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Breastfeeding Problems and Support Demands Experienced by Mothers: A Qualitative Research

Annelerin Yaşadığı Emzirme Sorunları ve Destek Talepleri: Nitel Bir Araştırma

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ABSTRACT Objective: Breast milk has many sets for mother and baby. There is no nutrition that breast milk can provide. The aim of this study is to reveal in depth the problems experienced by mothers during breastfeeding and to learn their support requests. **Material and Methods:** This effective, qualitative research method and the phenomenology design, which is a design of this method, were used. Criterion working group, one of the purposeful working group types, was preferred. The work was completed with a total of 10 units mothers. Descriptive analysis was used to analyze the data. **Results:** Based on the interviews, a theme called breastfeeding and 7 categories were created. These categories are; definition of breastfeeding, the importance of breastfeeding, thoughts about breastfeeding experience, breastfeeding problems, solutions to breastfeeding problems, breastfeeding support requests and the person from whom breastfeeding support is sought. **Conclusion:** It was concluded that the breastfeeding problems experienced by mothers include breast problems, the baby not wanting to breastfeed, and milk insufficiency. They try methods that are not suitable for them to find solutions to these problems. Mothers have not received breastfeeding training and each mother only requests support regarding the problem she is experiencing. It was concluded that the people they wanted to be supported by were nurses and their mothers. It is recommended that every pregnant woman receive breastfeeding education starting from pregnancy and personalized breastfeeding counseling after birth.

ÖZET Amaç: Anne sütünün, anne ve bebek açısından birçok yararı bulunmaktadır. Anne sütünün yerini alabilecek bir besin yoktur. Bu çalışmanın amacı, annelerin emzirme döneminde yaşadıkları sorunları derinlemesine ortaya çıkarmak ve destek taleplerini öğrenmektir. **Gereç ve Yöntemler:** Bu çalışmada, nitel araştırma yöntemi ve bu yöntemle ait bir desen olan fenomenoloji deseni kullanılmıştır. Amaçlı çalışma grubu türlerinden ölçüt çalışma grubu tercih edilmiştir. Toplam 10 katılımcı anne ile çalışma tamamlanmıştır. Verilerin analizi için betimsel analiz kullanılmıştır. **Bulgular:** Yapılan görüşmelere göre emzirme isimli bir tema ve 7 tane kategori oluşturulmuştur. Bu kategoriler şunlardır; emzirmenin tanımı, emzirmenin önemi, emzirme deneyimi hakkındaki düşünceler, emzirme sorunları, emzirme sorunlarına çözüm, emzirme destek talepleri ve emzirme desteği alınmak istenen kişi. **Sonuç:** Anneler yaşadığı emzirme sorunları arasında meme problemleri, bebeğin emmemek istemesi ve süt yetersizliğinin yer aldığı sonucuna ulaşılmıştır. Bu sorunlara çözüm bulmak için kendilerince uygun olmayan yöntemler denemektedirler. Anneler emzirme eğitimi almamış ve her anne sadece yaşadığı problem ile ilgili destek talebinde bulunmaktadır. Desteklenmek istedikleri kişiyi hemşireler ve anneleri olarak belirttikleri sonucuna ulaşılmıştır. Gebelikten itibaren her gebeye emzirme eğitiminin verilmesi doğum sonu kişiye özel emzirme danışmanlığı yapılması önerilmektedir.

Keywords: Breastfeeding; breastfeeding problems; qualitative research; nurse

Anahtar Kelimeler: Emzirme; emzirme sorunları; nitel araştırma; hemşire

Breast milk has many biological, emotional, social and economic benefits for mother and baby. There is no other nutrient that can replace breast milk,

which is a natural nutrient that reduces morbidity and mortality of the newborn and meets all the nutrients required for physical, spiritual and mental develop-

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ment.¹ The World Health Organization and the United Nations Children's Fund recommend starting breastfeeding within the first hour after birth, breastfeeding only without any food, including water, for the first six months, breastfeeding day and night, and continuing breastfeeding for two years or more.²

The initiation and maintenance of successful breastfeeding is affected by many factors in the postpartum period.³ These factors include the mother's demographic and psychological characteristics, social and cultural status, and mother's level of support.⁴ In the first month postpartum, 70% of mothers have breastfeeding problems. Early termination of breastfeeding due to breastfeeding problems may cause some negative consequences such as postpartum depression.⁵

It is stated that most of the mothers experience many problems that will negatively affect breastfeeding, such as postpartum sore and cracked nipples, insufficient milk secretion, and counseling services are available to solve these problems.⁶ When mothers who encounter breastfeeding problems do not receive adequate support from healthcare professionals or incorrect interventions cause breastfeeding to be adversely affected. Mothers and families should be informed about breastfeeding problems that may arise after birth, and every mother should be given breastfeeding training.¹ Because getting support for breastfeeding increases the breastfeeding success of mothers.⁵ For this reason, the consultancy of nurses trained in breastfeeding-related issues is of great importance.^{3,7} Breastfeeding education and counseling are among the duties, authorities and responsibilities of the women's health and diseases nurse.⁸

Based on Swanson's theory of care, this study was conducted to learn about breastfeeding problems and demands of mothers by nurses. The Theory of Care, developed by Swanson in 1993, emphasizes the individual's freedom and life experiences by accepting personal cultural values and beliefs, scientific and clinical knowledge.⁹ This theory aims to accelerate recovery, increase self-confidence and gain independence as a result of the care received. In addition, another aim of this theory is to enable nurses to

understand the difficulties experienced by the individual and to be a guide to solve these difficulties.¹⁰

Most of the studies on the difficulties experienced by the mother during the breastfeeding process are of quantitative nature, and there are few qualitative studies. The aim of this study; to reveal the problems experienced by mothers during the breastfeeding process and to learn about support requests.¹¹ In line with the stated purpose of this study, the answers to the following two questions were sought:

What are the breastfeeding problems of mothers?

What are the support requests of mothers?

MATERIAL AND METHODS

PATTERN OF THE STUDY

In this study, the qualitative research method, which is used to examine a phenomenon in detail and to give meaning, and the phenomenology design, which is a pattern belonging to this method, were used. Phenomenology is a pattern that examines the phenomena that we encounter in our lives, but for which we do not have enough information or do not think much about it. The basis of this pattern is the lives and experiences of individuals.¹² In the light of this information, breastfeeding problems and support requests of mothers were examined in depth in this study.

WORKING GROUP

In studies conducted with the phenomenology design, individuals who will explain the phenomenon should have experience regarding the phenomenon.¹³ For this reason, in this study, the criterion study group, which is one of the purposeful study group types, was preferred. In the criteria study group, criteria suitable for the study are determined. The criteria mentioned here can be criteria created by the researcher or used in previous studies.¹² The criterion of this study was to include primiparous or multiparous mothers who had breastfeeding problems in the first six months.

The study, which was completed with a total of 10 patients, was carried out in a hospital in the Central Anatolia Region. This hospital was chosen be-

cause it is the largest hospital in the region and will provide data diversity. Interviews were held with the participants in the patient room. Meetings in the rooms were planned according to availability and were held individually.

Some characteristics of the mothers participating in the study are given in Table 1.

DATA COLLECTION TOOL

In this study, semi-structured interview technique, which is one of the interview types, was preferred due to its flexible structure. In order to determine mothers' breastfeeding problems and support requests for this situation, the first researcher scanned the literature and interview questions were created.^{11,14,15} The developed interview questions were examined by two experts in the field of Women's Health and Diseases Nursing, and the questions were finalized in line with the suggestions received.

DATA COLLECTION PROCESS

Institutional permission and ethics committee approval (date: June 28, 2022; number 269) was obtained in order to conduct the research. Afterwards, mothers were informed about the subject and purpose of the study. The mothers who volunteered to participate in the study were determined and the time of the interview was planned. The data of the study were collected by face-to-face interviews. During the interview, the notes of the mother's words were taken and then these notes were transferred to the computer. All data collection was discontinued as the data became repetitive.

ANALYSIS OF DATA

In this study, descriptive analysis with an inductive point of view was used to analyze the data obtained from the interviews with semi-structured interview questions. After the transcript was prepared in the analysis of the data, the mothers' expressions were read sentence by sentence and the determined codes were underlined. Then, categories were created from the determined codes. While creating the categories, the questions in the data collection tool were taken into consideration. As a result of the data analysis, a theme named breastfeeding and seven categories were created under this theme.

VALIDITY RELIABILITY

In this study, expert feedback was obtained, direct quotations were included, long-term interaction was ensured with the participants, the data collection tool and process were explained, the characteristics of the study group were explained, the implementation process was described, the role of the researchers was described, and the validity and reliability measures were explained.

In order to ensure reliability in this study, the findings were presented without interpretation and the consistency between the data was checked.

ETHICAL ISSUES

Ethics committee approval, institutional permission, and informed consent were obtained from the participants who agreed to participate in the study in order to conduct the study. The names of the participants

TABLE 1: Participant features.

| Participants code | Age | Number of children | Getting education about breastfeeding | Person giving the training |
|-------------------|-----|--------------------|---------------------------------------|----------------------------|
| K1 | 27 | 1 | Yes | Nurse |
| K2 | 25 | 1 | No | |
| K3 | 24 | 1 | No | |
| K4 | 36 | 3 | Yes | |
| K5 | 32 | 2 | No | |
| K6 | 22 | 1 | No | |
| K7 | 33 | 2 | No | |
| K8 | 24 | 2 | No | |
| K9 | 28 | 2 | No | |
| K10 | 21 | 1 | No | |

were not used, and code names such as K1, K2 were used.

This study was conducted in accordance with the Principles of the Declaration of Helsinki.

RESULTS

As a result of the data analysis, a theme named breastfeeding and seven sub-categories were created: the definition of breastfeeding, the importance of breastfeeding, thoughts about breastfeeding experience, breastfeeding problems, solutions to breastfeeding problems and breastfeeding support requests. The findings of these categories are presented below.

RESULTS REGARDING THE DEFINITION OF BREASTFEEDING CATEGORY

The mothers participating in the study made 5 different definitions for breastfeeding (Table 2).

Four of the mothers (K1, P3, P8 and P10) consider breastfeeding in the category of everything that the baby needs. K4, who defines breastfeeding as mother-baby bond and bond of love, expressed his thought as follows: “I see it as a great bond and love between me and my baby”. K7, who defined breastfeeding as a miracle, expressed her thoughts as follows: “How can I say, the miraculous way of attachment, the mother and baby getting to know each other, so I can say it this way”.

RESULTS FOR THE CATEGORY OF IMPORTANCE OF BREASTFEEDING

Table 3 shows the answers given by the participants regarding the importance of breastfeeding.

Six of the mothers (K2, K7, K9, K5 and K10) state that they find breastfeeding important for the healthy development of the baby, and 4 (K4, K5, K6 and K8) in terms of providing mother-infant bonding. Saying that the importance of breastfeeding is the healthy development of the baby, K2 expressed his opinion as follows: “I think it is important for the healthy development of the baby. It is necessary and very important for babies to be healthy, grow and be fed”.

Stating that the importance of breastfeeding is to meet all the needs of the baby, K1 expressed his opinion as follows: “I think it is very important mentally and physically because it supports the baby in every way”.

Saying that the importance of breastfeeding is to provide mother-baby bonding and to be a natural food, K7 expressed his opinion as follows: “Even though we do not know exactly what is in it, what we see is that it is very important and we should breastfeed. Natural does not hurt, so I think it is important to breastfeed. I think it is important both because it is natural and because we communicate with our child by breastfeeding”.

TABLE 2: Opinions of participants on the definition of breastfeeding category.

| Codes | Participants | | | | | | | | | |
|---------------------------|--------------|----|----|----|----|----|----|----|----|-----|
| | K1 | K2 | K3 | K4 | K5 | K6 | K7 | K8 | K9 | K10 |
| Everything baby needs | X | | X | | | | | X | | X |
| Mother baby communication | | | | | X | | X | | | |
| Mother baby bond | | | | X | | | X | | | |
| Bond of love | | | | X | | | | | X | |
| Something miraculous | | X | | | | | X | | | |

TABLE 3: Opinions of participants on the importance of breastfeeding category.

| Codes | Participants | | | | | | | | | |
|--|--------------|----|----|----|----|----|----|----|----|-----|
| | K1 | K2 | K3 | K4 | K5 | K6 | K7 | K8 | K9 | K10 |
| Ensuring the healthy development of the baby | | X | X | X | X | X | | X | | |
| Ensuring mother-infant bonding | | | | X | | | X | | X | X |
| Meeting all the baby's needs | X | | | | | | | | | X |
| Natural food | | | | | | | X | | | |

RESULTS FOR THE CATEGORY OF THOUGHTS ABOUT THE BREASTFEEDING EXPERIENCE

Table 4 shows the answers given by the participants regarding their thoughts on the breastfeeding experience.

While four of the participants (K5, K7, K9 and K10) categorized breastfeeding as good, three (K8, K9 and K10) stated that they found this experience different.

Saying that the breastfeeding experience is bond and love, P4 expressed her thoughts as follows: “I felt a great bond and love by forgetting the pain I went through”.

K7 expressed his thoughts as follows: “It’s a very good feeling, but I couldn’t do it, I wanted to feed him. But I was forced, I tried and failed; I was worried that he would not suckle, I was worried, and I was happy that I was the one who would feed him”.

K1 expressed his thoughts about the breastfeeding experience as follows: “I felt peaceful because I met my son’s needs naturally...”.

About the breastfeeding experience, K9 expressed her thoughts as follows: “It’s a very differ-

ent, beautiful feeling, you feel that she needs you, I think it’s the maternal instinct, I wanted to feed her”.

RESULTS REGARDING THE BREASTFEEDING PROBLEMS CATEGORY

In Table 5, the answers of the participants regarding breastfeeding problems are given.

Most of the mothers (7 people) who participated in the study stated that the baby did not want to breastfeed, and six mothers stated that they had problems in breastfeeding due to breast problems. Saying that the breastfeeding problem was the baby’s unwillingness to breastfeed and the lack of milk, K3 expressed his thoughts as follows: “My baby had reluctance at the first sucking, I had breast rejection, so I had to express my milk for a week and give it with a bottle, but over time he got used to it and we solved this problem”.

Stating that the breastfeeding problem is that the baby does not want to breastfeed and there is a breast problem, K7 expressed his opinion as follows: “I have a crack on my nipple, it hurts, I had such problems while trying to breastfeed”.

TABLE 4: Opinions of participants on the category of thoughts on breastfeeding experience.

| Codes | Participants | | | | | | | | | |
|-----------|--------------|----|----|----|----|----|----|----|----|-----|
| | K1 | K2 | K3 | K4 | K5 | K6 | K7 | K8 | K9 | K10 |
| Beautiful | | | | | X | | X | | X | X |
| Different | | | | | | | | X | X | X |
| Hard | | X | | | | X | X | | | |
| Bond | | | | X | | | | | X | |
| Anxiety | | | | | | | X | X | | |
| Peaceful | X | | | | | | | | | |
| Enormous | | | X | | | | | | | |
| Happy | | | X | | | | | | | |
| Love | | | | X | | | | | | |
| Miracle | | | | | X | | | | | |

TABLE 5: Opinions of participants on breastfeeding problems category.

| Codes | Participants | | | | | | | | | |
|------------------------------|--------------|----|----|----|----|----|----|----|----|-----|
| | K1 | K2 | K3 | K4 | K5 | K6 | K7 | K8 | K9 | K10 |
| Baby does not want to suckle | | X | X | | | X | X | X | X | X |
| Breast problems | X | | | X | X | | X | | X | X |
| Lack of milk | X | X | X | | | | | X | | |

K8, who said that the breastfeeding problem is that the baby does not want to breastfeed and there is insufficient milk, expressed her thoughts as follows: “It does not hold the breast, this is the biggest problem for me. I also think that my milk is not enough”.

RESULTS REGARDING THE SOLUTION TO BREASTFEEDING PROBLEMS CATEGORY

In Table 6, the answers of the participants regarding the solution to breastfeeding problems category are given.

K7, who tried again and again as a solution to the breastfeeding problem and stopped breastfeeding, stated the following: “I stubbornly tried, but he did not breastfeed. I gave it by milking for a while, then I stopped feeding with breast milk because my milk did not come”.

Stating that she did research on the internet as a solution to breastfeeding problems, K8 said, “I was watching something on the internet, I was looking at what I was wondering on YouTube, I think I was conscious, I could not solve the problems, but I am researching”.

K4, who said that he was milking as a solution to breastfeeding problems, expressed himself as follows: “I fed my baby with a bottle by milking with a milking device”.

Stating that she uses breast milk as a solution to breastfeeding problems, regulates her feeding and starts complementary foods, K1 said, “I used breast milk for the cracks on my nipple. Since I thought that my milk was insufficient, I started to regulate my diet and started supplemental food for my baby”.

RESULTS REGARDING BREASTFEEDING SUPPORT REQUESTS CATEGORY

In Table 7, the views of the participants regarding the category of breastfeeding support requests are given.

Seven participants demand support for the baby to hold the breast, and four participants request support for breast problems. K4 expressed her thoughts on the issues she wants to receive support for breastfeeding as follows: “I know the importance of breastfeeding, but we are having problems in practice. Apart from general information, there may be trainings on the problems of mothers, I am complaining about cracks, for example, it can be about this issue to me”.

TABLE 6: Opinions of participants regarding the solution to breastfeeding problems category.

| Codes | Participants | | | | | | | | | |
|-------------------------------------|--------------|----|----|----|----|----|----|----|----|-----|
| | K1 | K2 | K3 | K4 | K5 | K6 | K7 | K8 | K9 | K10 |
| Try again | | X | | | | X | X | | X | X |
| Stop breastfeeding | X | | | | | | X | | X | |
| Doing research online | | | X | | | | | X | X | |
| Milking feeding | | | | X | | | X | | | |
| Using breast milk for stretch marks | X | | | | X | | | | | |
| Regulating nutrition | X | | | | | | | | | |
| Get advice from experienced moms | | | X | | | | | | | |
| Using cream | | | | | | | | | X | |

TABLE 7: Opinions of participants on breastfeeding support requests category.

| Codes | Participants | | | | | | | | | |
|----------------------------------|--------------|----|----|----|----|----|----|----|----|-----|
| | K1 | K2 | K3 | K4 | K5 | K6 | K7 | K8 | K9 | K10 |
| Attaching the baby to the breast | | X | X | | | X | X | X | X | X |
| Breast problems | | | | X | X | | | | X | X |
| Increase milk | X | | | | | | | X | | |
| Problem oriented education | | | | X | | | | | | |
| Lack of milk | X | | X | | | | | | | |

K7 expressed his thoughts as follows: “When the baby doesn’t want to breastfeed, there’s nothing you can do. I want to breastfeed, I have milk, but it doesn’t work when I don’t suckle. I would like to learn what to do about it, I would like to learn how to solve it, I would like to get support on this issue”.

K3 on the other hand, “I would like to receive education about not enough milk, I would like to be supported, I would like to be helped to be shown how to breastfeed”. expressed his opinion.

RESULTS REGARDING THE CATEGORY OF PERSON WHO WANTS TO GET BREASTFEEDING SUPPORT

K5 expressed his opinion about the person who is asked to receive breastfeeding support as follows: “I would like to receive specialist health personnel from nurses”.

K8 expressed his thoughts as follows: “I am a healthcare professional, there are actually trainings, but I did not take it into account, I can’t get it right now. I guess we don’t care until it happens to you. Of course, I would like to receive it from my environment and nurses.”

DISCUSSION

In this study, mothers defined breastfeeding as everything the baby needs, mother-infant communication, mother-infant bond, bond of love and something miraculous. While all nutritional needs of the baby are met through breastfeeding, it also contributes to the formation of the mother-infant bond.² Mothers emphasized these features while describing breastfeeding. Breastfeeding has many benefits not only for the baby but also for the mother’s health.¹ The mothers did not mention the benefits for their own health while describing breastfeeding. This suggests that they do not know exactly what breastfeeding is.

Breastfeeding has many benefits for maternal and infant health.¹ In this study, mothers find breastfeeding important in terms of healthy development of the baby, providing mother-infant bonding, meeting all the needs of the baby and being a natural food. Samlı et al., concluded in their study that mothers defined the importance of breastfeeding with expres-

sions similar to the results of this study.¹⁶ The data obtained from this study show that although mothers are aware of many of the benefits of breastfeeding for the baby, they are not aware of the benefits for maternal health.

Breast milk and breastfeeding are important in Turkish society and all mothers are encouraged to breastfeed. In studies conducted in our country, it has been found that mothers’ attitudes towards breastfeeding are positive.¹⁷⁻¹⁹ In our study, in parallel with the literature, mothers’ statements about breastfeeding are positive. Mothers participating in the study found the breastfeeding experience mostly positive and expressed them with words such as beautiful, different, difficult, bond, anxiety, peaceful, tremendous, happy, love and miracle. Similar to this study, Binns et al., and Apostolakis-Kyrus et al., found that mothers expressed different emotions during breastfeeding in their studies with adolescent mothers. Çınar et al., concluded in their study that mothers describe their breastfeeding experience with negative expressions such as difficult and positive expressions such as comfortable.²⁰⁻²² It is thought that the experiences of the mothers will have an effect on the continuation of breastfeeding. It is thought that it is important for mothers to receive breastfeeding education from the prenatal period in order to have a positive experience.

It was concluded that among the breastfeeding problems experienced by the mothers included in the study, the baby did not want to breastfeed, breast problems and milk deficiency. Karaçam and Sağlık stated in their systematic review that 24.5% of mothers had breastfeeding problems.²³ It has been proven by studies that the majority of breastfeeding problems are breast problems. Yazıcı et al., found in their study that 64.9% of women had breast problems.²⁴ However, in this study, unlike other studies, mothers also stated that babies do not want to breastfeed as a problem. Mothers who cannot breastfeed their babies due to the fact that mothers are not educated, do not know how to feed, and do not know the correct breastfeeding position; may think that the baby does not want to suckle. We think that the mother’s inability to fully understand what the breastfeeding problem is is an obstacle to solving her problem. As seen in the find-

ings of this study, mothers do not receive breastfeeding education. This causes them to have problems in breastfeeding and not being able to find a solution to the problems they experience.

Participating mothers tend to seek solutions to their breastfeeding problems, such as trying again, stopping breastfeeding, doing research on the internet, milking, using breast milk for stretch marks, regulating feeding, getting advice from experienced mothers, and using creams. Some mothers may stop breastfeeding due to breastfeeding problems and awareness of the importance of breastfeeding. Mothers who do not apply to a health institution or a health worker for a solution turn to internet pages/resources. In addition to encountering false information, this situation can also cause breastfeeding to be adversely affected.

Yang et al., emphasized the importance of supporting mothers for breastfeeding by healthcare professionals.²⁵ In the literature, most of the mothers say that they need support about breastfeeding.²⁶⁻²⁸ In this study, mothers did not/could not receive support for breastfeeding problems. It is understood that mothers want support for issues such as attachment to the breast, breast problems, increasing milk, and lack of milk. They want this support mostly from nurses and their mothers. Maleki Saghooni et al., in their study, similar to this study, mothers expect emotional support from their spouses, family members and health professionals to continue breastfeeding.⁴ Studies have shown that the support that mothers receive from their spouses, friends and environment, and the views of the environment affect the breastfeeding of the baby.^{26,28} Supporting women by health personnel during the prenatal and postnatal period in order to develop the right knowledge and skills will positively affect breastfeeding.

CONCLUSION

Mothers experience some breastfeeding problems such as breast problems and lack of milk. Most of the mothers who have not received breastfeeding education request support only for the problem they are experiencing. Mothers only want support from nurses and their mothers. Mothers have many breastfeeding problems and these problems prevent the baby from getting breast milk. It is recommended to provide breastfeeding education to every pregnant woman from pregnancy and to provide personalized breastfeeding counseling after the birth.

Source of Finance

During this study, no financial or spiritual support was received neither from any pharmaceutical company that has a direct connection with the research subject, nor from a company that provides or produces medical instruments and materials which may negatively affect the evaluation process of this study.

Conflict of Interest

No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

Idea/Concept: İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy; **Design:** İpek Turhan, Müriüvvet Başer; **Control/Supervision:** İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy; **Data Collection and/or Processing:** İpek Turhan; **Analysis and/or Interpretation:** İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy; **Literature Review:** İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy; **Writing the Article:** İpek Turhan, Müriüvvet Başer; **Critical Review:** İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy; **References and Fundings:** İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy; **Materials:** İpek Turhan, Müriüvvet Başer, Hüseyin Aksoy.

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