



## THE CORRELATION BETWEEN SELF-EFFICACY WITH NUTRITIONAL PATTERN OF MENDICANT MOTHER TO UNDER-FIVE CHILDREN

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### ABSTRACT

### Keywords

Nutrition fulfill was an important thing to be considered in increasing the nutrition status of under-fives because under five years old children had a rapid growth phase. Therefore, the intake of nutrition needs to get more attention. The purpose of this research was to analyze the correlation between self-efficacy of a mother from mendicant families with nutritional parenting pattern of under-fives in the area of Mojokerto Regency East Java. The research design used case-control with case population which was a mendicant mother with healthy under-fives and control population was a mendicant mother with under-fives who had nutritional problems. The number of sample was 79 people for the case group and 41 people for the control group. The sampling technique used multistage sampling. The data collection used questionnaire which had been tested the validity and reliability to 30 people. The data analysis used statistic chi-square test. The research result showed that the correlation of self-efficacy with good parenting pattern as many as 68 people (81.0%) the analysis result with chi-square test obtained  $p = 0.000$ , *self-efficacy* with good love pattern as many as 52 people (61.9 %) the result analysis with chi-square test obtained  $p = 0.000$ , *self-efficacy* with sharpening pattern as many as 57 people (67.9%) the analysis result of chi square test obtained  $p = 0.000$ , *self-efficacy* with nutritional parenting pattern as many as 44 people (52.4%) the result of analysis with chi square test obtained  $p = 0.001$ , value of  $\alpha = 0.05$ , meant there was a correlation between self-efficacy with nutritional parenting pattern of under-fives. The nutritional parenting of under-fives was important to be considered because it had a huge impact and prolonged impact on health status, physic and mental development, and also the productivity of children when they grew up, so self-efficacy was needed to give nutrition to their under-fives.

*Self-efficacy, nutritional pattern, under-five children.*

## INTRODUCTION

Society is the unity of human life that interacts according to a certain system of custom which is continuous and bound by a sense of the same identity. In a development process of a region, society can be divided into two parts, simple society and developed society. The simple society is a group of people with an old mindset and can only distinguish between men and women, while the developed society is a society that has mindset to achieve some goals in life for the future with the people around it even though not in the same group (Soekirman, 2000). Society originally formed from a group of people. A family that is led by the head of family and then from many families gradually form neighborhood and hamlet until finally form a village. Village develops into several sub-districts and then become Regency, Province until finally form a State. Society members in certain areas will be beneficial if they are able to contribute to other society members. Participation of the society is the participation of all members in solving the problems. Public participation in the field of health means the participation of all members of society in solving every problem. In this case, people are actively thinking, planning, doing, and evaluating programs of society's health. Institutions in society can only motivate, support and guide them (Notoatmodjo, 2007). Contribution of health society members is solving problems of parenting nutrition of under-fives by mothers from mendicant families (Friedman, 2003).

Cases of severe malnutrition occur in groups of under-fives so it is said to be a vulnerable group because that age is a rapid growth period which requires optimal nutrition. Until now, health and nutrition issues are still prioritized for children under five years old because they are susceptible to health and nutrition problems, that time is an important period in the growth process. At this time, the growth process is very fast and it is called the golden age, when the brain develops very quick and will stop when a child reaches three years old (Elizabeth Hurlock, 1997). Under-fives who are

undergoing a rapid growth process, require more intake of nutrients with better quality and the participation of family such as education and knowledge of mother, family income, parenting, home sanitation, availability of time and support from father, can be a factor that affects nutritional status (Rahmat Hidayat dede, 2009). Patterns of parenting also contribute to the nutritional status of children, one of the parenting patterns related to the nutritional status of children is the pattern of feeding. The parenting of feeding as a parenting practice which can be implemented by mothers to their under-fives that is related with the way and the situation of eating process. In addition to eating patterns, mother's health care patterns also affect the health status of under-fives which will indirectly affect the nutritional status of children (Carman, 2014). In the development of children, the role of the mother is very dominant to nurture and educate children to grow and develop into a quality child. The feeding pattern in children under five years old related to eating habits that have been implanted since the beginning of human growth (Bisits Bullen, 2013).

Every parents is obliged to provide safe and comfortable care and protection for children. The first five years old is an important period that determine the formation of physic, physiology, and intelligence of the brain, therefore the children have to obtain intensive care and protection in this period (Sinha, 2012). Patterns of parenting in the form of attitudes of mother or other caregivers in terms of proximity to children, feeding, taking care, cleanliness, giving love and so forth (D&E nanang, 2010). All of these are related to the condition of the mother especially in health, nutritional status, general education, knowledge and skills about good parenting, roles in the family or society, the nature of daily work, family customs, society, and so on from mother or baby sitter (Soekirman 2000). Provision of food is a form of educating eating skills, fostering eating habits, fostering appetite for the type of food, fostering the ability to choose food for health

and educate good eating behavior according to their respective culture. Lack of feeding will result in difficulty of eating or lack of appetite which have a negative impact on health and further growth (Bandura albert, 1999). Self efficacy is basically the result of cognitive processes in the form of decisions, beliefs, or awards about how far the individuals can estimate their ability to perform certain tasks or actions to achieve desired outcomes. Self efficacy has nothing to do with the skills that has been had, but it relates to the individuals' belief about what can be done with any skill they have. Self efficacy emphasizes the components of one's self-confidence in facing future situations that are vague, unpredictable, and are often full of stress. Although self efficacy has a large causal effect on our actions, self efficacy combines with the environment, previous behavior, and other personal variables, especially expectations of outcomes to produce behavior. Self efficacy will affect some aspects of one's cognition and behavior. Gist and Mitchell said that self efficacy can lead to different behaviors among individuals with similar abilities because self efficacy affects choice, purpose, problem-solving, and persistence in business. Someone with Self efficacy believes that they are capable of doing something to change the events around him, while someone with low self efficacy thinks himself basically incapable of doing everything around him. In difficult situations, people with low efficacy tend to give up easily. While with people with high self efficacy will try harder to overcome the existing challenges. Self efficacy plays an important role in motivating workers to accomplish challenge in work to achieve a particular goal (Bandura albert, 1999).

In daily life, Self efficacy leads us to determine our dreams and can survive to face the difficulties in it. Over a hundred studies show that self-efficacy predicts worker productivity when problems arise, strong self-efficacy feelings encourage workers to stay calm and look for solutions rather than contemplate their inadequacies. Effort and persistence produce achievement. Self efficacy is a positive indicator of core

self-evaluation to perform self-evaluation that is useful for self-understanding. Self efficacy is one aspect of knowledge about self or the most influential knowledge in everyday human life because Self efficacy also influences the individual in determining the chosen action to achieve a goal, including the estimation of the challenges that will be faced (Brown, 2015).

Based on the above description, it can be concluded that self-efficacy in general is a person's beliefs about his ability to cope with the diverse situations that arise in his life. Self efficacy is not related to the skills that he possesses in terms of cognition and behavior. Therefore, the behavior of one individual will be different from the other. A mother must have confidence in her children nutrition problem. Mothers who have a good self efficacy will try to find out and apply the appropriate pattern of nutritional care to their sons and daughters. Self efficacy will be good if a mother cares about the health and the growth of their under-fives. With care and compassion, a mother believes that under-fives need good and appropriate nutrition to get optimal growth and development of their under-fives.

Condition of nutritional status in Mojokerto regency in 2011, children under five years old who have less nutrition as many as 7.750 under-fives, malnutrition as many as 1,388 children. In 2012, under-fives who suffer less nutrition as many as 1049 children, malnutrition as many as 149 children. In the year of 2013, less nourished children are 1040 and the malnutrition ones are 139. In 2014 under-fives with less nutrition are 1036 and malnutrition are 106. In 2015, under five years old children who experience Under Red Line are 558 (0.8%) and malnutrition is 243 (Mojokerto, 2014). Preliminary data collection conducted by researchers with cadres and head of hamlet on October 9-11, 2016 obtained that feeding habits on mendicant families with less nutrition among children is often giving the under-fives snack so they do not like to eat and mother do not give food, provided special food, eating pattern that has been done 2 or 3 times, breast milk that is given until 2

years, food supplement milk that is given at the age of 2 months (iksdasDinkes Mojokerto, 2010). Feeding habits in mendicant families with healthy under-fives / good nutritional status children include the giving of frequent snacks but also giving regular meals, feeding is provided specifically for under-fives, 3 times daily diet, breastfeeding is given until the age of 2 years, and complementary feeding of breast milk is given when they reach 4 months old.

The purpose of this research is to analyze the correlation between self-efficacy with the nutritional pattern of mendicant mother to under-five children in the region of Mojokerto Regency East Java. By knowing the self-efficacy in mother, the researcher will know how big the role of self-efficacy in nutrition pattern of under-fives include parenting pattern, love pattern, and sharpening pattern, also pattern of nutrition giving at under-fives so that they have good nutritional status.

## METHODS

This study was a quantitative study and used case-control design because the researchers would compare the cases (subjects with particular characteristics) with subjects who did not experience those characteristics that became the control group. (Notoatmodjo, 2010). Before doing the research, the researcher did ethical clearance in the faculty of Public Health in Airlangga University, Surabaya. Whenever the interview was done to the respondents, the researcher did the informed consent so the respondents knew what the researcher meant. The case population in this study were all positive deviance mothers of mendicant families with healthy children of under five years old (BW/Age) in Mojokerto regency of East Java. The control population in this study were all mothers from mendicant families who had children under five with nutritional problems (BW/Age) in the Mojokerto regency of East Java. The number of case group samples were 79 people and control group were 41 people. Inclusion criteria from the respondents in the case group were positive deviance mother from mendicant family who had health

under-five child with good nutritional status (Body Weight/Age) in the area of Mojokerto regency of East Java, while for the control group was non-positive deviance mother from mendicant family who had healthy under-five child with less nutritional status (BW/Age). Exclusion criteria in this research were healthy under-five children who had good and less good nutritional status, but children with age more than five years old and their mother were not willing to do the test and not being cooperative. Sampling was done by multistage random sampling method with multilevel sampling where the researcher sampled the sample through the stratified process. The first stage to collect data was to establish the location/village that had under-five children with bad nutrition from mendicant families, then the second stage was identifying the population (both the number of malnourished and healthy under-fives from mendicant families), the third, asked permission to respondents in informed consent form, the fourth, determined the respondents based on the sample formula and inclusion and exclusion criteria, the fifth, grouped the respondents, the sixth, grouped the mendicant mothers with malnourished and healthy under-fives, seventh, conducted survey on mother characteristics, the data collection was done by doing an interview to the respondents using questionnaire which was validity and reliability tested to 30 mothers who had the same characteristic with respondents, eighth, interpreting and analyzing data. Screening all collected data, re-examining to minimize errors, input data, i.e. data that had been through the screening stage into the computer with the appropriate program, the presentation of data, i.e. research results of the data were presented in tables, graphs, and narration that were followed by discussion. Analysis of data used chi-square analysis with the help of *SPSS 22.0.0.0* for windows.

## RESULT

### 1. The characteristic of positive deviance mother

Table 1. The Frequency Distribution based on the mother's characteristic in The Area of Clinic Health Center of Mojokerto Regency

No	Characteristic	Respondents Group			
		Case Group	%	Control Group	%
<b>Age</b>					
1	The age of 26-30 years old	37	46.8	19	46.3
	The age of 31-40 years old	42	53.2	22	53.7
	Total	79	100.0	41	100.0
<b>Education</b>					
2	High school	4	5.1	0	0.0
	Junior high school	45	57.0	19	46.3
	Elementary school	29	36.7	22	53.7
	Not completing elementary school	1	1.3	0	0.0
	Total	79	100.0	41	100.0
<b>Job</b>					
3	Private	0	0.0	2	4.9
	Farm workers	22	27.8	12	29.3
	Housewife	57	72.2	27	65.9
	Total	79	100.0	41	100.0
<b>Income</b>					
4	> Rp 600.000 until Rp 1.000.000	77	97.5	41	100
	>Rp 300.000 until Rp 600.000	2	2.5	0	0.0
	Total	79	100.0	41	100.0
<b>Parity</b>					
5	Number of children 1-2	73	92.4	38	92.7
	Number of children >2	6	7.6	3	7.3
	Total	79	100.0	41	100.0

Table 1 showed that the age of case group and control group mothers in this study was mostly between the age of 31-40 years. There was no age difference between the group of case group mother and the group of control group mother with the p value 0.959. The education of case group mother was mostly until junior high school while the control group mother's education was until elementary school. There was no education difference between the group of case group

mother with the group of control group mother with the p value 0.173. The job of the respondents was mostly as housewife. There was no job difference between the group of case group mother with the group of control group mother with the p value 0.134. The income of the respondents was mostly at the range of > Rp 600.000,00 until Rp 1.000.000,00. There was no difference in income between the group of case group mother with the group of control group mother with the p value 0.546. Total children of the respondents were mostly as many as 1-2 children. There was no difference in total children between the group of case group mother with the group of control group mother with the p value 1.000.

## 2. The correlation between Self efficacy with nutrition parenting

a. The correlation between self-efficacy with parenting pattern of mother in the area of Clinic Health Center of Mojokerto Regency on May 2017

Table 2. The correlation between self-efficacy with parenting pattern of mother in the area of Clinic Health Center of Mojokerto Regency on May 2017

No	Self-efficacy	Parenting pattern			Total (%)
		Good (%)	Sufficient (%)	Deficient (%)	
1	Good	68 (81.0)	12 (14.3)	4 (4.8)	84
2	Sufficient	5 (29.4)	9 (52.9)	3 (17.6)	17
3	Deficient	13 (68.4)	1 (5.3)	5 (26.3)	19
Total					120 (100%)

P Value : 0.000

Table 2 shows that self-efficacy of mother with good parenting pattern as many as 68 people (81.0%), mother self-efficacy with sufficient parenting pattern are 12 people (14.3%), mother self-efficacy with deficient parenting pattern

as many as 4 people (4.8%), p value 0.000.

- b. The correlation between self-efficacy with love pattern in the area of Clinic Health Center of Mojokerto Regency on May 2017

Tabel 3 The correlation between self-efficacy with love pattern of mother in the area of Clinic Health Center of Mojokerto Regency on May 2017

No	Self-efficacy	Love pattern			Total (%)
		Good (%)	Sufficient (%)	Deficient (%)	
1	Good	52 (61.9)	26 (31.0)	6 (7.1)	84
2	Sufficient	3 (17.6)	9 (52.9)	5 (29.4)	17
3	Deficient	9 (47.4)	3 (15.8)	7 (36.8)	19
Total					120 (100)

P Value : 0.000

Table 3 shows that self-efficacy of mother with good love pattern as many as 52 people (61.9%), self-efficacy of mother with sufficient love pattern as many as 26 people (31.0%), self-efficacy of mother with deficient love pattern as many as 6 people (7.1%), p value 0.000.

- c. The correlation between self-efficacy with sharpening pattern of mother in the area of Clinic Health Center of Mojokerto Regency on May 2017

Tabel 4 The correlation between self-efficacy with sharpening pattern of mother in the area of Clinic Health Center of Mojokerto Regency on May 2017

No	Self-efficacy	Sharpening pattern			Total (%)
		Good (%)	Sufficient (%)	Deficient (%)	
1	Good	57 (67.9)	20 (23.8)	7 (8.3)	84
2	Sufficient	2 (11.8)	11 (52.9)	5 (23.7)	17

3	Deficient	9 (36.8)	6 (31.6)	6 (31.6)	19
Total					120 (100)

P Value : 0.000

Table 4 shows that self-efficacy of mother with good sharpening pattern as many as 57 people (67.9%), self-efficacy of mother with sufficient sharpening pattern as many as 20 people (23.8%), self-efficacy of mother with deficient sharpening pattern as many as 7 people (8.3%), p value 0.000.

- d. The correlation between self-efficacy with nutritional parenting pattern in the area of Clinic Health Center of Mojokerto Regency on May 2017

Table 5 The correlation between self-efficacy with nutritional parenting pattern in the area of Clinic Health Center of Mojokerto Regency on May 2017

No	Self-efficacy	Nutritional parenting pattern			Total (%)
		Good (%)	Sufficient (%)	Deficient (%)	
1	Good	44 (52.4)	29 (34.5)	11 (13.1)	84
2	Sufficient	2 (11.8)	12 (70.6)	3 (17.6)	17
3	Deficient	4 (21.1)	7 (36.8)	8 (42.1)	19
Total					120 (100)

P Value : 0.001

Table 5 shows that self-efficacy of mother with good nutritional parenting pattern as many as 44 people (52.4%), self-efficacy of mother with sufficient nutritional parenting pattern as many as 29 people (34.5%), self-efficacy of mother with deficient nutritional parenting pattern as many as 11 people (13.1%), p value 0.001.

## DISCUSSION

The result of *chi square self-efficacy* test on nutrition parenting pattern obtained result

0.001 which shows a correlation between self-efficacy and parenting pattern. The result of interview test and Focus Group Discussion with positive deviance mother shows that mother has self-efficacy about nutritional need of children. Confidence is also shown by mother who tries to give nutritious food despite do not have much money. Fulfillment of child nutrition can still be pursued by arranging the menu in accordance with the ability of food purchasing power. According to the dimension of self-efficacy from Bandura (1997), positive deviance mother has strength. Weak confidence is caused by the lack of experience, while people who have strong beliefs, they will survive with their efforts despite many difficulties and obstacles. Mothers also learn from the experiences of children who have been cared for before (Simon, Adams and Madhavan, 2002) .

Based on the research conducted by Baker-Henningham, et al. (2003) in Jamaica who stated that mendicant family beliefs will increase parents' beliefs in proper feeding the children that affect the nutritional condition of children (Baker-Henningham *et al.*, 2003). While non-positive deviance mothers tend to give up with the situation due to lack of mother self-efficacy. According to Bandura & Jourden (1991), doubt can affect the ability of the individual that makes ability does not appear, because these doubts can weaken the belief to achieve a certain goal (Ndiku *et al.*, 2011).

According to Bandura (1997), several important factors that influence self efficacy are: 1) mastery experiences, mastery experiences increase the individual self-efficacy while the failure one decreases self-efficacy; 2) vicarious experience or modeling, the assessment of efficacy is a part that is influenced by the experience of others as an example to achieve success. The study of self-efficacy was performed by Salarkia, et al. (2016), it was found that there was a significant relationship of maternal self-efficacy and under-five feeding behavior. Another study was conducted by McQueen, et al. (2011), that the provision of

interventions improves the mother's self-efficacy in breastfeeding, duration of breastfeeding, especially in the 4 to 8 weeks after delivery.

Maternal beliefs also affect the pattern of health care. The mother's trust with the midwife / clinic health center will encourage the mother to bring a sick child to look for medical treatment. It is also supported by good service from clinic health center. Maternal beliefs also indicate that the mother can maintain the health of children by always teaching the behavior of clean and healthy life, immunization in children, vitamin A, and routinely bring children to mother and child health center (Chilton *et al.*, 2009). Mother self efficacy can be formed because of the support from husband, family members, and society.

The result of Chi-square test of self efficacy to health care pattern obtained 0.000 result that there is correlation between self efficacy with health care pattern. This is in line with Martianto et al. (2008) who stated that mothers with less knowledge usually have less confidence and have limited access to participate in health and nutrition services such as mother and child health center, family building of under-fives, and clinic health center so that they have a higher risk to have malnourished children.

Self efficacy is someone's belief in performing a behavior. Self efficacy is based on the framework of social cognitive theory. Environmental variables, cognitive, and behavior interact continuously with each other. Humans operate in a structure called reciprocal determinism. There is a center which is the starting place of these three components as the beginning of mutual movement of self-system (Bandura, 1997). Self efficacy is a key component of the self-system. This is because the evaluation has been done by the self will not result an action without the accompanying of high self efficacy. High confidence makes something that is expected can be achieved successfully. Someone will take various actions to succeed after the evaluation. Mothers who have confidence in the pattern

of love will be able to interact with under-fives. Mom can set a good example and believe that the child will be comfortable with her. Mother does not restrict the child in playing but can provide good direction for the child. Successful experiences gained by individuals can increase the individual self-efficacy (Dahlia, 2012).

A person who has low self efficacy, despite having an evaluation of himself but not accompanied by a belief in success, then someone will not try and choose to quit without fighting for their hopes. It happens in non-positive deviance mothers who tend not to interact well with their children and let the children do whatever they like. According to Morin's research, et al. (2013), Self efficacy related to food management as one of the priority considerations in the planning of nutritional intervention by working people. The action is in the form of cooking skills, menu planning, and preparing a shopping list to support the nutrition of under-fives (Pascale, Sternin and Sternin, 2010).

Chi Square test results of self efficacy on the pattern of results obtained 0.000 indicating that there is a relationship between self efficacy with the pattern of love. The need of safe and comfortable feeling is indicated by the acceptance of the child by the parents, the fulfillment of the needs of the child, the child is always given the affection, supported by good relationships in the family (Rahmat Hidayat dede, 2009). Self efficacy refers to a person's judgment that they are capable of taking the necessary actions to deal with the situation that will occur. Mothers in case group feel confident to persuade children to make children want to eat. Self efficacy is a belief that a person possesses an ability in organizing a series of actions that will be used in the achievement of their goals. Mother believes in her own abilities that she can interact with children. Mothers can educate and teach children for the child's mental and social development. The stimulation will form the personality and behavior of the child in the future. If the mother's belief is less then it will influence the psychosocial attitude of the child. Chi chi

square test result in Self efficacy on the grind pattern obtained 0.000 results indicating that there is a relationship between self efficacy with the sharpening pattern (Gibney, 2008) (Webb, Horton and Katz, 2005).

## CONCLUSION

There is a relationship between the self-efficacy of mendicant mothers with nutritional care in under-fives that includes the pattern of parenting, love, sharpening and nutrition parenting in under-fives (D & evelin nanang, 2010). One of the factors that play an important role in the nutritional status of under-fives is parenting pattern. Nutritional problems are influenced by many factors that affect each other in a complex way. One of the influences is mother, nutrition condition influenced by mother's ability to provide enough food for children and parenting pattern that influenced by family income, education, behavior and number of brother (Brown, 2015). Mendicant mothers who can provide good nutrition in under-fives should be accompanied by a good belief that under-fives get the right nutrition. If nutritious foods are properly provided to under-five children, it will have an impact on the growth and development of under-fives so that they can live healthily and become the successor of the nation that can be proud of (NEWMAN, 1993) (Foundation, 2012).

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