

ABSTRACT

Severe malnutrition not only caused, by lack of food, directly, but also by childcare pattern, indirectly. A good childcare pattern could increased child nutrition status. A monthly report issued by department of health in Ponorogo on December 2006 noted that 13 public health centres have had severe malnutrition, with the prevalences more than 0,5%. Two of them are Setono and Bungkal public health centre .

The aims of this research was to analyze the relation of childcare pattern (feeding child and medical healthcare) to severe malnutrition cases in Ponorogo.

This research was an analytical observational study using case control design. The number of sample cases was 22 children with severe malnutrition and 44 children in good nutrition used as controls (in Setono and Bungkal public health centre). Chi square test was used to examine the relation of dependent and independent variables and the risk factor.

The result showed that most of caretaker of children under five years old who responsible for taking care severe malnutrition children, were low educated, work as farmers and have less information on nutrition. But, They have good knowledge on taking care children. Meanwhile, most of children under five years old with severe malnutrition was female, age among 24-36 months, had normal body weight born. The result of the research also showed that most of the head of families are low educated and the families are in the low economic level. Most of them are also can be categorized as small families. The childcare pattern which had significant relation to severe malnutrition were feeding pattern ($p=0,00$, with risk factor was 29,769), food variety ($p=0,002$, with risk factor was 7,147), calory allowance ($p= 0,017$, with risk factor of 4,173), and protein allowance ($p=0,00$, with risk factor was 5,617). According to the result of this research, medical healthcare didn't have significant relation to severe malnutrition($p=0,722$).

This research suggested to greed calory and protein allowance, vary and the modify the food, to the severe malnutrition children.

Key words : severe malnutrition, childcare, childfeeding and medical healthcare

ABSTRAK

Timbulnya gizi secara langsung tidak hanya karena asupan makan yang kurang tetapi juga dapat diakibatkan secara tidak langsung oleh pola pengasuhannya. Pola asuh yang baik dapat meningkatkan status gizi balita. Data laporan bulanan di Dinas Kesehatan Kabupaten Ponorogo pada bulan Desember 2006 tercatat 13 puskesmasnya memiliki prevalensi gizi buruk di atas 0,5% diantaranya adalah Puskesmas Setono dan Bungkal.

Tujuan penelitian ini adalah untuk menganalisis hubungan pola asuh makan dan perawatan kesehatan dengan kasus gizi buruk di Kabupaten Ponorogo.

Penelitian ini bersifat *observational analitik* dengan desain studi *case control*. Sampel kasus sebanyak 22 balita gizi buruk dan kontrol sebanyak 44 balita gizi normal di Puskesmas Setono dan Bungkal. Hubungan variabel independent dan dependent serta faktor resikonya diketahui melalui uji chi square.

Hasil penelitian menunjukkan bahwa sebagian besar pengasuh utama balita gizi buruk berpendidikan rendah, bekerja sebagai petani dan memiliki tingkat pengetahuan gizi dan tata cara pengasuhan balita baik, jenis kelamin balita gizi buruk perempuan, usia diantara 24-36 bulan, dan berat badan lahir normal, keluarga berpendapatan dan pengeluaran rendah, ayah pendidikan rendah serta tergolong keluarga kecil. Pola asuh yang memiliki hubungan signifikan kasus gizi buruk adalah pemberian makan ($p= 0,00$) dengan faktor resiko sebesar 29,769, keanekaragaman protein ($p= 0,02$) dengan faktor resiko sebesar 7,147, tingkat asupan energi ($p=0,017$) dengan faktor resiko sebesar 4,173, dan tingkat asupan protein ($p= 0,00$) dengan faktor resiko sebesar 5,617. Tetapi, perawatan kesehatan tidak memiliki hubungan signifikan dengan gizi buruk ($p=0,722$).

Upaya yang disarankan dalam penelitian ini adalah peningkatan kecukupan energi protein serta penganekaragaman makanan kepada balita gizi buruk melalui modifikasi pemberian makan.

Kata kunci: *Gizi Buruk, Pola Asuh, Pola Asuh Makan, Pola Asuh Perawatan Kesehatan*