

HOMECARA INTERVENTION TO INCREASE DIETARY ALLOWANCE OF SEVERE ACUTE MALNUTRITION (sam) CHILDREN IN YOGYAKARTA, INDONESIA

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HOME CARE INTERVENTION TO INCREASE DIETARY ALLOWANCE OF SEVERE ACUTE MALNUTRITION (SAM) CHILDREN IN YOGYAKARTA, INDONESIA

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ABSTRACT

Severe acute malnutrition (SAM) is one of the major causes of morbidity and mortality among children under the age of five year and affects approximately 13 million children. They have limited access to adequate food and proper health care. There has been a paradigm shift in the management of acute malnutrition from a facility-based to community-centered approach.

The objective of this study was to evaluate effect of home care intervention in increasing dietary allowance of malnourished children aged 6–60 months.

A quasi-experimental study was carried out in selected households of two districts in Yogyakarta province. Purposive sampling was used to identify the study subjects. The sample of 60 malnourished children was included in the study for experimental (35) and control (25) groups. The data collected included anthropometry measurements, dietary intake and socio-demographic characteristics of the studied children. The study was performed in three phases, intensive, strengthening, and independent phase applying nursing care approach. Nutria-survey package was used to compute the nutrient content of the children's meals. Data were analyzed using chi-square, Fisher exact test and t-test.

The results showed that the characteristic of socio-demographic was no significant difference ($p > 0.05$) in the number of children in family, children's sex, exclusive breastfeeding, and mother age among the control group and experiment groups. There was significant difference ($p < 0.05$) in the parent's occupation, monthly family income, education of mother, education of father, and caregiver of children. The percentage of nutritional adequacy rate before the intervention in the experimental group was 83.65% and at the end of the intervention increased to 106.23%. In the control group also increase from the average 73.84% before the intervention and after intervention becomes 85.22%. The analysis showed there were significant increases in nutrition intake with p value 0,003.

It can be concluded that during the three months intervention, home care interventions can increase the percentage of nutritional adequacy rate of severe acute malnutrition. These results can be used by policy makers to modify programs targeting malnourished children to assure their nutrition needs and improve their quality of life.

Keywords: *Severe Acute Malnutrition, children, home care, nutritional needs*

INTRODUCTION

Malnutrition is one of the nutritional problems in Indonesia. This problem is more common in children's under five, especially in developing countries. Malnutrition can be caused due to improper food intake or food that is not enough, or can be caused by inadequate absorption of food (Nelson, 2000). Clinical characteristics of the usual accompanying are: reduced weight gain, stalled, or even decrease upper arm circumference, delayed bone maturation, the ratio of weight to height or tends to decrease, or decrease of skin fold thickness (Santoso, 2010).

Malnutrition in children's under five is not only a concern of health workers, but also the world's attention, as has been stated in the MDG's (Millennium Development Goals): the world should be able to eradicate poverty and hunger, achieving universal primary education, promoting gender equality and empowerment of women, reducing child mortality, improving maternal health, eradication of HIV/AIDS, Malaria and other diseases, ensure environment sustainability, and develop a global partnership (WHO, 2009). In some developing countries, many children who die from diarrheal diseases, pneumonia, and infectious diseases in which nutrition is the cause essentially, the development policies of health, nutrition wide recognized as one of the

important causes of the high morbidity and children's mortality in Indonesia especially in development country (Notoatmodjo, 2011).

According to the data from Ministry of Health in March 2008, the number of children under five with malnourished in Indonesian in 2007 was 4.1 million. Malnutrition is also a problem in Yogyakarta. In 2010 the incidence of malnourished children under five in Yogyakarta district are: Kulonprogo 0.88%, Bantul, Gunung Kidul 0.70%, Sleman 0.66% and Yogyakarta 1.01% of 17.676 children's under five were weighed (Dinkes Yogyakarta, 2011). According to Martorell in the WHO, 2009 due to malnutrition of the child's growth is very detrimental to performance, due to the condition of "stunting" (short stature) and consequently the development of impaired superintend.

From the above explanation shows that the nutritional needs is an important necessity in assisting the process of growth and development in infants and children, considering the benefits of nutrients in the body can help the process of growth and development of children, and prevent various diseases caused by lack of nutrients in the body (Behrman., et al, 1996). Besides that, the problems faced by malnourished children are they need extra nutrition such as calories, vitamins and mineral for their condition and also for growth (Kemenkes RI, 2011).

The equipment that used: digital weight scale with a capacity of 150 kg and 50 gram accuracy. Height was measured by length measuring tool and microtoise with measuring capacity of 2 meters and 0.1 cm accuracy. Food recall used to measure the nutrition needs. Nutritional needs was calculated by using Nutri-survey software. Data were analyzed using descriptive and inferential statistics. Pearson's Chi-square and Fisher Exact tests were used to establish the association between two categorical variables, t-test to compare the score. The significance level was set at alpha was 0.05, and a 95% Confidence Interval.

ETHICAL CONSIDERATIONS

The protocol used was approved by the Committee of Ethics in Research of the Faculty of Medicine Gadjah Mada University. Adequate information was given to parents about this study, and after the informed consent was signed, authorization was given to include each child in the study.

RESULTS

Children participated in the study at the baseline were 60 (25 for control and 35 for intervention). Children participated at the endline were 56 (25-control and 35-intervention). Some children dropped out from this study due to relocation of their residence.

Table 1 The Socio-Demographic Characteristic of the Children (N = 56)

Characteristic and Category	Experimental (n=33)		Control (n=23)		p-value
	n	%	N	%	
Amount of children in family					
1	22	66.7	12	52.2	0.10
> 1	11	33.3	11	47.8	
Gender					
Male	20	60.6	13	56.5	0.76
Female	13	39.4	10	43.5	
History of exclusive breastfeeding					
Exclusive	14	42.4	8	34.8	0.14
Not exclusive	19	57.6	15	65.2	
Age of mothers					
< 35 years	20	60.6	15	65.2	0.06
≥ 35 years	13	39.4	8	34.8	
Parent occupation					
Government employee	1	3.0	0	0	0.0001*
Labor	32	97	23	100	
Monthly family income					
≥ Regional Minimum Wage	17	51.5	6	26.1	0.02
< Regional Minimum Wage	16	48.5	17	73.9	
Education of mother					
High	24	72.7	12	65.2	0.03
Low	9	27.3	11	34.8	
Education of father					
High	25	75.8	15	65.2	0.001
Low	8	24.2	8	34.8	
Caregiver					
Mother	26	78.8	20	87.0	0.0001*
Not mother	7	21.2	3	13.0	

p value of X² of differences between the groups

the control group is only 10.1%. Analysis using nutria-survey show control group on average consume 1,529 calories and 48.3 grams of protein, while in intervention group on average consume 1,810 calories and 82 grams of protein. Nutritional intake is still below the national standard has been established that the consumption of food with a calorie intake of at least 2,000 Kkal/day (Bappenas, 2011).

In this study, an increase in the intake of nutrients not from supplementary feeding from the clinic, but from food that has been prepared by both the mother and better feeding practices. Excellent local food utilization to reduce malnutrition, which the sustainability of the program will be better and can be used as a long-term program.

At the time of home care, nurses teach how good feeding in children. Feeding practices that are not appropriate to infants and toddlers contribute to an increase in the incidence of malnutrition in developing countries (Lutter & Rivera, 2003 in Roche, 2011). Optimal feeding practices must start early (within one hour of birth), is a way to reduce exposure to disease and improve the immune system of children (Edmond et al, 2006; Mullany et al, 2008 at Roche, 2011). Another benefit of early initiation of breastfeeding is to reduce infant mortality, skin contact between mother and child, prepare the digestive tract to better prevent hypothermia, and improve the ability to provide exclusive breastfeeding (Edmond, et al, 2006; Mullany et al, 2008; Chaparro & Lutter, 2007; Brandtzæg, 2002; Pio et al, 2010; Chandrashekar et al 2007 in Roche, 2011). Vir research results (2013) which

intervenes home visit showed an increase breastfeeding as early as possible (early initiation of breastfeeding) increased from 4.6% to 21.9%, giving colostrum increased from 27.9% to 52.9% and the introduction of additional healthy foods to children aged 6-9 months increased from 18.2% to 62.6%.

SUGGESTION

There is need for food rations and nutrition education among malnourished children to improve their nutritional status. These results can be used by policy makers to modify programs targeting malnourished children to assure their nutrition needs and improve their quality of life.

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THE RELATIONSHIP BETWEEN INDIVIDUALS FACTORS, THE HOSPITALS ORGANIZATION, JOB STRESS, AND THE PERFORMANCE OF NURSE IN NURSING CARE AT INPATIENT ROOMS DR. SOEGIRI LAMONGAN HOSPITAL

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ABSTRACT

Hospital was a complex organization which their activities involving various kinds of professional, one of them is nurse. Nurses have leverage of crimes against the quality of services in patients that are the product of the hospital. The aims of the research was to understand the relationship of individuals factors and the organization with job stress and performance as well as the relations job stress and performance of nursing care inpatient room at dr. Soegiri Lamongan Hospital. The sample was 74 nurses. Data collection used questionnaire. Analysis the relationship between variable was done with statistic correlation. The research results showed that there was a correlation between individual factors with job stress; factors organization with job stress. Recommendations from the result of this research is reducing the job stress is placement power nurses in inpatient rooms let see competence, needs room, there should have been systems rotation, creates a harmonious and effective communication, while to optimize performance nurse implementing in giving the care of nursing there needs to be improvements to systems organizing human resources, increased training and education, the systems incentive and use standards performance of nursing care as a promotion staff. The research also can be used to make planning of the professional development.

Keywords: *the individual factor, the organization factor, job stress, nursing care performance*

INTRODUCTION

Organization is a system consisting of a pattern of activity cooperation was conducted regularly by a group of people to reach a purpose (Gitosudarmo, 2000). One of the form of organization is a hospital with operate as a gift health service. The hospital had the system that sensitive and always adapt of the changes that occurred

on external environment. The hospital need effective and efficient management because is an organization that complex that is labor-intensive, solid capital and solid technology.

Health service is products that produced from the hospital. Nursing service is one of part of the main services in the hospital and having significant impact on the quality of

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