

Faktor?Faktor Yang Berhubungan dengan Status Gizi Anak Usia 6?59 Bulan di Pulau Sumatera Tahun 2010

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Abstrak

Berdasarkan hasil Riset Kesehatan Dasar (Riskesdas) 2007 prevalensi kekurangan gizi pada anak balita 18,4% (gizi kurang 13% dan gizi buruk 5,4%). Prevalensi gizi buruk (underweight) tertinggi di Provinsi Aceh (10,7%) dan prevalensi balita sangat kurus (wasting) adalah 6,2 persen, tertinggi di Provinsi Riau (10,6%). Akibat dari kurang gizi ini menyebabkan kerentanan terhadap penyakit infeksi dan dapat meningkatkan angka kematian balita. Tujuan dari penelitian ini adalah untuk mengetahui faktor?faktor yang berhubungan dengan status gizi anak berusia 6?59 bulan di Pulau Sumatera Tahun 2010. Desain penelitian ini adalah cross sectional, menggunakan data sekunder dari data Riskesdas 2010. Populasi dalam penelitian ini adalah rumah tangga yang mempunyai anak usia 6?59 bulan, sedangkan sampelnya ialah sebagian populasi (sebagian rumah tangga yang mempunyai anak usia 6?59 bulan). Dalam penelitian ini didapatkan prevalensi anak gizi kurang 12,5%, gizi buruk 4,9% dan gizi lebih 5,8% (BB/U), prevalensi anak pendek 15,8%, sangat pendek 18,3% (TB/U) dan prevalensi anak kurus 7,3%, sangat kurus 6,3% dan gemuk 13,75% (BB/TB). Pada analisis bivariat didapatkan hubungan yang bermakna antara pemantauan pertumbuhan dengan status gizi anak berdasarkan BB/U, TB/U, antara pemanfaatan pelayanan kesehatan dengan status gizi anak berdasarkan BB/TB, antara sanitasi lingkungan dengan status gizi berdasarkan BB/U dan BB/TB, antara pengeluaran perkapita dengan status gizi anak baik itu berdasarkan BB/U, TB/U, BB/TB, antara pendidikan ibu dengan status gizi balita baik itu berdasarkan BB/U, TB/U maupun BB/TB, antara jumlah kelahiran anak dengan status gizi balita berdasarkan TB/U. Berdasarkan hasil penelitian ini dapat disarankan kepada Dinas Kesehatan Provinsi untuk meningkatkan kepedulian dan investasi dalam upaya pencegahan masalah gizi.

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Based on the Basic Health Research (Riskesdas) 2007, the prevalence of children malnutrition who under five is 18.4% (its underweight 13% and malnutrition 5.4%). The highest of the prevalence of malnutrition (underweight) is in province of Aceh (10.7%) and the thinnest of the prevalence of children under five (wasting) is 6.2 percent which located in province of Riau (10.6%). As a result of this malnutrition the children is vulnerable to infect of diseases and can cause increased of their mortality number. This study has been proposed to determine about factors regarding with nutritional status of children aged 6-59 months on the island of Sumatra in 2010. The design of this study is cross sectional, which formed of secondary data from the data Riskesdas 2010. The population in this study is families that have children aged 6-59 months meanwhile the sample is part of the population (some households who have children aged 6-59 months). Based on this study, the prevalence of child nutrition is 12.5% for malnutrition, 4.9% for severe malnutrition and 5.8% for over. (based on weight / age). The prevalence of children heights is 15.8% for short children, 18.3% for very shorts (based on height /aged). And the prevalence of children weights is 7.3% for skinny children, 6.3% for very skinny and 13.75 for fat (based on weight/height). From two variants analysis, there is found a significant correlation: between the monitoring of growth and nutritional status of children based

on weight / age, height / age; between the utilization of health services and nutritional status children based on weight / height; between environmental sanitation and nutritional status based on the weight / age and weight / height; between cost live per capita and child nutritional status based on weight / age, height / age, weight / height; between maternal education with nutritional status of children whether it is based on the weight / age, height / age or weight / height; and between the number of births of children and nutritional status of children under five based height/ age.