# FACTORS ASSOCIATED WITH NUTRITIONAL STATUS STREET CHILDREN IN THE CITY PEMATANGSIANTAR

**Desprin Sinulingga\*, Diana\*\***

*Alumni of the public health, STIKes Sumatera Utara, Indonesia
**Public Health, STIKes Sumatera Utara, Indonesia, diana_ags@ymail.com

## ABSTRACT

Street children are a group at risk of malnutrition because of the life they lead are likely to behave at risk. Nutritional problems of street children is influenced by several factors such as age, gender, activity, shelter, health care utilization, and diet.

This research is analytic. The sample used in this study were street children in the city where the sample is taken Pematangsiantar acidental sampling during the months from October to December 2013. Methods of data collection is done by using the primary data and secondary data.

The results showed that there were 13.2% more nutritional status of street children, 52.8% good nutritional status, nutritional status 30.2% less and 3.8% severe malnutrition. There is no correlation between age and nutritional status of street children p = 0.973. No association with gender nutritional status of street children p = 0.208. There is a relationship between activity and nutritional status of street children there is a relationship p = 0,012.Tidak residence and nutritional status of street children p = 0,059.Tidak no association between health service utilization and nutritional status of street children p = 0,733.Ada the relationship between diet nutritional status street children p = 0.002.

Suggested to Pematangsiantar of Regional Government and relevant agencies to pay more attention to the health of street children through education about nutrition and the provision of health services for street children, either in the form of supplementary feeding and drugs, and to the parents should pay attention to food consumption serves children with diverse wide and varied menu every meal.

**Keywords:** street children, nutritional status

## Background Of The Problem

Increasing the number of street children will improve nutrition and health issues. This is due to street kids who fall into the category of children and adolescents in need of good nutrition and good health to support its growth. According to UNICEF (2008) children are still growing and developing so that children are more susceptible than adults to the poor living conditions such as poverty, non-fulfillment of health care, nutrition, clean water, shelter, and environmental pollution. The influence of disease, malnutrition, and poverty threaten the future of the children and the communities in which they live.

According Moeliono (2001) operationally it can be said that street children are children aged 5-18 years who spent more than four hours of his time on the streets either for work or other activities. One of the health problems that occur in the state of street children are malnourished due to irregular eating behavior. The state of malnutrition is one of the factors that cause a person easily susceptible to infectious diseases, it is because the natural immune system owned .In addition weakened health status of poor street children can also cause nutritional status becomes bad (Indriani, 2006).

In Makassar in 2012 conducted research that street children have nutritional skinny because activity on the streets who spent 4-8 hours per day, do not take advantage of good health care, do not live with their parents, and generally those who have thin nutrition over the age of 13 years and male sex (indina et al, 2012).

Today the growth of street children in Indonesia increasing Pematangsiantar for example, which is very easy to see street children in various streets in the city Pematangsiantar. Among them, in the way Sutomo, the tax department Horas, Merdeka,

Tomuan area, Parluasan station, Marihat, corner 2, the area Tanjungpinggir. Of the whole place, according to the city Department of Social Pematangsiantar, overall street children who often move in the region - the region amounted to 113 people. In everyday life, street children interact with various social elements that are in the way, both among children and adults with various backgrounds activity. When they've been on the road, all the resources they have deployed to brief earn.Street singers the form of money, shining shoes, to beg is a favorite work that occupied by street children there.

In 2012 the NGO Fokrat in town Pematangsiantar held free medical treatment to street children and of the results of the examination disebutkn that the majority of street children have malnutrition.

Based on the description above, the writer interested in conducting research entitled " factors associated with the nutritional status of street children in the city Pematangsiantar " .

**Types Of Research**

This type of research is analytic aims to determine what are the which affects the nutritional status street children in Pematansiantar

**Location Research**

The study was conducted in the city Pematangsiantar.

**Population Research**

The population of street children in the city Pematangsiantar totaling 113 people consisting of about 23 people Sutomo street, neighborhood pajakHoras 15 people, Merdeka 17 people, 13 people Tomuan area, Parluasan station 15 people, Marihat 10 people, local intersection 2 as many as 5 people, and the Cape region edge 15 people. Obtained a sample of 53 street children in the city of Causeway siantar consisting of Jalan Sutomo 10 people, 8 horas Tax, Freedom 10, Tomuan 5 people, Parluasan 5 people, Marihat 5 people, Simpang2 5 people, Tanjungpinggir 5 people. acidental sampling technique sampling.

**Method Of Collecting Data**

The collection of primary data include age, gender, residence, activities, health service utilization, and eating is done with the interview. While nutritional status by using the gauge height and weighing in to street children.

**Data Analysis Methods**

Univariate analysis is used to see each distributed frequency variable and bivariate analysis to examine the relationship between the variables of age, sex, place of residence, activity, and utilization of health services and nutritional status, diet by using chi squere.

**Results And Discussion**

Based on research conducted in the city Pematangsiantar about the nutritional status of street children then obtained as a result of the following:

**Table 1. Relationship Age With Street Children Nutritional Status**

| No | Age | Nutritional status | | | | | | | | Total | % | Prob |
| | | More | | Good | | Less | | Bad | | | | |
| | | F | % | F | % | F | % | F | % | F | % | |
| 1 | 14-16 | 4 | 57,1 | 15 | 52 | 7 | 47 | 1 | 50 | 27 | 50,9 | $p$ 0,973 |
| 2 | 17-18 | 3 | 42,9 | 14 | 48 | 8 | 53 | 1 | 50 | 26 | 49,1 | |
| Total | | 7 | 100 | 29 | 100 | 15 | 100 | 2 | 100 | 53 | 100 | |

Based on statistical test obtained by value p = 0.973 (P> 0.05), meaning Ho accepted meaning no correlation between age on nutritional status of street children. This is in line with research conducted by Yunita (2008) on street children under the care of NGOs YAKMI that street children aged 14-16 years and 17-18 years old there are also severe malnutrition. It is caused by factors from both inside and outside child jalanan.Factor from within like some of them in his time had experienced infectious diseases such as diarrhea, respiratory infections, and there is also affected by tuberculosis who often colaps.Where circumstances such as This can have a negative impact on health and nutrition mereka. Than external factors, ie the majority of them also have bad habits such as smoking, drinking alcohol as drinking wine, beer, etc. Not only that there are also street children who use illicit drugs such as drugs, where circumstances can also have a negative impact on their health and nutrition. (Arisman, 2002). This is in line with the opinion Jessor (1996), which says that adolescence is a period of risk to health, so at this time of great need for nutrients

### Table 2. Relationship Sex With Street Children Nutritional Status

| No | Sex | Nutritional Status | | | | | | | | Total | % | Prob |
|----|-----|------|------|------|------|------|------|-----|-----|------|-----|------|
| | | More | | Good | | Less | | Bad | | | | |
| | | F | % | F | % | F | % | F | % | F | % | |
| 1 | Male | 6 | 85,7 | 18 | 62 | 13 | 87 | 2 | 100 | 39 | 73,6 | |
| 2 | Female | 1 | 14,3 | 11 | 38 | 2 | 13 | 0 | 0 | 14 | 26,4 | *p* 0,208 |
| Total | | 7 | 100 | 29 | 100 | 15 | 100 | 2 | 100 | 53 | 100 | |

Based on statistical test obtained by value p = 0.208 ( P > 0.05 ), meaning Ho accepted meaning there is no relationship between gender and nutritional status of street children . As well as research conducted by Yunita (2008 ) that the street child sex more men who are not good nutritional status compared with street women children.The   sex is due to habits they were not as good as smoking and drinking alcohol will not affect either the health and nutritional status of the only street children. Male doing more activity than street children who are women like driving around for busking , polish , and begging that should street children male sex more requires good nutrition than women because they are more active than women. ( Arisman , 2004) .

### Table 3. Activity Relationship With Street Children Nutritional Status

| No | Activity | Nutritional Status | | | | | | | | Total | % | Prob |
|----|----------|------|------|------|------|------|------|-----|-----|------|-----|------|
| | | More | | Good | | Less | | Bad | | | | |
| | | F | % | F | % | F | % | F | % | F | % | |
| 1 | Heavy Work | 2 | 28,6 | 13 | 45 | 13 | 87 | 2 | 100 | 30 | 56,6 | |
| 2 | Light Work | 5 | 71,4 | 16 | 55 | 2 | 13 | 0 | 0 | 23 | 43,4 | *p* 0,012 |
| Total | | 7 | 100 | 29 | 100 | 15 | 100 | 2 | 100 | 53 | 100 | |

Based on statistical test obtained by value p = 0.012 (P <0.05), meaning that Ho refused meaning there is a relationship between activity and nutritional status of street children. According to research conducted by the Bagong 2000, in the city of Semarang on the activities of street children, street children have a high activity. While long working street children varied, where street children work 6-8 hours per day, 9-12 hours to 13 hours This is because there are too few of them were living with their parents so that their nutritional intake enought.Not only that portion among them are also able to meet their own food needs from the singing, shining shoes and begging so that the frequency of eating three times a day enough so that the need and be well nourished because as we all know the more severe the longer the activity and we do these activities hence the need nutrients that would be even greater. (Guthrie, 2005).

From the analysis it also appears that there also appeared to respondents who were not strenuous activity but has poor nutritional status, this happens because of their bad habits such as smoking, alcoholism, and drug abuse that affect their health and nutritional status (Arisman, 2004) Not only that there are also some of those who have a habit - eating habits are not as good as just skip two meals and prefer food snack. As we know most of the snack is not just empty calories but contain few nutrients. Snacked in fact not prohibited, as long as know how to choose snacks that will nutrients. (Arisman, 2004).

**Table 4. Relationship With Nutritional Status Shelter for Street Children**

| No | Shelter | Nutritional Status | | | | | | | | Total | % | Prob |
| | | More | | Good | | Less | | Bad | | | | |
| | | F | % | F | % | F | % | F | % | F | % | |
| 1 | Good | 5 | 71,4 | 22 | 76 | 7 | 47 | 0 | 0 | 34 | 64,2 | |
| 2 | Not Good | 2 | 28,6 | 7 | 24 | 8 | 53 | 2 | 100 | 19 | 35,8 | p 0,059 |
| Total | | 7 | 100 | 29 | 100 | 15 | 100 | 2 | 100 | 53 | 100 | |

Based on statistical test obtained by value p = 0.059 ( P > 0.05 ) , meaning Ho accepted meaning there is no relationship between the nutritional status of children living on the streets. And the results of the analysis can also be seen that there is also street children who live not good but turned out to have a good nutritional status , it is because some of them can meet the needs of their own meal from the singing , shining shoes and begging so they do not miss the 3 meals a day so it needs to be nourished in activity although they have quite severe because as we all know the more severe the longer the activity and we do these activities , the need for nutrients that would be even greater . ( Guthrie , 2005) .

**Table 5. Relationship With Health Care Utilization Street Child Nutritional Status**

| No | Health Care Utilization | Nutritional Status | | | | | | | | Total | % | Prob |
| | | More | | Good | | Less | | Bad | | | | |
| | | F | % | F | % | F | % | F | % | F | % | |
| 1 | Good | 3 | 42,9 | 10 | 35 | 5 | 33 | 0 | 0 | 18 | 34 | |
| 2 | Not Good | 4 | 57,1 | 19 | 66 | 10 | 67 | 2 | 100 | 35 | 66 | P:0,733 |
| Total | | 7 | 100 | 29 | 100 | 15 | 100 | 2 | 100 | 53 | 100 | |

Based on statistical test obtained by value p = 0.733 (P> 0.05), meaning Ho accepted means there is no relation between the utilization of health services on the nutritional status of street children. From the results of this research is that there are street children a good health service utilization appears to have no good nutritional status, this is because some of them were exposed to tuberculosis in which the disease treatment should be sustainable but they do not follow up treatment provided by the health service such as buying prescription medicine given by a midwife or doctor because of their inability and to check the state of their health back like a check back to the lab so that when their health declines will have an impact on the nutritional status of their own. (Indriani, 2006).

**Table 6. Eating Behaviour Relationships With Street Children Nutritional Status**

| NO | Eating Behavior | Nutritional Status | | | | | | | | Total | % | Prob |
| | | More | | Good | | Less | | Bad | | | | |
| | | F | % | F | % | F | % | F | % | F | % | |
| 1 | Good | 7 | 100 | 22 | 76 | 4 | 27 | 1 | 50 | 34 | 64,2 | |
| 2 | Not Good | 0 | 0 | 7 | 24 | 11 | 73 | 1 | 50 | 19 | 35,8 | p 0,002 |
| Total | | 7 | 100 | 29 | 100 | 15 | 100 | 2 | 100 | 53 | 100 | |

Based on statistical test obtained by value p = 0.002 (P <0.05), meaning that Ho refused meaning there is a relationship between eating behavior and nutritional status of street children From the analysis it can be seen that street children good eating behavior turns nutritional status is not good, it is due to street children generally consume more junk food (junk food) because they think the food is easy to obtain, in addition to more.The call junk food because very little (in fact there is none at all) contain calcium, iron, folic acid, vitamins A and C, while the content of saturated fat, cholesterol, and high sodium. (Arisman, 2004). From the analysis it also appears that there are street children who despite eating behavior are not well turned out good nutritional status, this is due to their lifestyle which is as good as rarely smoke and rarely drank alcoholic beverages. In addition, street children eating behavior is not good but good nutritional status do not have heavy activity because they do not get around but only in one place to do activities streets.

**Conclusion**

From the research we concluded that there was no relationship between age and nutritional status of street children, there is no relationship between gender and nutritional status of street children, there is a correlation between activity and nutritional status of street children, there is a relationship between the nutritional status of children living on the streets, not there is a relationship between the use of health services and nutritional status of street children, there is a relationship between eating behavior and nutritional status of street children.

**Suggestion**

To the Regional Government to pay more attention Pematangsiantar health of street children through education about nutrition and the provision of health services for street children, either in the form of supplementary feeding and medication, the parents should pay attention to food consumption serves children with diverse and varied menu every meal. This study is expected to be useful for other researchers, so that further research could explore other factors that may be associated with nutritional status of street children.

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