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Factors Influencing The Nutritional Status Of Infants Aged 0-6 Months In Trenggalek

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ABSTRACT
Based on an initial survey in February 2022 in the Panggul Health Center work area, there were 365 babies aged 0-6 months, of which 6 babies (1.64%) were obese, 27 babies (7.4%) had overweight, 13 babies (3.56%) had underweight, and 319 babies (87.4%) had normal nutritional status. The purpose of this study was to determine what factors influence the nutritional status of babies aged 0-6 months in the Panggul Health Center work area. This research is an analytical survey research.cross sectional. Respondents were taken using the techniquepurposive sampling. With a sample of 83 people. Independent variables are Gender and Birth Weight of Babies. Dependent variable is Nutritional Status of Babies Aged 0-6 Months. Results: The results of the study showed that most of the babies who had poor nutritional status were male babies, namely 78.6%, and most of the babies had low birth weight, namely 71.43%. The results of the analysis using the chi square test showed that there was a relationship between the sex of the baby and the nutritional status of the baby in the working area of the Pangkal Pinang Health Center.p-valueof 0.001 < 0.05. There is a relationship between the birth weight of babies and the nutritional status of babies in the working area of the Pangkal Pinang Health Center.p-valueof 0.000 < 0.05. Based on the research results, it is known that the variables related to Nutritional Status in Infants Aged 0-6 Months are Gender and Birth Weight of the Infant.

Keywords: Babies, Infant, Low Birth Weight, Infant

INTRODUCTION

Babies are in the golden period because during this period there is rapid growth and development, reaching its peak at the age of 24 months. The golden period in a child's life can be achieved optimally if supported by proper nutritional intake from birth in the first two years (Mufida, 2015).

According to the Government of the Republic of Indonesia 2012, Breast Milk (ASI) as the only nutrition for babies up to the age of six months is considered very important for growth and development, so it is recommended by the government. After receiving exclusive breastfeeding for 6 months, babies can be given complementary foods (MP-ASI) according to their age (Wahyuni, 2015).

Based on the results of basic health research (Riskesdas) at the national level shows the prevalence of malnourished toddlers was 17.9% in 2010 and tended to increase in 2013 to 19.6% (Riskesdas, 2013). Based on an initial survey in February 2022 in the Panggul Health Center work area, there were 365 babies aged 0-6 months, of which 6 babies (1.64%) were obese, 27 babies (7.4%) had overweight nutritional status, 13 babies (3.56%) had underweight nutritional status, and 319 babies (87.4%) had normal nutritional status.

According to Nurapriyanti (2015), the causal factors that influence nutritional status are: (1) Direct causes, namely children's food and infectious diseases that children may suffer from. Insufficient intake or food can cause malnutrition, in addition to this malnutrition can also be

influenced by infectious disease. (2) Indirect causes namely food security in the family, child rearing patterns, health services, environmental health, parental education level, income level, type of work, level of knowledge, number of family members and socio-culture.

The impacts of malnutrition include decreasing physical and intellectual quality, as well as decreasing body resistance which results in increased risk of illness and death, especially in biologically vulnerable groups, namely the toddler age group. The short-term impacts of malnutrition or poor nutrition in toddlers are impaired growth and development of the brain, muscles, body composition, metabolic programming of glucose, fat, and protein. Long-term impacts can include low reasoning ability, educational achievement, immunity, and work productivity (Sjarif et al., 2011).

Malnutrition is a very complex and interrelated problem between one factor and another. The causes of malnutrition in toddlers, both direct and indirect, have varying and different roles in each region. Therefore, it is very important to know the factors that influence the nutritional status of infants aged 0-6 months in the working area of the Panggul Health Center. Based on the background of the problem, the problem can be formulated, namely: what factors influence the nutritional status of infants aged 0-6 months in the working area of the Panggul Health Center?

METHODS

This research is an analytical survey research.cross sectional. Respondents were taken using the purposive sampling technique. With a sample of 83 people. Independent variables are Gender and Birth Weight of Babies. Dependent variable is Nutritional Status of Babies Aged 0-6 Months.

RESULT

Table 1. Results of Analysis of Gender with Nutritional Status of Infants Aged 0-6 Months in Trenggalek with Chi Square Test

	Malnutrition		Good Nutrition		Total	P-Value
Baby Gender	**N**	**%**	**N**	**%**	**N**	
Man	11	78.6	21	30.4	31	
Woman	3	21.4	48	69.6	51	0.001
Amount	14	100	69	100	83	

Based on the results of the analysis using the 0.001 < 0.05. Thus statistically chi square test on the Gender of Babies on the Nutritional Status of Babies in the Work Area of the Panggul Health Center, the P-Value is known to be it can be stated that there is a relationship between the gender of the baby and the nutritional status of babies in the working area of the Panggul Health Center.

Table 2. Results of Analysis of Birth Weight of Babies with Nutritional Status of Babies Aged 0-6 Months in Trenggalek with Chi Square Test

Baby Gender	N	%	N	%	Total	P-Value
Low	10	71.43	2	2.9	12	
Normal	4	28.57	65	94.2	69	0,000
More	0	0.0	2	2.9	2	
Amount	14	100	69	100	83	

Based on the results of the analysis using the chi square test on Infant Birth Weight to Infant Nutritional Status in the Panggul Health Center Work Area, it is known that the P-Value is 0.000 <0.05. Thus, statistically it can be stated that there is a relationship between Infant Birth Weight and Infant Nutritional Status in the Panggul Health Center Work Area.

DISCUSSION

A. Gender

Based on the results of this study, it shows that the majority of babies who have poor nutritional status are male babies, namely 78.6%, and female babies 21.4%.

B. Birth Weight

Based on the results of this study, it shows that most babies who have malnutrition status is babies who have low birth weight, which is 71.43%, and babies who have normal birth weight, which is 28.57%

C. Infant Nutritional Status

The results of the study showed that most babies had good nutritional status, which was 83.1%, and malnutrition status was 16.9%. This shows that the nutritional status of some babies in the Panggul Health Center work area is good (83.1%), and no malnutrition or more was found in babies. However, this is not yet fully optimal because malnutrition was still found in babies (16.9%).

D. Relationship between Baby Gender and Nutritional Status in Babies Aged 0-6 Months in Trenggalek

This result shows that the majority of babies who have poor nutritional status are male babies, namely 78.6%, and female babies 21.4%. Based on the results of the analysis using the chi square test on the Gender of Babies on the Nutritional Status of Babies in the Working Area of the Panggul Health Center, the P-Value is known to be 0.001 <0.05.

E. Relationship between Birth Weight and Nutritional Status of Infants Aged 0-6 Months in Trenggalek

This research shows that the majority of babies who have poor nutritional status are babies who have low birth weight, namely 71.43%, and babies who have normal birth weight are 28.57%. Based on the results of the analysis using the test chi squere about Baby Birth Weight on the Nutritional Status of Infants in the Working Area of Panggul Health Center, it is known that the P- Value is 0.000 <0.05. Thus, statistically it can be stated that there is a relationship between Infant Birth Weight and Infant Nutritional Status in the Working Area of Panggul Health Center.

According to the opinion of researchers, babies born with low birth weight will take longer to reach normal weight. Unlike babies who are born with normal birth weight, babies will find it easier to maintain their weight according to their age or increase their weight by consuming exclusive breast milk. In this study, babies were still found at the time. Thus, statistically, a person can be born with a normal birth weight, but when it is stated that there is a gender relationship.

According to the researcher's opinion, the level of needs in boys is greater when compared to girls. Likewise with energy needs, so that boys have a higher chance of suffering from KEP than girls if their protein and energy needs are not met properly. This high need is due to the higher activity of boys compared to girls so that they need high nutrition (Almatsier, 2005). This is in line with the results of the 2007 Riskesdas which stated that the national malnutrition and undernutrition status was higher in boys compared to girls.

Efforts that can be made to prevent malnutrition in infants, especially baby boys, include providing counseling to mothers and families to meet the baby's protein and energy needs and carrying out regular monthly weighing at the nearest Posyandu.

E. Relationship between Birth Weight and Nutritional Status of Infants Aged 0-6 Months in Trenggalek

Based on the results of this study, it shows that the majority of babies who have poor nutritional status are babies who have low birth weight, namely 71.43%, and babies who have normal birth weight are 28.57%. Based on the results of the analysis using the test chi squere about Baby Birth Weight on the Nutritional Status of Infants in the Working Area of Panggul Health Center, it is known that the PValue is 0.000 <0.05. Thus, statistically it can be stated that there is a relationship between Infant Birth Weight and Infant Nutritional Status in the Working Area of Panggul Health Center.

These results are in line with Srikandi (2011) in his research which showed that there was a significant relationship between a history of low birth weight and nutritional status in toddlers in the working area of the Gondosari Health Center, District Kudus in 2011. Efforts that can be made to prevent malnutrition in babies include fulfilling energy and nutrient intake, good parenting patterns and so that babies do not often suffer from infectious diseases.

CONCLUSION

Based on the results of this study, it can be concluded that the nutritional status of infants aged 0–6 months in the working area of Panggul Health Center is significantly influenced by two main factors: the gender of the baby and the birth weight. The analysis showed that male infants are more likely to have poor nutritional status compared to female infants. Additionally, low birth weight is strongly associated with poor nutritional outcomes in infants, as most of the undernourished infants in this study had a history of low birth weight. These findings highlight the importance of early identification and monitoring of at-risk infants, especially boys and those born with low birth weight. Regular growth monitoring, adequate nutritional intake through exclusive breastfeeding, and parental education are essential strategies to improve infant nutritional status and prevent malnutrition during the critical early months of life.

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