Original Research

THE ROLE OF PARENTS IN PREVENTING CHOKING IN CHILDREN

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ABSTRACT

Background: Failure to feed babies is a choking-like problem often found in the community. Lactation management needs to be given to ensure successful implementation and provide better nutrition. The aim of this study is to analyzed the role of the family to preventing choking in children with supplementary feeding approach.

Methods: The research design is descriptive. The population was the families with children with incidental sampling techniques. The research sample ware 44 respondents. Variables are the role of the family to preventing choking. Use Google Forms to survey data about mother-child cooperation with questions are Start Feeding as Early as Possible, Cooperation between mother and child, Role of family members, Feeding Schedule, and Eating Habits.

Result: The results of this study found that as far as the factors affecting eating are concerned, the index of starting eating as early as possible is 86.4%, and the index of mother-infant cooperation has an adequate impact on eating 50%. The index of the role of fathers and other family members shows that 84.1% of people are enough to influence eating. The indicators found no difficulty in determining the feeding schedule. It was found that the proportion that affected eating was 84.1%, while the eating habits indicators found that the proportion that affected eating was 84.1%.

Conclusion: It is very important to provide anti-choking management when providing extra food, in the hope that there is no obstacle when providing extra food and satisfying children’s nutrition.

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INTRODUCTION

Feeding infants is providing other foods besides breast milk (breast milk) when the time is right, which is 6 months (Rimawati & Suwardianto, 2020; Salvatore et al., 2020). The purpose of offering food is to fulfill nutritional needs for survival, growth and development and activities, and others. Not only that, it aims to offer food as well as educators for eating skills, taste development, discipline, and learning tools as well as offering food as well as psychological factors for satisfaction and a close relationship
between mother and child (Lau, 2017). Infants are children aged 0-12 months. Infancy is the first month of critical life because the baby will experience changes to the environment, changes in blood circulation, and the organs in the body begin to function, and at the age of 29 days to 12 months, the baby will experience very fast growth.

At the age of 7-9 months, breast milk is still given. However, after 6 months, babies were introduced to more solid foods in the form of soft/mushy foods such as the filter team (Maryam, 2016). Based on the results of research at the Outpatient Installation of Baptist Hospital Kediri, it was found that the mother gave food to the baby before 6 months, in providing food to the baby the mother did not provide food according to age, the mother also did not make a schedule to offer complimentary food for breastfeeding every day and the mother experienced difficulty in presenting food to the baby (Maharani, 2012; Unicef, 2012). The World Health Organization states that diarrhea is the number one cause of under-five mortality worldwide (WHO, 2017). The United Nations Children's Affairs Agency (UNICEF) estimates that every 30 seconds a child dies of diarrhea in Indonesia.

One of the incidences of diarrhea in toddlers is due to hygiene, including the knowledge and attitude of the mother in feeding, where the baby has been fed other than breast milk before the age of 6 months. According to the World Health Organization, 2015 babies who get complementary foods before the age of 6 months will have a 17 times greater risk of experiencing diarrhea and 3 times more likely to get ARI than babies who only get exclusive breastfeeding and get complimentary breastfeeding on time. Maharani's research results, 2016 show that there is a significant relationship between complementary feeding of early breastfeeding and the incidence of diarrhea in infants aged 0-12 months in Dampal Utara, Tolitoli, Central Sulawesi (Maharani, 2012). At this time the baby's brain is ready to face various stimuli such as learning to walk and speak more fluently. Feeding factors in infants are bodyweight, diagnosis of disease and stage (condition), the lifestyle of the parents, the state of the mouth as a means of receiving food, eating habits, the cooperation of mother and child, starting feeding as early as possible, determining the schedule of giving, the role of the father and other members, and ages (Irianto, 2014).

Babies can eat anything like adults. However, they can also refuse if the food served does not meet their taste. Therefore, as parents, they must be democratic to serve food that is the child's favorite. Good nutritional intake plays an important role in achieving optimal body growth, and this optimal body growth also includes brain growth which greatly determines one's intelligence. The most visible factor in the community is the mother's lack of knowledge about the nutrition that the child must fulfill during growth. Mothers usually buy delicious food for their children without knowing whether the food contains sufficient nutrition or not, and do not balance it with healthy foods that contain lots of nutrients.

The disadvantages of providing early complementary foods (complementary foods) are that babies are more susceptible to various diseases, babies are at risk of suffering from food allergies, babies are obese/overweight, reduced milk production, and cause babies to experience diarrhea. While the disadvantages of delaying complementary foods are unmet energy needs, the baby is at risk of iron deficiency, the development of the baby's oral motor function is hampered, and the baby has the potential to refuse various types of food and it is difficult to accept the taste of new food in the future. The purpose of this study was to see the factors that influence infant feeding. Through health workers, one way the public can find out various information.
and health issues, especially those related to infant feeding. If it is done face to face, the community can directly interact and consult directly about the feeding problems they face. Apart from providing information about the factors that influence infant feeding.

Things that can be informed to the family include starting from a brief understanding and explanation of feeding, then what are the signs of symptoms, what are the causes of how to deal with and prevent, as well as what foods and drinks are recommended for consumption, as well as providing health education to parents in feeding babies. Nurses can provide education to parents and families on how to teach proper feeding.

MATERIALS AND METHOD

Based on the research objectives, the design used in this research is descriptive. The population in this study were all parents who had babies. The sampling technique used was incidental sampling, with 44 respondents who met the inclusion criteria. Variables are the role of the family to preventing choking. The research instrument used was a questionnaire consisting of 5 indicators, including starting feeding as early as possible, cooperation between mother and child, the role of fathers and other family members, determining the feeding schedule, eating habits with a total of 20 questions using an ordinal scale and validity testing, and the reliability test obtained the value of Cronbach’s Alpha $p = 0.662$.

Data analysis in this study used a frequency distribution table and OR. Research has obtained ethical clearance at Baptist Hospital Health Collage in Kediri, Indonesia.

RESULTS

Table 1. Specific data factors for the prevention of choking with lactation management

| Indicator | Category | OR  |
|-----------|----------|-----|
|           | Good     | Enough | Less | Total | %    |
| Start Feeding As Early As Possible | 38 | 86.4% | 4 | 9.1% | 2 | 4.5% | 44 | 100 | 0.45 |
| Cooperation between mother and child | 22 | 50% | 22 | 50% | 0 | 0 | 44 | 100 | 0.228 |
| Role of family members | 37 | 84.1% | 7 | 15.9% | 0 | 0 | 44 | 100 | 0.93 |
| Feeding Schedule | 5 | 11.4% | 37 | 84.1% | 2 | 4.5% | 44 | 100 | 0.000 |
| Eating Habits | 37 | 84.1% | 7 | 15.9% | 0 | 0 | 44 | 100 | 0.093 |

Based on the table shows the factors that influence the feeding of babies, the indicators of starting feeding as early as possible, most of which are 38 respondents (86.4%) are good, the indicators of cooperation between mothers and fathers show more than 50%, namely 22 respondents (50%) are good and more of 50%, namely 22 respondents (50%) sufficient. On the indicator of the role of fathers and other family members, it shows that most of them, namely 37 respondents (84.1%) are good. In the indicator of determining the feeding schedule, it was found that most of the 37 respondents (84.1%) were sufficient, and on the indicators of eating habits, it was found that most of them, namely 37 respondents (84.1%) were good. Result of RO find that role of family members more effectiveness about chocking incident.
DISCUSSION

From the results of the research on parental demographic data, it is found that the accuracy of complementary feeding is because the respondent provides complementary feeding after the age of 6 months. The respondent providing appropriate complementary foods with breastfeeding greatly affects the growth and development of the baby because all digestive organs can process foods that are suitable for their age to minimize the incidence of diarrhea, allergies and the body's metabolism is not disturbed. Very much influenced by the role of the mother. According to researchers, mothers who work as housewives have time to provide complementary feeding by feeding their babies compared to mothers who have activities outside the home. With mothers who remain at home, mothers will be calmer and can provide varied foods and can serve as attractive as possible, so that children can eat well. This is following the results of the study, where most of the work of mothers as many as 24 respondents (54.5%) were housewives.

The results showed that respondents who did not work because mothers wanted to focus on caring for their babies and be able to monitor their growth and development. In terms of work, work is generally a time-consuming activity. Working for mothers will have an impact on family life. Most of the respondents who do not work have more free time with their children. According to researchers, mothers who work as housewives have time to always accompany their children at meals compared to mothers who have activities outside the home.

With mothers who remain at home, mothers will be calmer and can provide varied foods and can serve foods that are as attractive as possible, so that feeding can be carried out properly. Therefore the role of the mother is very important in achieving appropriate child development, as a wife and mother of her children, the mother has a role to take care of the household so that the child's food needs are met and the child has good eating habits. The higher a person's education level, the easier it is to receive information. On the other hand, a lack of education will hinder the development of one's attitude towards newly introduced values. Most of the respondents were educated in tertiary institutions, as many as 20 respondents (45.5%).

Respondents get the right information from existing sources such as midwives, nurses, doctors, and even from television, radio and internet media which will affect the behavior in complementary feeding so that respondents can respond and gain broader knowledge positively and provide complementary feeding Breastfeed the right age. Respondents who have babies aged 7 to 12 months who are cared for by their family (grandmother or grandfather) or are cared for by household assistants are in the sufficient and insufficient category because they do not pay attention to feeding the babies. Regular weight monitoring can influence or demonstrate good feeding in infants 7-12 months of age. A good weight or adequate for the baby's age can indicate good feeding.

Based on the results of the study, it was found that most of the 60 respondents (88.3%) had no difficulty eating. Feeding infants is a transition food from breast milk to family food. Recognition and feeding of infants must be carried out in stages, both in form and quantity, according to the digestive capacity of the baby/child. Feeding babies is giving the baby other foods besides breast milk after or when the time is right, which is starting at 6 months. At the age of 6 months, babies are introduced to complementary
foods (complementary foods), but most children do not get complimentary foods properly, both in terms of quality and quantity. If babies aged 6-24 months do not get enough nutrition from complementary foods, it will cause growth problems and malnutrition.

Therefore, to overcome the problem of malnutrition it is necessary to improve the quantity and quality of solids. This can be supported by the theory of Marmi 2014 that the factors that influence infant feeding that need to be considered so that food arrangements for babies and children can be successful are as follows: Cooperation between mother and child. Starting at birth, continue until the child can feed on his own. Food should be pleasing to both the child and the mother. Mothers who are tense, anxious, irritable are a tendency to cause difficulty eating, besides that it is also influenced by the factor of starting feeding as early as possible. Feeding as early as possible has the aim of supporting normal metabolic processes for the attachment of mother and child, reducing the risk of hypoxia chemicals, hyperkalemia, hyperbilirubinemia, and azotemia, the role of fathers and other family members in feeding, closest family and friends have a big role in determining timing provision of solid foods and types of food given as the initial menu.

Therefore, proper education to other family members and the environment is very important, not the case for mothers and fathers. Eating habits (likes, dislikes, and acceptability of the type of food and tolerance of the child to the food given) The role of parents is needed to form healthy eating behavior. A mother in this case must know, be willing, and be able to implement a balanced or healthy diet in the family because the child will imitate the eating behavior of the parents and people around the family. The respondent providing appropriate complementary foods with breastfeeding greatly affects the growth and development of the baby because all digestive organs can process foods that are suitable for their age to minimize the incidence of diarrhea, allergies and the body's metabolism is not affected. From the results of the study, it was found that the factors that influenced the feeding of infants aged 7-12 months in the outpatient installation of Baptist Hospital Kediri were mostly good.

It can be said that almost all respondents influence infant feeding, especially at the age of 7-12 months, where this age is the golden age in achieving optimal child development. Besides that, good feeding can occur if feeding is based on good knowledge. The knowledge referred to here is the knowledge that is not obtained in school only but the knowledge obtained from non-formal education, for example by reading magazines, watching TV shows, attending counseling at health centers or in hospitals given by midwives, nurses, or others. This is evidenced by the fact that mothers who have a tertiary education level and do not work tend to have good knowledge in giving food to their children, this is also because mothers have more time to process and always prepare food for their children so that nutritional content is very concerned. The results of the study on the indicators of starting feeding as early as possible found that most of the 38 respondents (86.4%) did not experience difficulties in feeding as early as possible.

This is very much influenced by the role of the mother who starts feeding according to the age of the baby so paying attention to the problems that occur to her child is evidenced by the results of the analysis of respondents' answers where most respondents answered “often” to questions 1, 2, 3, and 4. At the age of 6 months, babies
are introduced to complementary foods (MPASI). If babies aged 6-24 months do not get enough nutrition from complementary foods, it will cause growth problems and malnutrition. Therefore, to overcome the problem of malnutrition it is necessary to improve the quantity and quality of complementary foods (Brown, 2017; Irianto, 2014; Maeda et al., 2017). Also, it was found that 4 respondents (9.1%) were sufficient and 2 respondents (4.5%) were lacking in starting feeding as early as possible. Maybe because mothers who have babies aged 7-12 months are afraid of diseases in giving solid foods and mothers do not get information about proper feeding according to age.

This has a major disadvantage in delaying the provision of complementary foods, namely: The baby's energy needs are not met; If the baby's energy needs are not met, the baby will stop growing or grow not optimally, even if left unchecked, the baby can suffer from growth failure, the baby is at risk of iron deficiency, the need for macronutrients and other micronutrients is not met, resulting in the baby at risk of suffering from malnutrition and micronutrient deficiency, The development of the infant's oral motor function can be hampered, Babies have the potential to refuse various types of food and find it difficult to accept the taste of new foods in the future (Monika, 2014). Therefore it is necessary to increase the knowledge and skills of officers in providing counseling on complementary feeding and monitoring of growth to mothers. Based on the results of research on the indicators of mother-child cooperation, it was found that most of the 44 respondents each 22 respondents (50%) were categorized as good and sufficient.

Successful infant feeding requires cooperation between mother and baby, starting with the initial feeding experience and continuing while the child is still dependent. Immediately establishing pleasurable and satisfying feeding practices greatly assists the emotional health of infants and children. Time to eat should be able to please both mother and baby. Because a mother's feelings are easily transferred to her baby and largely determine her emotional state during feeding, tension, anxiety, irritability, irritability or emotionally unstable mothers are more likely to experience relationship difficulties during feeding, but they often become more pleasant and confident. With appropriate coaching and support from an experienced, empathetic family, friend or doctor.

Sufficient and good cooperation between mother and child should be fun. This is proven by the mother providing attractive complementary foods for breastfeeding so that the child feels happy and the mother always provides a variety of complementary foods. What mothers can do to collaborate with babies in feeding is providing complementary foods with the Baby Led Weaning method. Baby Led Weaning relates to providing pieces of food where babies can hold them with their hands and babies can choose food instead of using spoons. Dodds, 2013 in Sulistyarini, et al in 2015.

The benefits of BWL are allowing babies to explore food for themselves, train children independent, effective, makes it easier for mothers who do not have helpers at home, makes it easier when traveling, and teaches children to explore new foods. By providing complementary foods with breastfeeding with the Baby Led Weaning (BLW) method, it will improve eating patterns for babies and increase cooperation between mothers and babies. In giving food to babies, mothers can teach children to be more independent before the age of 12 months, and train the child's fine motor skills, one of which is eye-hand coordination. Also, with this method, babies can explore the taste and
texture of their food, without the need for help to enter food into his mouth. Based on the results of research on the indicators of the role of fathers and other family members, most of them were 37 respondents (84.1%).

The roles of fathers and family members were very influential in feeding babies because they felt proud and happy that they had made great achievements. The readiness of babies to receive solids also depends on the maturity of the digestive system and other baby developments. Close family and friends have a big role in determining the timing of complementary foods and the type of food given as the initial menu. Therefore the role of nurses is very important in providing proper education to other family members and the surrounding environment is very important, not the case for mothers and fathers. On the indicators of the role of fathers and other family members, it is well proven by the family helping to provide complementary feeding to babies and the family helping to prepare complimentary foods that are given to the baby.

Whereas for 7 respondents (15.9%) it was sufficiently proven by sometimes the family was involved in determining the type of food given to babies and helping in preparing complementary foods for breastfeeding to babies. Based on the results of the research on the indicators of determining the feeding schedule, 37 respondents (84.1%) found sufficient in determining the feeding schedule. This is because the mother always pays attention to the schedule of feeding the baby by making a special schedule for making food for the baby, one of which is that in the morning the baby is given soft porridge food during the day, the baby is given a snack such as biscuits and at night the baby is usually given soft porridge. Coupled with snacks and some provide milk. Feeding babies should be diverse, using foods that have been introduced since the baby is six months old that the baby has received, and developed again with food ingredients according to family food. The role of parents is needed to form healthy eating behavior.

A mother in this case must know, be willing, and be able to implement a balanced or healthy diet in the family because the child will imitate the eating behavior of parents and people around the family. In the indicator of determining a sufficient feeding schedule, it was proven by the mother consulting with health workers related to complementary feeding according to the baby's age, while for 5 respondents (11.4%), it was proven that the mother gave a snack between the hours. The provision of complementary feeding such as boiled memories, biscuits, while for 2 respondents (4.5%) who were less in determining feeding schedules, it was evidenced by the fact that mothers did not have any variation both in the presentation and types of complementary foods. Therefore, the role of nurses is very important in providing education in proper and regular feeding, it is necessary to introduce it from an early age, including by introducing meal times and food variations (Astuti & Suwardianto, 2016; Rimawati et al., 2018; heru Suwardianto, 2018; H. Suwardianto & Kurniawati, 2017; H. Suwardianto & Rimawati, 2018). Based on the results of the study on the indicators of eating habits, 37 respondents (84.1%) both found good eating habits in infants.

This is because the mother provides food that the baby likes so that the baby will eat. With the habit of satisfying the needs of truly hungry babies as they express it to be various, the physiological needs are met immediately; the infant does not learn to associate prolonged crying and discomfort with feeding, and infants are less likely to develop poor eating practices such as swallowing food hastily or eating little too often.
The baby immediately forms a schedule that allows the family to resume normal functions. If this does not occur, special feeding or full-day schedules may be continued or postponed sufficiently to avoid conflict with the needs of family activities. Some mothers will not understand the purpose of "baby self-regulation; some mothers will misinterpret the doctor's instructions and others may not be able to conform to the baby's rules of life.

Parents who are orderly, overly anxious, and forcefully may do better with charts. Also, the role of the family is very important in the effort to eating habits in children by familiarizing the child with new food so that the child begins to recognize food that he does not know. It is proven by the mother not forcing the baby to eat when the baby does not want to eat and the mother does not provide complimentary foods which can cause allergies to the baby while for the adequate category there are 7 respondents (15.9%) as evidenced by the fact that the baby consumes complementary foods provided by the mother. Shown by changing the menu variant so that the child is familiar with all types of food.

CONCLUSION
The factors that influence infant feeding are found mostly on indicators of starting feeding as early as possible, the role of the father and other family members, and eating habits. On the indicators of determining the feeding schedule, get it mostly enough.

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REFERENCES
Astuti, V. W., & Suwardianto, H. (2016). Pengetahuan Guru Taman Kanak-Kanak Tentang Alat Permainan Edukatif Di Taman Kanak-Kanak Baptis Setia Bakti Kediri. JURNAL STIKES RS Baptis Kediri, 9(2).

Brown. (2017). No difference in self-reported frequency of choking between infants introduced to solid foods using a baby-led weaning or traditional spoon-feeding approach. Journal of Human Nutrition and Dietetics, 31(4), 1. https://doi.org/https://doi.org/10.1111/jhn.12528

Irianto. (2014). Gizi Seimbang Dalam Kesehatan Reproduksi. Alfabeta.

Lau, C. (2017). Breastfeeding Challenges and the Preterm Mother-Infant Dyad: A Conceptual Model. Breastfeeding Medicine, 13(1), 8–17. https://doi.org/10.1089/bfm.2016.0206

Maeda, K., Shamoto, H., & Furuya, S. (2017). Feeding support team for frail, disabled, or elderly people during the early phase of a disaster. The Tohoku Journal of Experimental Medicine, 242(4), 259–261.

Maharani. (2012). Hubungan Pemberian Makanan Pendamping Asi (MP-ASI) dengan Status Gizi Anak Usia 1-3 Tahun di Kota Padang. Jurnal.
Maryam. (2016). *Gizi Dalam Kesehaan Reproduksi*. Salemba Medika.

Rimawati, R., & Suwardianto, H. (2020). Family Support in Management of Lactation Management in Mother With Children During Pandemic Covid-19. *STRADA Jurnal Ilmiah Kesehatan*, 9(2), 694–699.

Rimawati, Suwardianto, H., & VW, A. (2018). Resilience of Knowledge and Perception Skills on the First Aid on Employees. *The 2nd Joint International Conferences*, 2(2), 535.

Salvatore, C. M., Han, J.-Y., Acker, K. P., Tiwari, P., Jin, J., Brandler, M., Cangemi, C., Gordon, L., Parow, A., DiPace, J., & DeLaMora, P. (2020). Neonatal management and outcomes during the COVID-19 pandemic: an observation cohort study. *The Lancet Child & Adolescent Health*. https://doi.org/https://doi.org/10.1016/S2352-4642(20)30235-2

Suwardianto, heru. (2018). Pelatihan Penangganan Korban Tersedak Terhadap Pemahaman Tujuan, Prosedur, Kewaspadaan, Dan Evaluasi Tindakan. *Jurnal Penelitian Keperawatan*, 4(2), 1.

Suwardianto, H., & Kurniawati, F. (2017). Gambaran Frekuensi Sakit Pada Bayi Yang Mendapat Asi Esklusif. *Jurnal Penelitian Keperawatan*, 3(1).

Suwardianto, H., & Rimawati. (2018). Explicit Instruction Model (EIM): Daily Training Emergencies Preparedness (DTEP) Toward Skills of Participants the Youth Red Cross. *Conferences, The 2nd Joint International*, 2(2), 403–410.

Unicef. (2012). *Ringkasan Kajian Kesehatan Ibu dan Anak*. UNICEF Indonesia.

WHO. (2017). *Global Health Observatory (GHO) data*. World Health Organization. http://www.who.int/gho/ncd/risk_factors/blood_pressure_prevalence_text/en/