ABSTRACT

Approach *Calgary Family Intervention Model* (CFIM) on the prevention of *food borne disease* and *self-care agency* child

By: Wiwit Dwi Nurbadriyah, S.Kep, Ns

*Food borne disease* (FBD) is a disease caused by consumption of contaminated food. The problem is, school aged children are vulnerable *Food borne disease* because of household food contamination. This indicates the family hygiene as a food handler mainly mother during preparing the food still need to be improved. This condition is supported by child autonomy (*self care agency*) in a clean and healthy living behaviors at school. The family plays a role in instilling the value of health behavior. FBD should be prevented to improve the health status of children.

The study design used *pre experiment one group pre and post test design* with a sample of 35 respondents namely, 4th grade students with their parents (17 people) and 5th grade students with their parents (18 people) in Jatirejoyoso Kepanjen Primary School. *Purposive sampling* technique was used. Demographic data, CFAM (*Calgary Family Assessment Model*), knowledge, attitudes, practices family and children's self-care agency in PHBS at school were used. Data analysis used *Wilcoxon Sign Rank Test* with $\alpha 0.05$.

Results of the study, there was an increase in knowledge and attitudes of families with $p$ value = 0.00, family practice and self child care agency did not change after the intervention CFIM for 4 sessions with each of the $p$ value were 1 and 0.796. CFAM on the functional components of the daily activity was lacking mostly, thus affecting the unchanged practice. While children *self-care agency* was affected by school environment such as affordability of snacks.

Health professionals are expected to optimize School Health Unit program to provide education about clean and healthy living behaviors at the school community (students, teachers and school employees) and family assistance through a cadre. Whereas school are expected to implement policy as an effort to improve health.

Keywords: model of Calgary, food borne disease, child’s self care agency