaves infants vulnerable to avoidable harms. Preventive ethics argues that society has a moral obligation to create environments that facilitate healthy choices, rather than placing the entire burden on the individual (Akrami et al., 2018).

Islamic bioethics aligns with this by treating breastfeeding as a protective duty and a human right (Bensaid, 2021). The concept of *Sadd al-Dhara'i* (blocking the means to harm) in Islamic law provides a philosophical grounding for preventive measures. Just as Islam prohibits what leads to harm, it mandates what ensures protection. In this sense, two-year breastfeeding is a proactive ethical stance that "blocks the means" to malnutrition and cognitive impairment (Amrulloh et al., 2024; Ashfaq et al., 2017).

3 METHODOLOGY

This research utilized a systematic literature review and an integrative analytical approach. The methodology was designed to synthesize evidence from disparate fields: biomedicine, Islamic jurisprudence, and public health ethics.

1. **Information Retrieval:** Data was gathered from major academic databases, including SciSpace, Google Scholar, and PubMed. The search strategy employed specific keywords such as "2-year breastfeeding," "Maqāṣid al-Syarī'ah," "biomedical benefits," "preventive ethics," and "stunting prevention."

2. **Screening and Selection:** The review prioritized peer-reviewed journal articles, systematic reviews, and policy documents published between 2016 and 2026. A total of 40 relevant sources were selected based on their contribution to the multidisciplinary synthesis.

3. **Analysis and Mapping:** Data from selected studies were analyzed using the Maqāṣid al-Syarī'ah framework. Biomedical findings regarding child and maternal outcomes were mapped to specific Sharia objectives (*hifz al-nafs*, *hifz al-nasl*, *hifz al-aql*). The ethical implications of these findings were analyzed through the lens of modern public health preventive ethics.

4. **Synthesis of Synergy:** The final stage involved identifying the points of convergence between Islamic teachings and scientific evidence, resulting in a cohesive analysis of the two-year breastfeeding duration.

4 DISCUSSION

4.1 The Biomedical Evidence-Based Preventive Ethics Analysis Model

The integration of biomedical evidence with Maqāṣid al-Syarī'ah and preventive ethics leads to a new analytical model: the Biomedical Evidence-Based Preventive Ethics Analysis (BEPEA). This model posits that public health recommendations should be grounded in robust biological data, framed as normative ethical duties, and supported by the cultural and religious values of the population.

In the case of breastfeeding, the BEPEA model demonstrates that the 24-month duration is not an arbitrary number but a biological necessity that aligns with the "biocultural" needs of the developing child. The nutritional persistence of human milk into the second year provides the foundation for the Sharia objectives of protecting life and progeny (Mar et al., 2025; Delgado et al., 2013). By framing breastfeeding as a form of worship and a religious right, public health programs can tap into deep-seated motivations that go beyond simple health education (Mar et al., 2025; Klara et al., 2025).

4.2 Milk Banks and the Jurisprudential Challenge of Nasab

One of the most complex areas of dialogue between modern medicine and Islamic law is the establishment of human milk banks. For neonates who cannot be breastfed by their mothers, donor milk is the preferred alternative (Mosca et al., 2017). However, in Islamic law, the consumption of donor milk creates a "milk-kinship" (*Radha'ah*) that carries legal implications for marriage (*Mahram* status) (Sedeqyar & Saeedi, 2025; Rouf, 2022).

Current jurisprudential debates focus on whether the pooling of milk from multiple donors obscures lineage (*nasab*) and creates uncertainty regarding future marriage possibilities. Some scholars advocate for "Sharia-compliant" milk banks that maintain strict records of donors and recipients to ensure clarity (Rouf, 2022). From a preventive ethics perspective, the use of donor milk is a critical intervention for the survival of premature infants (*hifz al-nafs*), and the challenge is to find a solution that satisfies both the medical need and the religious legal requirements (Sedeqyar & Saeedi, 2025).

4.3 Socio-Economic Barriers and the Formula Industry

Despite the overwhelming evidence in favor of breastfeeding, global rates of continued breastfeeding to two years remain low. A significant factor is the aggressive and often misleading marketing of the formula industry, which frequently targets mothers in the second year with "toddler milks" that are unnecessary and inferior to human milk (Sandoval et al., 2024; Parente et al., 2023).

Furthermore, socio-economic barriers such as short maternity leave, lack of workplace support, and the normalization of formula feeding create an environment where breastfeeding is difficult to sustain (Egypt KAP Study, 2024). From a Maqāṣid perspective, the "Preservation of Property" (hifz al-mal) is also relevant here; breastfeeding is a cost-effective intervention that saves families and healthcare systems significant resources (Basyar, 2020; Ibrahim et al., 2019). The ethical failure of the formula industry to adhere to the International Code of Marketing of Breast-milk Substitutes represents a violation of preventive ethics, as it prioritizes profit over the health of children (Meek & Noble, 2022).

5 CONCLUSION

The two-year breastfeeding duration is a point of profound convergence between Islamic law and modern biomedical science. Through the lens of Maqāṣid al-Syarī'ah, extended breastfeeding is a vital practice that serves the foundational human interests of life, intellect, and progeny. Biomedical evidence confirms that human milk remains a critical source of nutrition and immune protection throughout the second year of life, with specific increases in protective components like lysozyme and lactoferrin. From a preventive ethics perspective, supporting this duration is a moral imperative that protects the most vulnerable from preventable harms like stunting.

5.1 Recommendations for the Ministry of Health

Acknowledgements: The authors would like to express their sincere gratitude to Lembaga Pengelola Dana Pendidikan (LPDP), Ministry of Finance of the Republic of Indonesia, for its invaluable support and encouragement in the completion of this research. This work was supported by Lembaga Pengelola Dana Pendidikan (LPDP), Ministry of Finance of the Republic of Indonesia.

Funding: The author(s) disclosed receipt of the following financial support for the research, authorship, and or publication of this article: This work was supported by Lembaga Pengelola Dana Pendidikan (LPDP), Ministry of Finance of the Republic of Indonesia.

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(MOH)

1. The Extended Maternity Leave: Align national labor laws with the "two-year" recommendation by providing at least 6 months of fully paid maternity leave and ensuring job security for mothers who continue to nurse for 24 months.
2. Workplace Support: Mandate the provision of lactation rooms and paid nursing breaks in all public and private sector workplaces.
3. Code Enforcement: Strictly monitor and enforce the International Code of Marketing of Breast-milk Substitutes to curb the aggressive marketing of toddler formulas.
4. Integrated Counseling: Incorporate breastfeeding education into all maternal and child health programs, using the "Biomedical Evidence-Based Preventive Ethics" framework..

5.2 Recommendations for Religious Councils

1. Pre-Marital Counseling: Include breastfeeding education as a core component of pre-marital counseling programs, framing it as a parental duty and a child's right.
2. Sermon Integration: Encourage Imams and religious leaders to discuss the "two whole years" injunction and its health benefits in Friday sermons (Khutbah) and community gatherings.
3. Milk Bank Governance: Collaborate with medical experts to develop Sharia-compliant protocols for human milk banks, ensuring the preservation of lineage while meeting clinical needs.
4. Community Mentorship: Establish "mother-to-mother" support groups within mosques and religious communities to provide peer support for extended breastfeeding.

By integrating Islamic values into public health policy and clinical practice, society can better fulfill its ethical and religious obligations toward the health and wellbeing of future generations, ultimately eradicating the scourge of stunting.

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