

## **Work-Family Conflict, Konsumsi Makanan Berisiko, dan Aktivitas Fisik Anak Prasekolah Obesitas dan Non Obesitas di Kota Semarang**

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### **ABSTRAK**

**Latar belakang:** Obesitas anak telah berkembang menjadi masalah kesehatan yang serius. Obesitas pada anak dapat disebabkan oleh berbagai faktor, seperti pola asuh orang tua yang dipengaruhi oleh *work-family conflict* pada ibu bekerja, konsumsi makanan berisiko, dan aktivitas fisik.

**Tujuan:** Mengetahui perbedaan *work-family conflict*, dukungan sosial pasangan, konsumsi makanan berisiko, dan aktivitas fisik pada anak prasekolah obesitas dan non obesitas.

**Metode:** Desain penelitian *cross sectional* dengan *matching* jenis kelamin dan usia pada 12 KB/TK di Kecamatan Tembalang. Subjek penelitian merupakan anak berusia 3-7 tahun yang terbagi menjadi dua kelompok menurut Z-score IMT/U, yaitu 31 anak pada kelompok obesitas dan 31 anak pada kelompok non obesitas. *Work-family conflict* dinilai menggunakan kuesioner *Work-Family Conflict Netemeyer*, dukungan sosial pasangan dinilai menggunakan kuesioner yang dikembangkan oleh peneliti, konsumsi makanan berisiko dinilai menggunakan *Semi Quantitative Food Frequency Questionnaire (SQ-FFQ)*, dan aktivitas fisik dinilai menggunakan kuesioner *Early Years Physical Activity Questionnaire (EY-PAQ)*. Analisis data dilakukan menggunakan *Chi-Square*, *Independent T-test*, dan *Mann-Whitney*.

**Hasil:** Analisis bivariat menunjukkan perbedaan pada jenis makanan berisiko yang dikonsumsi ( $p=0,004$ ), frekuensi konsumsi minuman berkarbonasi ( $p=0,003$ ), asupan energi (0,001), karbohidrat ( $p=<0,001$ ), lemak ( $p=0,002$ ), dan protein ( $p=0,018$ ) dari makanan berisiko. Tidak ada perbedaan pada *work-family conflict*, dukungan sosial pasangan, frekuensi konsumsi makanan manis, asin, berlemak, makanan yang dibakar, makanan berpengawet, makanan instan, bumbu penyedap, minuman manis, dan minuman berenergi dengan  $p>0,05$  pada kedua kelompok.

**Simpulan:** Terdapat perbedaan pada jenis makanan berisiko yang dikonsumsi, frekuensi konsumsi minuman berkarbonasi, asupan energi, karbohidrat, lemak, dan protein dari makanan berisiko.

**Kata kunci:** Anak prasekolah, obesitas, *work-family conflict*, konsumsi makanan berisiko, aktivitas fisik

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## **Work-Family Conflict, Risk Food Consumption, and Physical Activity in Obese and Non-Obese Preschool Children in Semarang**

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### **ABSTRACT**

**Background:** Childhood obesity has developed into a serious health problem. Childhood obesity caused by various factors, such as parenting patterns that are influenced by work-family conflict in working mothers, risk food consumption, and physical activity.

**Obejective:** To determine differences in work-family conflict, spousal support, risk food consumption, and physical activity in obese and non-obese preschool children.

**Methods:** Design of the study was cross sectional with sex and age matching at 12 preschools in Tembalang. The subjects were children aged 3-7 years old and divided into two groups according to BMI for age Z-score, consisted of 31 children in obesity group and 31 children in non-obesity group. Work-family conflict assessed using the Netemeyer Work-Family Conflict questionnaire, spousal social support assessed using a questionnaire developed by the researcher, risk food consumption assessed using the Semi Quantitative Food Frequency Questionnaire (SQ-FFQ), and physical activity assessed using the Early Years Physical Activity Questionnaire (EY-PAQ). Data analyzed using Chi-Square, Independent T-test, and Mann-Whitney.

**Results:** Bivariate analysis showed differences in the types of risk food consumed ( $p=0.004$ ), frequency of carbonated beverage consumption ( $p=0.003$ ), energy (0.001), carbohydrate ( $p=<0.001$ ), fat ( $p=0.002$ ), and protein ( $p=0.018$ ) intake from risk food consumption. There were no differences in work-family conflict, spousal support, frequency consumption of sugary food, salty food, high-fat food, grilled food, preserved/frozen food, instant food, seasoned food, sugary drinks, and energy drinks with  $p>0.05$  in both groups.

**Conclusion:** There were differences in the types of risk food consumed, frequency of carbonated beverage consumption, energy, carbohydrate, fat, and protein intake from risk food consumption.

**Keywords:** Preschool children, obesity, *work-family conflict*, risk food consumption, physical activity

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