

## **MATERNAL BEHAVIOR RELATIONSHIP WEIGHING ON CHILDREN WITH NUTRITIONAL STATUS OF CHILDREN WORKING AREA HEALTH CENTER CITY AEK HABIL SIBOLGA 2016**

**<sup>1</sup>Rumiris Simatupang, <sup>2</sup>Manotar Sinaga**  
STIKES NAULI HUSADA

### **ABSTRACT**

Observing the growth of under five years old children through weighing each month indicated that the percentage of 6-59 month-old children who were not weighed in the last six months tended to increase from 25.5% in 2007 to 34.3% in 2013. The objective of the research was to find out the correlation of women's behavior in weighing of under five years old children with the nutritional status of children. The research was descriptive with cross sectional design. The population was 1,082 under five years old children in 13 integrated service post and 92 of them were used as the samples, using purposive sampling technique and proportional random sampling technique. The result of the research showed that 33.7% of the under five years old children had under weight, 3.3% severe under weight, 4.3% severe stunting and 2.2% severe wasting. The variables which were correlated with nutritional status were knowledge, based on WAZ at p-value=0.001 and WHZ at p-value=0.002, attitude based on WAZ at p-value=0.001 and HAZ at p-value=0.011 and action base on WAZ at p-value 0.001, HAZ at p-value=0.004, and WHZ at p value=0.001 in the working area of Aek Habil Puskesmas Sibolga 2016. It is recommended that the Health Agency and Aek Habil Puskesmas Sibolga, increase health service on the level of integrated service post intensively, especially in nutrition intake by providing giving food supplement program and information about the importance of weighing under five years old children and supporting facility for integrated service post activities.

**Keywords:** Nutritional Status, Women's Behavior, Weighing under five years old children

### **BACKGROUND**

Growth up a child can controled since stage early, monitoring the growth of toddler is very important to know disturbance of growth (Growth-Wobbly) (Syafudin et al, 2009). Growth and development of infants is influenced by many factors, both directly and indirectly. The direct causes that Affect the growth and development of infants is the consumption of food, basic health care, and parenting, while the indirect cause was the level of community participation in Posyandu activities, the which in practice, people acquire knowledge and skills. Research conducted Sulistiyanti and Anik (2013) in Sragen 52.4% of mothers do not actively consider a toddler to Posyandu and the results of research conducted by Hindus, et al (2013) in Puskesmas Darussalam Medan (2013), the participation of children under five mothers weigh as much as 39.7% to neighborhood health center.

Participation is a participation or engagement of a person (individual or community members) in a particular activity. Based on the data from Riskesdas (2010) in

Indonesia, 50% of children do not perform regularly weighing in IHC. This research also shows the tendency of the age increase of a toddler, then the rate of visits to neighborhood health center for routine weighing are declining. The level of community participation health check babies to integrated health service posts (Posyandu) is still low. This condition is influenced by the way view parents who feel their children no longer need to be brought into Posyandu with the increasing age. The decline visit to Posyandu toddler caused many parents feel better knowing her condition so unaware that they still need guidance from health workers in addressing nutrition and health problems in children. In addition, the lack of confidence of the parents on the performance of cadres.

Behavior parents like this who was allegedly the cause of children will continue to be in a state of malnutrition and often sick. Posyandu viability depends on the participation of the community itself. The low participation of the community to come to Posyandu is due to several factors such as age, number of children, the distance from home to

posyandu too far, the lack of attractive facilities in Posyandu, and lack of knowledge of mothers about the importance of a visit to Posyandu (Ismawati, et al, 2010).

Riskesdas (2013), shows the percentage of stunting and poor (W / A) in the province of North Sumatra experienced fluctuating from 2007 to 2013, the prevalence of malnutrition children and less in North Sumatra (2013) 22.4% of this figure over high prevalence of malnutrition nationwide is 19.6%. The number of children under-nourished entrance to the prone position continues to rise following the increase of age, 21.3% of children under five in the category of vulnerable and some are very prone to be malnutrition, because that is a much needed improvement in preventive nutrition.

Result of survey preliminary in Region Public Health Center Sibolga Aek Habil (2015), Health Center oversees Aek Habil Village 2 Village Namely Aek Habil Dan Village of Aek Manis Where Still got 45 infants (2.88%) that has the weighing results under the red line OR called BGM, 15% had less and 0.19% nutrient malnutrition. Come mothers bring their babies Into Giving Program Posyandu if NO FOOD Supplement. Related It then influence Of The ADA problems if ANY toddler NOT payed Monitoring ON Grow blossoms will impact the nutritional problems.

Based on the description background above, it is necessary to do research on the Maternal behavior relationship weighing on children with nutritional status of children working area health center city aek habil sibolga 2016.

**RESEARCH METHODS**

This type of research is analytic study design with cross sectional study researchers conducted measurements of variables one particular moment with the independent variables (knowledge, attitudes and actions) and the dependent variable (nutritional status) was measured by BB /U, TB/U and BB/TB. This research was conducted in Puskesmas Kota Sibolga Aek Habil by reason of the participation of a child's weight is still low and malnutrition as much as 15% as well as the mother came to bring their children to neighborhood health center only if no extra food. This study was conducted in February 2016 to July 2016. The population in this

study are all 6-59 months as much as 1,082 infants across 13 Posyandu. The samples in this study conducted by purposive sampling in which a subject is taken based on their specific goals with some consideration. Data analysis was performed using univariate analysis and a bivariate analysis with chi square.

**RESULTS AND DISCUSSION**

The bivariate analysis performed to determine the effect of one variable review Tbk Against WITH dependent variables using Chi-square test ON Level of significance  $\alpha < 0.05$ .

**Table 1. Distribution of Nutritional Status (BB / U) based Knowledge Capital in Weighing Toddler**

Knowledge	Nutritional status						Amount	Pvalue
	Normal		Nutriti on less					
	n	%	n	%	n	%		
Good	71	84.5	13	15.5	84	100	0.001	
Minus	1	12.5	7	87.5	8	100		

Table 1 shows that the respondents were knowledgeable both indicate the nutritional status of babies that are in the normal nutrient and as much as 84.5% of respondents were knowledgeable about the nutritional status of children under five is less by 7 infants (87.5%). The analysis result was obtained  $p < 0.05$  means there is a relationship of mother knowledge in a child's weight to the nutritional status of children.

**Table 2 Distribution of Nutritional Status (TB / U) based Knowledge Capital in Weighing Toddler.**

Knowledge	Nutritional status						Amount	Pvalue
	Normal		Short					
	n	%	n	%	n	%		
Good	76	90.5	8	9.5	84	100	0.209	
Minus	6	75.0	2	25.0	8	100		

In Table 2 shows that the respondents were knowledgeable good show short nutritional status exist 8 toddlers (9.5%) and respondents were knowledgeable about the nutritional status of children under five short 2 (25.0%). Results of analysis  $p > 0.05$  means

that there is no relationship of mother knowledge in a child's weight to the nutritional status of children.

**Tabel 3. Distribusi Status Gizi (BB / TB) berbasis Pengetahuan Capital di Beratnya Balita.**

Knowledge	Nutritional status				Amount		Pvalue
	Normal		Thin		n	%	
	n	%	n	%			
Good	68	81.0	16	19.0	84	100	0.002
Minus	2	12.5	6	75.0	25	100	

Table 3 shows that the respondents were knowledgeable good show her nutritional status is at normal nutrition were 68 infants (81.0%) and less knowledgeable mothers who have a toddler who lean as much as 5 infants (62.5). The analysis result was obtained p <0.05 means there is no relation between knowledge mother in a child's weight with nutritional status by weight according to height.

**Table 4. Distribution of Nutritional Status (BB/ U) by Attitude Women in Weighing Toddler.**

attitude	Nutritional status				Amount		Pvalue
	Normal		Minus		n	%	
	n	%	n	%			
Positive	70	85.4	12	14.6	82	100	0.001
Negative	2	20.0	8	80.0	10	100	

Table 4 shows that the positive attitude of respondents who indicate the nutritional status of babies that are in the normal nutrition as much as 70 infants (85.4%) and respondents with a negative attitude only normal nutritional status toddler 2 toddlers (20.0%). The analysis result was obtained p <0.05 means there is a relationship mother's attitude in a child's weight with nutritional status based on weight for age.

**Table 5. Distribution of Nutritional Status (TB / U) based Attitude Women in Weighing Toddler.**

Attitude	Nutritional status				Amount		Pvalue
	Normal		Short		N	%	
	n	%	n	%			
Positive	76	92.7	6	7.3	82	100	0.011
Negative	6	60.0	4	40.0	10	100	

Table 5 shows that the positive attitude of respondents who indicate its nutritional status is at normal nutrition as much as 76 infants (92.7%) and respondents with a negative attitude normal nutritional status balitanya No 6 infants (60%). The analysis result was obtained p <0.05 means there is a relationship between the attitude of the mother in a child's weight to the nutritional status of children based on height for age.

**Table 6. Distribution of Nutritional Status (BB / TB) based on attitude Mrs. hearts Weighing Toddler.**

Attitude	Nutritional status				Amount		Pvalue
	Normal		Thin		N	%	
	n	%	n	%			
Positive	65	79.3	17	20.7	82	100	0.055
Negative	5	50.0	5	50.0	10	100	

Table 6 shows that respondents positive attitude showing his nutritional status is at normal nutrition as much as 65 infants (79.3%) and respondents with a negative attitude normal toddler nutritional status by 5 toddlers (50%). The analysis result was obtained p > 0.05 means that there is no relationship in the mother's attitude child's weight with nutritional status by weight according to height.

**Table 7. Distribution of Nutritional Status (BB/ U) based on Capital Measures in Weighing Toddler.**

Action	Nutritional status				Amount		Pvalue
	Normal		Less		n	%	
	n	%	n	%			
Good	6	97.	2	3.0	6	10	0.001
	5	0			7	0	
Minus	7	28.	1	72.	2	10	
	0	8	0	5	0		

Table 7 shows that mothers who brings a toddler to be weighed at Posyandu ≥ 4 times in the last 6 months shows the nutritional status of babies that are in the normal nutrient as many as 65 infants (97.0%) and mothers carrying toddlers to be weighed at Posyandu <4 times in 6 Last month showed the nutritional status of babies that are in the normal nutrition as much as 7 infants (28.0%). The analysis result was obtained p <0.05 means there is a relationship mother's behavior in a child's weight with nutritional status based on weight for age with OR: 0.012.

**Table 8. Distribution of Nutritional Status (TB / U) based on Capital Measures in Weighing Toddler.**

Action	Nutritional status				Amount	Pvalue
	Normal		Short			
	n	%	n	%		
Good	64	95.5	3	4.5	67	100
Minus	18	72.0	7	28.0	25	100

Table 8 shows that mothers who brings a toddler to be weighed at Posyandu  $\geq 4$  times in the last 6 months shows her nutritional status is at normal nutrition as much as 64 infants (95.5%) and mothers carrying toddlers to be weighed at Posyandu  $< 4$  times 6 months showed its nutritional status is at normal nutrition as much as 18 infants (72.0%). The analysis result was obtained  $p < 0.05$  means there is a relationship mother's attitude in a child's weight to the nutritional status of children based on height for age with OR: 0.121.

**Table 9. Distribution of Nutritional Status (BB / TB) based on Capital Measures in Weighing Toddler.**

Action	Nutritional status				Amount	Pvalue
	Normal		Thin			
	n	%	n	%		
Good	64	95.5	3	4.5	67	100
Minus	6	24.0	19	76.0	25	100

Table 9 shows that mothers who brings a toddler to be weighed at Posyandu  $\geq 4$  times in the last 6 months shows her nutritional status is at normal nutrition as much as 64 infants (95.5%) and mothers carrying toddlers to be weighed at Posyandu  $< 4$  times 6 months showed the nutritional status of babies that are in the normal nutrition as much as 6 infants (24.0%). The analysis result was obtained  $p < 0.05$  means there is a relationship mother's attitude in a child's weight to the nutritional status of children is based on body weight for height with OR: 0.015.

**Weighing Knowledge Relationships Respondents in Toddlers with Toddler Nutritional Status.**

According Notoadmodjo (2007) that the results of the study was conduct based knowledge more lasting than the behaviors that are not based on knowledge. Knowledge will make it easier for someone to absorb the

information and implement it in their behavior and everyday lifestyle, therefore the mother's knowledge must be improved so that the knowledge will be increased.

This knowledge can be enhanced through ongoing counseling either through leaflets, posters and can also be through the medium of electronic media. Maternal knowledge about a child's weight in this study the majority of good and according to the researchers this is due to the assumption of the study site is located not far from the city center so that respondents more easily and quickly obtain health information, especially in improving the nutritional status of children.

**Attitudes relationship with mother in Weighing Toddler Toddler Nutritional Status**

Attitude will put someone into a thought like or dislike something, through action and learning, a person will gain confidence and attitude towards something which in turn will affect their behavior. Attitude is the evaluation, and the feeling of someone who is relatively consistent tendency of an object or idea. The attitude of the mother in the weighing infants could affect the nutritional status of a toddler indirectly. The best knowledge is about the attitude of the mother stating if weight infants are below the red line, will soon bring a toddler to the clinic / health workers, but the attitude of the mother follow up that weight infants who do not go up, there is still incorrect.

According Notoatmodjo (2007) attitude is a reaction or response from someone who is still closed to the stimulus or object. Reaction or response in the form of understand, respond to, respect and responsible, other than that attitude is the basis for making a response, or behave in a certain manner it chooses.

Based on research Pristiani, et al (2016) about the relationship of knowledge, attitudes, and employment status mothers with the frequency of a child's weight to neighborhood health center in Puskesmas Pamandati South Konawe stating that there is a relationship between the attitude of mothers with the frequency of a child's weight to posyandu with  $p = 0.025$ , but in contrast to studies conducted Yunidar (2012), which states there is no relationship between maternal attitude to the mother's visit to

neighborhood health center level. The analysis showed that the attitude of mothers have a relationship with the child's weight to posyandu action, it can be associated with the mother's knowledge. In this research, there are mothers who have less existing knowledge, it can affect the mother's attitude. Mothers with a positive attitude but have actions toddlers weighing less this is due to a complete infant immunization has become a reason for the mother so that less active and weigh bring their babies to posyandu. Sikap not necessarily materialize in action, for the measures necessary for the realization of other factors, such as the facilities or infrastructure that can attract attention.

### **Weighing Actions relationship mother in Toddlers with Toddler Nutritional Status**

A child's weight is to measure how often or active toddler weighed every month to the Posyandu. Measures considered good if a child's weight infants weighed at least 4 times over the last 6 months, infants weighing data can be seen in the book KMS brought every visit to Posyandu.

The research result Ramadani, et al (2013) which states there is a relationship a child's weight to the nutritional status of children, and there are differences in the proportion of infants fail to thrive based on regularity weigh toddlers to Posyandu and research conducted Vicka, et al (2014) which stated that there is a relationship of parenting mother with status nutrition in Puskesmas Ranotana Wanae Weru District of Manado City. In this research, there is still a toddler having a frequency weighing less, the low activity of mothers bring their babies, Khomsan (2007) advises the public to make regular visits to the Posyandu toddler because Posyandu is an invaluable tool for monitoring weight toddlers made through weighing is done every month. If weight loss occurs below the red toddler then posyandu expected to provide nutritional advice or provide additional food (PMT) so that the weight decrease can be prevented or, if not insurmountable then made reference to be followed up by a health worker at a local clinic.

### **CONCLUSION**

1. There is a relationship between the knowledge of the mother in a child's weight with nutritional status based on BB / U and TB / TB in Puskesmas city Sibolga Aek Habil 2016.
2. There is a relationship between the attitude of the mother in a child's weight with nutritional status based on BB / U, TB / U in Puskesmas city Sibolga Aek Habil 2016.
3. There is a relationship between the actions of the mother in a child's weight to the nutritional status of children by BB/U, TB/U and BB/TB in Puskesmas city Sibolga Aek Habil 2016.

### **SUGGESTION**

It is expected that the City Health Department and Community Health Center Aek Habil Sibolga Sibolga in order to further improve the level of health care in an intensive posyandu especially health care to improve nutrition and provide socialization / importance of parenting toddlers information including a child's weight to the Posyandu.

### **REFERENCES**

- Devi, M. 2010. Analisis Faktor-faktor yang Berpengaruh terhadap Status gizi Balita di Pedesaan. *Jurnal Teknologi dan Kejuruan*, Vol.33, No.2: 183-192.
- Hasan, N.O. 2013. faktor – faktor yang berhubungan dengan partisipasi ibu balita dalam kegiatan posyandu di kelurahan kayumerah kecamatan limboto kabupaten gorontalo.
- Hindu, S.M.; Santosa, H.; Firia.M. 2013. Faktor-Faktor yang Berhubungan Dengan Tingkat Partisipasi Ibu dalam Penimbangan Balita ke Posyandu di Wilayah Kerja Puskesmas Darussalam Kecamatan Medan Petisah Tahun 2013. *Jurnal Gizi, Kesehatan Reproduksi dan Epidemiologi*, Vol 2, No.6 (2013) : 8-9.
- Hutagalung, Sihol P, 1992. Faktor – Faktor yang Mempengaruhi Perilaku Ibu dalam Menimbang Anaknya di Posyandu Kotip Palu Provinsi Sulawesi Tengah. Tesis Universitas Indonesia.
- Julita Nainggolan,; Zuraida, R. 2011. Hubungan antara Pengetahuan dan Sikap Gizi Ibu dengan Status Gizi Balita di Wilayah Kerja Puskesmas Rajabasa Indah Kelurahan Rajabasa Raya Bandar

- Lampung. Medical Journal Of Lampung University. Vol 1.No.1.2012.
- Kartini, A.; Asdhany,C. 2012. Hubungan Tingkat Partisipasi Ibu dalam Kegiatan Posyandu dengan Status Gizi Anak Balita (Studi di Kelurahan Cangkiran Kecamatan Mijen Kota Semarang). Journal Of Nutrition College,I(1).
- Kementerian Kesehatan Republik Indonesia, 2013, Laporan Hasil Riset Kesehatan Dasar (Riskesdas) Indonesia Tahun 2007, Jakarta: Badan Penelitian dan Pengembangan Kesehatan Depatemen Kesehatan RI.
- Lemeshow,S.; David W.H.Jr, 1997. Besar Sampel dalam Penelitian Kesehatan (terjemahan), Gadjahmada University Press, Yogyakarta.
- Pristiani.E;Junaid.;Paridah. 2016. Hubungan Pengetahuan, Sikap dan Status pekerjaan Ibu Balita dengan Frekuensi Penimbangan Balita ke Posyandu di Wilayah Kerja Puskesmas Pamandati Kabupaten Konawe Selatan.
- Puskesmas Aek Habil. 2015. Laporan Pendataan Sasaran Balita 0-59 Bulan Puskesmas Aek Habil tahun 2015.Sibolga.
- Reihana.;Duarsa.A.B.S. 2014. Faktor- faktor yang berhubungan dengan partisipasi ibu untuk menimbang balita ke posyandu.Jurnal Kedokteran
- Vicka.L.R; Rompas.S; Ismanto.A.Y.2014. Hubungan Pola asuh Ibu dengan Status Gizi Balita di Wilayah Kerja Puskesmas Ranotana Weru Kecamatan Wanea Kota Manado.
- Yunidar. 2012. Faktor faktor yang berhubungan dengan tingkat kunjungan ibu ke posyandu Sinar M keluarga Gampong IE Meulee Kecamatan Sukajaya Kota Sabang. STIKES Kebidanan Universitas budyah Banda Aceh.