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A QUALITATIVE STUDY: THE MANAGEMENT OF DIARRHEA AMONG TODDLERS

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Abstract

Diarrhea is a prime cause of morbidity in infants. Early in 2018, There were 141 cases in Beji Village, Banjarmangu Sub-district. The government had an effort to prevent diarrhea, one of which is by conducting socialization to the community. Mothers' knowledge of diarrhea disease needs has a significant influence in suppressing diarrhea. This study aimed to identify community points of view about the classification, prevention, and treatment of diarrhea. This study used a qualitative study method. Data Collected by Depth interview with 13 people in Beji Village, Banjarmangu Sub-district, Banjarnegara District. The results showed that the community had a different classification between diarrhea and 'luganen'. Diarrhea considered a disease, and luganen is a sign of growth and development. Diarrhea prevents by maintaining a clean and healthy lifestyle. Diarrhea treats using a mixture of guava leaves and turmeric as first aid. The infant will be brought to health facilities when the symptoms appear and become severer.

***Keywords**: Local knowledge, prevention, treatment, diarrhea*.

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1. Introduction

Diarrhea is a public health problem in developing countries, including Indonesia. The Data from the Ministry of Health from 2000 to 2010 showed there was an upward trend in the incidence of diarrhea.[1] Even according to UNICEF records, every second one toddler dies due to diarrhea. One of the government's efforts is a program to eradicate diarrhea at the Community Health Center level. The Community Health Center is collaborating with Posyandu to carry out several diarrhea prevention efforts. These efforts expected to reduce mortality from diarrhea by 3%.[2]

Every year, there were about 2.5 billion children under five who had diarrhea, and for two decades, there was no change. Africa and South Asia were known as the country with the highest number of diarrhea cases in children under five years old. Moreover, most cases result in severe morbidity and also death. The incidence of diarrhea varies by season and age. Children are vulnerable to diarrhea, and most of it is children under two years and starting to decrease with age addition.[3]

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In 2017 the number of diarrhea cases in Banjarnegara District was widespread in almost every District and occupied the top 10 diseases in the working area of Community Health Center in all Sub-Districts in Banjarnegara. Furthermore, based on the Banjarnegara District Health Office data, there were 43.91% of infants with diarrhea, and 50% of deaths due to diarrhea were infants. Data from 2nd Banjarmangu Community Health Center, Beji village, had the highest diarrhea in the last two years. In 2016 there were 191 cases, 161 cases in 2017, and 141 in early 2018.[4]

Diarrhea was defined as having loose stool more > 3 times per day. The consistency could be soft or liquid or even watery.[5] Diarrhea that lasts less than two weeks is called acute diarrhea, and if diarrhea lasts two weeks or more, it is classified as chronic diarrhea.[6] Some classify diarrhea in three types, namely acute diarrhea, prolonged diarrhea, and chronic diarrhea. If diarrhea lasts less than seven days, it is called acute diarrhea; usually, it will last 3-5 days. If it lasts in 3- 14 days, it is called prolonged diarrhea; and if it lasts longer than 14 days, it is called chronic diarrhea.[7] Acute diarrhea is the one that needs to be watched out for. Hannif et al. (2011) previous study showed that personal hygiene was significant in the incidence of acute diarrhea in infants. Furthermore, when it occurred, it needs to have quick and proper treatment.[8] According to Adin's (2016), previous study, prevention, and therapy helped reduce mortality due to diarrhea faster. Diarrhea management in Indonesia using 'LINTAS', which refers to WHO. There was rehydration with ORS, supplemental treatment of zinc sulfate, diet, selective antibiotics, and educated the parents.[9]

Parents had an essential role in helping prevent and treat diarrhea. To prevent diarrhea, we need to maintain a healthy and clean environment. This study conducted to discover diarrhea from a local perspective. Many people doing health behavior regarding their culture; for example, people believe diarrhea can be a sign of children's growth and development. Therefore, this study aims to discover diarrhea from the local perspective like classifying, preventing, and treating diarrhea.

2. Method

This study conducted in Beji Village, Banjarmangu Sub-district, Banjarnegara District, from January to July 2018 using descriptive qualitative methods. Data collected through the in-depth interview with 13 people consisted of 11 mothers whose children had experienced diarrhea, one midwife, and one the community health facility officer. Collected data analyzed using content analysis and validated using source triangulation.

3. Results and Discussion

a. Diarrhea and '*Luganen'* in Toddlers.

Informants had a good understanding of diarrhea, but there was a local understanding of diarrhea or called as 'luganen'.

The local called diarrhea with "mencret" or "ising-isingen"; it is known as a digestion disease, which marks decrease the consistency of loose, which becomes mushy or watery, and often occurs. The informant also stated that diarrhea accompanied by bloating, 'mules' (abdominal pain), sometimes it could cause nausea and vomiting.

"*Diarrhea marked with a flat stomach, the consistency looks like fluid and constantly*" (Mh)

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"Diarrhea is frequently defecating, and more than five times a day." (En)
"*Diarrhea is an upset stomach, so the defecation runnier. often, children are usually fussy and flatulence*" (Im)
"*Diarrhea is frequently defecating, sometimes even vomiting and stomach here (holding the abdomen) is painful*" (Sn)

According to the informant, diarrhea *categorized* as a common disease, but sometimes it can become dangerous disease. Many people experiencing diarrhea and can be treated by themself; however, when diarrhea is persistent, accompanied by vomiting or other" discomforts, it became a dangerous disease

"diarrhea is harmless. Everyone must have had diarrhea*."* (Nr)
"It is normal, ma'am. Diarrhea is not dangerous because it can be treated by ourselves" (Nh)
*"*diarrhea *is dangerous if left for long."* (Ynt)

There was a term called "luganen" when diarrhea occurred as marked by toddlers' development improvement. Most informants believe that luganen that toddlers will have the ability to grow or develop "kepinteren" such as proning walking, standing, crawling, or talking. Luganen also has known as "ngenteng-ngentengi" which means relieving.

*"*My *second son when he was little, he got luganen, and indeed after that, he was able to crawl. It was a sign of 'kepinteren'* (read: smarter)*"* (Im)
"At first, I think it was diarrhea; it turns out my child *had luganen like, what will he do or 'ngenteng-ngentengi' (read: relieving)"* (Nh)
"When my child was eight months old, he had luganen and turned out he would be able to crawl soon, well, believe it or not, but it was happening." (En)

Table 1. *Diarrhea* and Luganen Differences

Terms	**Diarrhea**	**Luganen**
Quantity	often	only once
Treatment	Independent/Health Facilities	heal by itself
Scent	Smell	Did not smell
Frequency	> 5 time a day	less than diarrhea
Consistency	Soft	Soft but there were objects looks like chilli seed

Each cultural society had a different definition of diarrhea due to the interaction between existing knowledge and *information*. Like the luganen concept, although most informants had received the right information from health workers, they still believe it when they experienced luganen. This finding shows that the level of understanding of diarrhea in the community has not been fully understood. People are still combining new concepts from health workers with local knowledge. Moreover, succeeding in diarrhea treatment need an effort to increase peoples' knowledge..

The finding of this study is consistent with Utami and Nabila's (2016) previous research. Factors were influencing the incidence of diarrhea; one of them was that maternal education influenced the understanding of health information.[10]

Arsurya et al. (2017 previous study stated that there was a correlation between mother knowledge level and diarrhea treatment behavior. [11] Therefore, efforts on promotive and preventive in diarrhea need to be increased. People needed to understand that diarrhea should be treated immediately, especially if it occurs in infants.

b. Diarrhea Prevention

The diarrhea prevention performed by informants was proper and according to the causes of diarrhea.

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Informants stated that the cause of diarrhea were dirty environments, flies, dust, and bacteria. While seen from behavioral factors, there were careless eating, snacking, washing hands, eating spicy foods, unclean foods, expired foods, unclean tools, unhealthy snacks, and unsuitable milk. The informant also assumed diarrhea as cold. Not only that, but informants also connect the weather as the cause of diarrhea..

Prevent diarrhea; most informants tried to always wash hands before eating, making sure that food always in a closed state, keep utensils clean, avoid eating spicy food and wash hands before handling a baby. Thus the prevention was more emphasized to maternal behavior around children, especially to stay healthy.

Washing hands was the most informant answer for preventing diarrhea. Evayenti et al. (2014) stated that there was a relationship between washing hand habits with the incidence of diarrhea in children.[12] Ningsih (2014) in her previous study stated that sanitation was beneficial in improving health status.[13]

"It is obvious that to prevent diarrhea; we should maintain cleanliness. whatever it is, when we keep cleanliness, then we will be far from illness." (Ynt)

Mothers and caregivers had an important role in preventing diarrhea in children. A mother must have a strong commitment and not underestimate the incidence of diarrhea. Personal hygiene behavior should be introduced to toddlers, and people who suit this role are mothers. Sukut (2015) stated that when people have a good commitment, they will have a positive attitude and vice versa.[14]

Made et al. (2018) also stated that when mothers had poor knowledge, it would form a negative attitude and affect mothers' behavior in treating diarrhea. Most mothers prefer giving their children warm sweet tea than ORS or zinc.[15]

c. Diarrhea Management

Hatiyah in Wijayanti (2014) stated that management of diarrhea done by giving liquid (a type of liquid, the method in giving fluid, and amount of liquid) helped to replace lost fluids and electrolytes. Then, dietetic by breastfed frequently and giving children food in semi-solid like porridge or solid food (rice team). Other management can be done by giving children specific milk, this treatment for children with allergy to milk containing lactose or fatty acids.[16]

Informants had their understanding and strategies for treating diarrhea in infants. The informant would be brought the children to health facilities. There were informants who given the children potion first, and when diarrhea did not stop, they will bring them to health facilities. Several informants brought their children to health facilities and, at the same time, gave them a potion.

"When my children had diarrhea, usually we treated first using guava *leaves or turmeric, and when he did not heal, we brought him to health facilities."* (Im)

Informants were bringing the children to health facilities mostly done by the parents after they assess first by observing physical condition and frequent bowel movements or frequency. The potion was the first treatment when the children had diarrhea when the symptoms continued. They address it to health facilities. Unfortunately, informants did not have adequate knowledge about the proper ingredients of the potion.

Some ingredients for the potion were the leaves (buds) of guava and turmeric. Guava leaves that have been crushed were squeezed, and

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the water is mixed with turmeric juice and then drunk to toddlers to show a decrease in diarrhea symptoms.

The choice of treatment chosen adjusted to the parents' decision after observing the symptoms of diarrhea that appear in infants. Treatment by giving ingredients is part of the first aid for diarrhea. If the symptoms continued, the family decides to refer to the health facility. This finding was consistent with Ningsih et al. (2014) that in treating diarrhea in toddlers, most people doing self-medication and brought their children to the nearest health facilities..

4. Conclusion

Diarrhea and luganen were had a different meaning; diarrhea considered a disease, while luganen considered a sign of development improvement. Prevention is done by maintaining clean and healthy living behavior in terms of environmental sanitation and personal hygiene. The treatment is done by giving a potion as first aid and bringing in to health facilities when the symptoms continued. Therefore, all family members are expected to jointly create a healthy environment and a clean and healthy lifestyle. The government is expected to carry out promotive and preventive actions in the form of continuous outreach activities to the community so that proper knowledge about diarrhea is formed

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