# **ORIGINAL ARTICLE**

# Correlation Between Nutritional Status Of Children Aged 12 – 36 Months And Mother's Working Status In Taman, Sidoarjo

# Nur Annisa Nugraheningtyasari<sup>1</sup>, Dwi Susanti<sup>2\*</sup>, Ninik Asmaningsih Soemyarso<sup>3</sup>

<sup>1</sup>Faculty of Medicine, Universitas Airlangga, Surabaya, Indonesia

<sup>2</sup>Department of Public Health & Preventive Medicine, Faculty of Medicine, Universitas Airlangga, Surabaya, Indonesia <sup>3</sup>Department of Pediatric, Faculty of Medicine - Dr.Soetomo General Hospital, Surabaya, Indonesia

#### ARTICLEINFO

Article history: Received 2 August 2018 Received in revised form 7 September 2018 Accepted 23 October 2018

*Keywords:* Nutritional Status, Working Mother, Child.

#### ABSTRACT

**Introduction:** The correlation between child's nutritional status and mother's working status in Indonesia is still unclear. Some research report a high prevalence of low-nourished children whose mother is working, while others report a non significant correlation between child's nutritional status and mother's working status.

**Methods:** This study was case-control study, sample of low-nourished children (treatment group) & well-nourished children (control) are taken from 21 Posyandu in Taman, Sidoarjo in 2015. All data were analyzed using Chi Square test.

**Results:** There are 72 samples which are suitable with the inclusion criteria, consisted of 36 low-nourished children and 36 well-nourished children. From 72 samples, 28 children have a working mother and 44 children have a non-working mother. There was no correlation between Mother's working status (p=0,486), Number of children in the family (p=0,468), History of chronic disease (p=0,054) with child's nutritional status. Level of family income, Mother's education level, History of exclusive breastfeeding, Energy consumption level, Protein consumption level were correlated with child's nutritional status with value (p=0,000), (p=0,002), (p=0,002), (p=0,000), (p=0,001) respectively.

**Conclusion:** Mother's working status is proved that is not correlated with child's nutritional status. But, level of family income, mother's education level, energy & protein consumption level, and history of exclusive breastfeeding are significantly correlated with child's nutritional status.

© 2018 Biomolecular and Health Science Journal. All rights reserved

#### Introduction

Children's nutrition is very important and requires a special attention, because malnutrition is an important factor in the occurence of children's mortality and morbidity, particularly in developing countries.<sup>1</sup> Indonesia as a developing country has a fluctuative number of low nourished children, 18,4% in 2007, decreased to 17,9% in 2010 and increased again to 19,6% in 2013. According to Public Health Office of East Java, number of low-nourished children in East Java is 10,3% from all children under 5 years old. The low-

nourished children are found in 38 cities, where Probolinggo has the highest rank of low-nourished children (15,4%), while Sidoarjo placed the ninth rank with the number of low-nourished children 11,7%.<sup>2</sup>

Factors affecting child's nutrition status are level of family income, level of mother's education, number of children in the family, parenting, energy & protein consumption level, history of exclusive breatsfeeding, history of chronic disease, and hygiene & sanitation of the environment.<sup>3</sup> The globalisation era requires mother to play a dual role, not only as a housewife but also as a working mother. When the mother works, the child will

<sup>\*</sup> Correspondence: dsusan01@gmail.com

<sup>© 2018</sup> Biomolecular and Health Science Journal. All rights reserved. Available at https://e-journal.unair.ac.id/BHSJ

be left at home so this affects the time for mother to take care of her child.

The correlation between mother's working status and child's nutrition status is not clear, but a study was once held in Kudus showed that there was a high prevalence (43%) of low-nourished children in a family with working mother. Thus, this study was conducted to determine the relationship between the nutritional status of children aged 12-36 months and mother's working status and factors other than mother's working status in Taman, Sidoarjo.

#### Methods

This was an analytical-observational study with a case-control approached by comparing the case group and control group. The population were children aged 12-36 months who lived in Taman, Sidoarjo. Samples of the case group were low-nourished children and samples of the control groups were well-nourished children. Classification of nutritional status in this study were based on body weight/age which refers to the standard anthropometry reference table by Ministry of Health of Indonesia. Data of the case group in the form of child's name, parents' names and addresses were obtained from Taman Public Health Care.

After that, data of the case group was examined in this study, including mother's working status, level of family income, mother's education level, number of children in a family, history of exclusive breastfeeding, energy and protein consumption level, and history of chronic disease. Those data were obtained through a direct interview with the mothers of the child in Taman Public Health Care. Data of the control group were also obtained by direct interview with the mother of the child in the same Public Health Services as the case group with the same number of case group as well. The data was processed and analyzed by chi-square test with a significance value of p <0.05.

#### Results

The studied sample characteristics shows in (table 1). 36 (50%) children were low-nutritioned and 36 (50%) children were well-nourished. 28 (38,9%) children had a working mother and 44 (61,1%) children had a nonworking mother. 46 (63,9%) children had mother with high education level, and 26 (36,1%) children had a mother with low education level. 44 (61,1%) had a family with number of children  $\leq 2$ , and 28 (38,9%) had a family with number of children >2. Most of the children which were 28 (38,9%) had a moderate level of energy consumption, but there were still 19 (26,4%) children who had a deficit level of energy consumption. Most of the children which were 46 (63,9%) have a high level of protein consumption, but there were still 10 (13,9%) children who had deficit level of protein consumption. 34 (47,2%) children were exclusively

breastfed and 38 (52,8%) children were not exclusively breastfed. 5 (7%) children had a history of chronic disease of the past 3 months, and 67 (93%) children did not have any.

Table 1. Frequency of Variables

Table 1. Frequency of Variables	
Variables	Frequency (%)
Child's Nutritional Status	
Well-nourished	36 (50%)
Low-nourished	36 (50%)
Mother's Working Status	
Working	28 (38,9%)
Non working	44 (61,1%)
Mother's Education Level	
High (> 9 years of	46 (63,9%)
education)	
Low ( $< 9$ years of	26 (36,1%)
education)	
Level of Family Income	
High ( > Rp. 302.	58 (80,6%)
735,00)*	14 (19,4%)
Low ( < Rp. 302.	
735,00)*	
Number of Children in the	
Family	
$\leq$ 2 children	44 (61,1%)
> 2 children	28 (38,9%)
Energy Consumption Level	
High	
Moderate	17 (23,6%)
Low	28 (38,9%)
Deficit	8 (11,1%)
	19 (26,4%)
Protein Consumption Level	
High	
Moderate	46 (63,9%)
Low	14 (19,4%)
Deficit	2 (2,8%)
	10 (13,9%)
History of Exclusive	
Breastfeeding	24 (17 20)
Yes	34 (47,2%)
No	38 (52,8%)
History of Chronic Disease	
Yes	5 (70)
No	5 (7%)
*Indonesia Control Pursey of Sotistia 2014	67 93%)

\*Indonesia Central Bureau of Satistic, 2014

Correlation between variables are displayed in table 2. Correlation between mother's working status and child's nutritional status was statistically not significant (p=0,486). Correlation between level of family income and child's nutritional status was statistically significant (p=0,000). Correlation between number of children in the family and child's nutritional status was not significant (p=0,468). Correlation between mother's education level and child's nutritional status was statistically significant (p=0,002). Correlation between

energy consumption level and child's nutrition status was significant (p=0,000). Correlation between protein consumption level and child's nutritional level was significant (p=0,001). Correlation between history of exclusive breastfeeding and child's nutrition level was significant (p=0,002). Correlation between history of chronic disease and child's nutrition status was not significant (p=0,054).

Table 2. Correlation between Variables

Table 2. Correlatio				
Variables	Well	trition Status Low	n	
Mother's	wen	LOW		
Working Status				
Working	16 (44,4%)	12 (33,3%)	0,468	
Non working	20 (55,5%)	24 (66,7%)	0,100	
Level of Family	_== (==;= ;= ;= ;	_ ( ( ) ) ) )		
Income				
High	36 (100%)	22 (61,1%)	0,000	
Low	0 (0%)	14 (38,9%)	- ,	
Number of		(,,		
Children in The				
Family				
<u>&lt;2</u>	24(66,7%)	20 (55,6%)	0,468	
>2	12(33,3%)	16 (44,4%)		
Mother's				
Education Level				
High	26 (72,2%)	12 (33,3%)	0,002	
Low	10 (27,8%)	24 (66,7%)		
Energy				
Consumption				
Level				
High &	35(97,2%)	10 (27,8%)	0,000	
Moderate				
Low &	1 (2,8%)	26 (72,2%)		
Deficit				
Protein				
Consumption				
Level				
High &	36 (100%)	24 (66,7%)	0,001	
Moderate				
Low &	0 (0%)	12 (33,3%)		
Deficit				
History of				
Exclusive				
Breastfeeding				
Yes	24 (66,7%)	10 (27,8%)	0,002	
No	12 (33,3%)	26 (72,2%)		
History of				
Chronic Disease	0 (00)	<b>5</b> (1 <b>0</b> 0.04)	0.054	
Yes	0 (0%)	5(13,9%)	0,054	
No	36 (100%)	31(86,1%)		

#### Discussion

Working is related to family income. Mother who works can increase the family income, on the other hand, it will reduce the frequency of interaction with the child left at home. Statistical test results in table 2 shows no significant correlation between the mother's working status and child's nutritional status. Results of this study supported the statement that a working mother increased family income, so that mother could prepare the primary needs of her child better, especially she had a high level of education and extensive knowledge in maintaining the health of her child.<sup>4</sup>

Beside mother's working status, this study results also showed no statistically significant relationship between child's nutritional status and the number of children in the family, and history of chronic disease. A previous study showed that a worsening food consuming could happen to the families whose members were 6 or more. So the family with 4-6 members was not experiencing a worsening food consuming, especially when the family had high income.<sup>5</sup>

However, the results of statistical tests showed that there was a significant relationship between child's nutritional status and level of family income, mother's education level, energy and protein consumption level, and history of exclusive breastfeeding. In spite of its relationship with child's nutritional status, level of family income also related to employment, education, and also the level of family welfare. With sufficient income, all primary needs of the family members can be fulfilled, especially for the child.<sup>6</sup> Mother's education levels are also related to child's nutritional status. A study said that mothers with higher education levels had the skills, knowledge, and a better choice in determining the nutrients and maintaining the health of their children.<sup>7</sup>

Energy and protein consumption level also clearly had an important role in affecting child's nutritional status, because, the nutrients including protein and energy, which were needed by the body for growth, producing energy, and regulate physiological functions of the body. So, if the lack of nutrients happens continuously, it can directly affects the growth of the children.<sup>8</sup> Exclusive breastfeeding also affect child's nutritional status, because exclusively breastfed-children had an immunity against infection better than children who were not exclusively breastfed.

## Conclusion

There was no significant relationship between child's nutritional status and mother's working status. But, there was a significant relationship between child's nutritional status and level of family income, mother's education level, energy & protein consumption level, and history of exclusive breastfeeding. Further study with greater samples and factors affecting child's nutritonal status is suggested.

# **Conflict of Interest**

The author stated there is no conflict of interest.

# References

- Krisnansari D. Nutrisi dan Gizi Buruk. Mandala of Health. 2010; 4: 60-8.
- 2. Timur DKPJ. Jatim dalam Angka Terkini 2012-2013. 2012.
- Tarigan IU. Faktor Faktor yang Berhubungan dengan Status Gizi Anak Umur 6-36 Bulan Sebelum dan Saat Krisis Ekonomi di Jawa Tengah. *Buletin Penelitian Kesehatan*. 2003; 31: 1-12.
- Purnama U. Hubungan Antara Status Ibu Bekerja atau Ibu Tidak Bekerja dengan Status Gizi Anak Balita di Kecamatan Medan Tembung. *Fakultas Kedokteran*. Sumatra Utara: Universitas Sumatra Utara, 2011.
- Ernawati A. Hubungan Faktor Sosial Ekonomi, Higiene Sanitasi Lingkungan, Tingkat Konsumsi dan Infeksi dengan Status Gizi Anak Usia 2-5 Tahun di Kabupaten Semarang Tahun 2003. *Magister Gizi Masyarakat*. Semarang: Universitas Diponegoro, 2006.
- Supadi J. Analisis Faktor-Faktor Pola Asuh Gizi Ibu dengan Status Gizi Anak Umur 0-36 Bulan di Puskesmas Wonosalam II Kabupaten Demak. Universitas Diponegoro, 2002.
- Miller JER, Yana V. Mother's Education and Children's Nutritional Status : New Evidence From Cambodia. Asian Development Review. 2009; 26: 131-65.
- Almatsier S. Prinsip Dasar Ilmu Gizi. Jakarta: PT. Gramedia Pustaka Utama, 2001.