

Analysis of Breastfeeding Behavior with Duration of Amenorrhea at Nulle Health Center, West Amanuban District: Knowledge of Lactation Amenorrhea Method

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ABSTRACT

Many mothers still provide exclusive breastfeeding in an unsuitable way. This may have resulted from the mother's lack of understanding of the lactational amenorrhea technique (LAM), which could have affected the menstrual cycle's early resumption (less than six months). The aim of this study was to ascertain the Public Health Center's West Amanuban District Regency's LAM knowledge analysis of breastfeeding habit with extended amenorrhea. Cross-sectional design and correlational quantitative type are used in this research methodology. Using a purposive sampling technique, a sample of 50 breastfeeding mothers aged six and older were selected from the Nulle Health Center in West Ambunan Regency to represent the study's population. employing a knowledge, breastfeeding, and amenorrhea length questionnaire to gather data.

Keywords: Breastfeeding Behavior, Knowledge, MAL

BACKGROUND

Developing nations, like Indonesia, are facing challenges related to population growth. The country's population is still growing at a high rate, and its age distribution and balance are out of balance (Supaijo et al., 2017). With 260 million people living there, Indonesia is the fourth most populated nation in the world (Indonesia-investments, 2017). This is demonstrated by the findings of the 2018 global population calculations conducted by the Central Intelligence Agency (CIA) in the United States. With an estimated 262,787,403 people living there as of July 2020, Indonesia ranks fourth in the world among countries with the largest populations (Central Statistics Agency, 2020). The pace of population growth in Indonesia.

The increase in population in Indonesia can certainly affect the country's health and welfare problems. Meanwhile, the Indonesian government has made efforts to reduce the rate of population growth with various programs, one of the efforts made is through efforts to suppress the birth rate using the Family Planning (KB) program. Contraception is a method used to regulate the spacing of pregnancies. Currently, the majority of WUS use contraception, namely 59.7% and 59.3% of them use modern contraception, and only 0.4% use traditional methods of contraception. These programs are then used as a way to emphasize population growth and improve maternal and child health (Ministry of Health of the Republic of Indonesia, 2018).

The primary driver behind the need for family planning services is the improvement of maternal and child health. Determining the desired number of children and the interval between pregnancies can be accomplished through family planning. Contraceptive approaches are used to achieve this (Setyorini, 2014). There are two types of contraceptive methods: old methods and modern methods. Calendar methods and interrupted coitus are the

two categories of traditional contraceptive methods; on the other hand, injections, pills, intrauterine devices (IUDs), implants, emergency contraception, basal body temperature, standard day method, symptothermal, and lactational amenorrhea method (MAL) are the categories of modern contraceptive methods (WHO, 2016).

A method of contraception called the Lactational Amenorrhea Method (LAM) depends on exclusive breastfeeding without the intake of extra food or liquids. The Lactational Amenorrhea Method (LAM) is used after giving birth and continues until the infant is six months old. Its prerequisites include not having menstruated and nursing the infant entirely or more successfully at a frequency of more than eight times per day (Setyorini, 2014). One of the elements influencing the effectiveness of employing LAM is the frequency of breastfeeding (Rohmah & Ningsih, 2021). When used correctly, the Lactational Amenorrhea Method (LAM) is a very successful natural method of contraception with a 98% success rate (WHO, 2016). Because the Lactational Amenorrhea (LAM) method has no adverse effects and is highly appropriate, it should be used.

Women's awareness of family planning with the Lactational Amenorrhea Method (LAM) is 24.1% less than that of tablets and injections, according to data from the Indonesian Demographic Health Survey (Ministry of Health of the Republic of Indonesia, 2017). The findings of a study by Fitriarani et al. (2017), which indicate that of the 34 respondents who were aware of the Lactational Amenorrhea Method (LAM) method of contraception, the majority of respondents—25 respondents, or 73.5 percent—knew less about it. In the meantime, Mulyani's (2018) study revealed that 41.4% of respondents had an unfavorable attitude and 44.8% of respondents had sufficient information. This indicates that nursing moms still lack sufficient knowledge about natural contraceptives (LAM), which means that their attitudes and behaviors.

WHO (2020) states that exclusive breastfeeding aids in a child's survival and the development of the antibodies required to shield them from a variety of diseases that frequently strike young people. The benefits of exclusive breastfeeding for both mothers and their children are numerous; nevertheless, from 2007 to 2014, only about 36% of women globally received this treatment. In 2016, 54% of Indonesians were exclusively breastfed; however, by 2017, that number had dropped to just 35% (Ministry of Health of the Republic of Indonesia, 2018).

Breast milk is essential for a baby's growth, development, and survival because it contains a wealth of macro- and micronutrients. Giving breast milk directly benefits both the mother and the child. The advantages of nursing or providing breast milk.

Breastfeeding stimulates the synthesis of prolactin, which suppresses ovulation in women. As a result, if breastfeeding is continued throughout that time, the likelihood of becoming pregnant during that time is extremely low. In addition to the nursing process, prolactin levels in plasma and the frequency of breastfeeding also have an impact on the duration of lactational amenorrhea in postpartum women. Compared to mothers who breastfeed non-exclusively, those who exclusively breastfeed their children have greater levels of the hormone prolactin (Sutanto, 2018).

Breastfeeding moms' levels of prolactin hormone don't always return to normal. Suckling occurs when the baby is nursing, and this causes the brain to release prolactin.

According to a survey done by researchers at the Nulle Community Health Center in the West Amanuban District, out of 13 mothers who breastfed their infants younger than six months, five of them had lactational amenorrhea and the other eight had already started menstruation. Of the 13 mothers, it was found that 3 people knew about the lactation amnhorrea method which was characterized by not using other types of birth control apart from natural birth control, namely only giving breast milk exclusively, while the other 10 mothers did not know about the lactation amnhorrea method which was characterized by the

mother having used Injectable birth control and among them there are also 3 other mothers who.

METHODS

This study design is cross-sectional and employs a quantitative correlational type. Using the purposive sampling technique, a sample of 50 breastfeeding mothers who were older than six months old at the Nulle Community Health Center in the West Amanuban District were selected as the research population. Questionnaires on knowledge, breastfeeding practices, and the length of amenorrhea were used to gather data. The chi square test was utilized in the data analysis process.

RESULTS

Data for the study was gathered from breastfeeding moms in the West Amanuban District working area of the Nulle Community Health Center who had children older than six months. The study period, which was modified to fit the respondents' free time because they had previously been under a time contract, was May 8, 2022, to May 20, 2022.

Table 1. Distribution of Respondent Characteristics Based on Age, Last Education, Employment Status and Family Income at the Nulle Community Health Center, West Amanuban District

Characteristics	Frequency (f)	Percentage (%)
Age		
<20 Years	2	4,0
20-35 Years	41	82,0
>35 Years	7	14,0
Last education		
Elementary School	6	12,0
Junior High School	27	54,0
Senior High School	15	30,0
College	2	4,0
Job Status		
Work	19	38,0
Doesn't work	31	62,0
Income		
\geq UMR	25	50,0

Source: Primary Data, 2022

Table 1 shows that the majority of respondents were aged 20-35 years, namely 41 people (80%), the education level of the respondents was mostly junior high school as many as 27 people, the employment status of the respondents was more unemployed as many as 31 people (62%), and the income of the respondents $<$ UMR and \geq UMR have the same number, namely 25 respondents (50%).

Table 2. Distribution of Knowledge about the Lactational Amenorrhoea Method (MAL) among Respondents at the Nulle Community Health Center, West Amanuban District

Knowledge	Frequency (f)	Percentage (%)
Good	24	48,0
Not Enough	26	52,0
Total	50	100,0

Source: Primary Data, 2022

Table 2 shows that the majority of respondents had little knowledge about the lactation amenorrhea method, namely 26 people (52%).

Table 3. Distribution of Breastfeeding Behavior among Respondents at the Nulle Community

Health Center, West Amanuban District

Breastfeeding Behavior	Frequency (f)	Percentage (%)
In accordance	27	54,0
It is not in accordance with	23	46,0
Total	50	100,0

Source: Primary Data, 2022

Table 3 shows that the majority of respondents have appropriate breastfeeding behavior, namely 27 people (54%).

Table 4. Distribution of duration of amenorrhea (length of return of menstruation) among respondents at the Nulle Community Health Center, West Amanuban District

Long Amenorrhoea	Frequency (f)	Percentage (%)
>6 Month	32	64,0
< Month	18	36,0
Total	50	100,0

Source: Primary Data, 2022

Table 4 shows that the majority of respondents' duration of amenorrhoea (long return to menstruation) was > 6 months, namely 32 people (64%).

DISCUSSION

The following discussion was held in light of the research findings about the relationship between breastfeeding behavior and the length of amenorrhea at the Nulle Community Health Center, West Amanuban District, and the knowledge of the lactation amenorrhea method (MAL). Mothers' knowledge of the MAL was examined.

The findings of a study on respondents' understanding of the Lactational Amenorrhoea Method (MAL) revealed that while 24 respondents (48%) had strong knowledge, the majority of respondents (26, 52%) had low knowledge. The mother does not fully comprehend this issue because she does not know enough about MAL. Lack of understanding of MAL will also affect the mother's exclusive nursing practices, which will affect the length of amenorrhea and cause the mother to menstruate earlier than usual.

The process of knowing leads to knowledge, which is what happens when someone detects a specific object. The five senses of humans—sight, hearing, smell, taste, and touch—are used for sensing (Notoatmodjo, 2012). Education, work, age, hobbies, experience, culture, and information from the media are a few of the variables that can affect one's knowledge (Budiman & Riyanto, 2013).

In this study, age, education, and employment were some of the criteria that were taken into account in relation to the potential influences on respondents' awareness of MAL. Based on age characteristics, it was observed that many respondents in the 20–35 age group also had good knowledge; likewise, 4 respondents (8%), who were older than 35, had more good knowledge.

Assumptions made by scholars state that knowledge is beneficial if the mother is aware of breastfeeding behavior among mothers at the Nulle Community Health Center, West Amanuban District.

According to the study's findings, the majority of respondents 27 individuals, or 54% exhibited proper nursing behavior. This indicates that in this instance, the mother's breastfeeding of the infant for a minimum of eight times per day at a frequency of ten to fifteen minutes constitutes the proper conduct mentioned. This aligns with the American Academy of Pediatrics' (AAP) recommendation, which states that a newborn should be nursed eight to twelve times a day for a total of ten to fifteen minutes on each breast.

Based on their level of expertise, mothers exhibiting proper breastfeeding behavior are identified in this study. As evidenced by the cross-tabulation results, the majority of respondents (36%) who reported having adequate knowledge also exhibit proper nursing behavior. In the meantime, 34% of responders who possessed less expertise exhibited incorrect nursing behavior. On the other hand, MAL benefits from breastfeeding ten to twelve times a day on average, which acts as a natural contraceptive (Garcia & Mella, 2013). As a result, understanding MAL is crucial since it plays a significant role in influencing an individual's actions (overt behavior). According to Wawan and Dewi (2011), knowledge-based behavior is preferable to ignorance-based behavior.

Education level has an impact on breastfeeding behavior in addition to age. This is evident from the cross-tabulation results of characteristics based on educational attainment, which indicate that the majority of respondents with junior high school education that is, the majority and those with elementary school education that is, 4 respondents, or 8% have inappropriate breastfeeding behavior up to 14 participants (28%). Compared to respondents with only a high school degree, the majority of respondents (20 respondents, or 20% of the sample) demonstrated adequate breastfeeding behavior, while 2 respondents (4% of the sample) with a tertiary education showed suitable breastfeeding behavior overall. Experience in order for the knowledge gained to become actualized information. Someone with more education will be able to access better information. The amount of knowledge a mother has will affect her breastfeeding habits.

Researchers hypothesize that this is related to mothers' inappropriate breastfeeding behavior in the study because many mothers still disagree that breastfeeding should occur no fewer than eight times a day and because many mothers continue to work outside the home and spend more time apart from their children than six o'clock. In addition, a reason why breastfeeding should not be done less than eight times a day is that a growing number of moms work outside the home and are away from their children for longer than six hours; as a result, they are unable to breastfeed their children eight times a day or once every three to four hours. This is one of the causes of mothers' improper nursing practices.

Amenorrhea (long return to menstruation) in moms over an extended period of time at the Nulle Community Health Center in the West Amanuban District.

Table 4 demonstrates that 32 respondents (64%) had amenorrhea (length of return to menstruation) for more than six months, whereas 18 respondents (36%) had amenorrhea (length of return to menstruation) for less than six months. This indicates that a greater number of research participants started menstruating six months after giving birth. The recurrence of menstruation is attributed to alterations in the levels of the hormones progesterone and estrogen, which are crucial for fertility and are typified by the menstrual cycle that triggers ovulation and subsequent menstruation (Lowdermilk, 2013). After having birth, women are considered to undergo temporary infertility, during which time conception typically does not occur, if they do not begin menstruating within a specified amount of time. The researcher assumed that the reason the study participants experienced menstruation for longer than six months was because they had already been breastfeeding for a sufficient amount of time—that is, for at least eight times a day, and for ten to fifteen minutes each time—and that this behavior supported mothers' menstruation for longer than six months. The duration of amenorrhea (the length of return to menstruation) at the Nulle Community Health Center in the West Amanuban District is correlated with knowledge of the lactation amenorrhea method (MAL).

The duration of amenorrhea (the length of return to menstruation) at the Nulle Community Health Center, West Amanuban District, is correlated with knowledge of the lactation amenorrhea method (MAL), according to the study's findings.

The cross-tabulation results of this study, which indicate that respondents with good knowledge experienced amenorrhoea (longer return of menstruation) > 6 months (40%) compared to respondents who had less knowledge (24%), further support the existence of a relationship between knowledge about MAL and duration of amenorrhea. Mothers who are aware about MAL contraception will find it more effective. A study found that the cumulative pregnancy rate within the first six months following delivery ranges from 0.9 to 1.2% when breastfeeding exclusively. This confirms earlier findings (Yuhedi & Kurniawati, 2013) that MAL offers 98% protection against pregnancy. Menstruation lasting less than six months indicates that the success of utilizing MAL contraception is decreased, as many mothers are unaware of this. Thus, information is crucial.

CONCLUSION

The study's findings indicate that most mothers' understanding of the lactation amenorrhoea (MAL) method falls into the categories of bad knowledge (52%) and good knowledge (48%). Additionally, the majority of mothers' nursing behavior is appropriate, with frequency and length of breastfeeding being ≥ 8 times per day. 10–15 minutes (54%) and exhibit improper nursing practices (46%). After birth, the majority of amenorrhea (length of return of menstruation) lasts more than six months (64%) whereas amenorrhoea (length of return of menstruation) lasts less than six months (36%). At the Nulle Health Center in the West Amanuban District, there is a correlation between the length of amnorreha and knowledge of the lactation amnorreha (MAL) approach. The length of amnorreha at the Nulle Health Center is correlated with breastfeeding behavior.

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