



Implementation of Choking Handling Towards The Ability of Mother In Helping Children at Adzikri Merakurak Early Childhood Education Programs, Tuban District

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ABSTRACT

The choking of toddlers was caused by a foreign body that entered the mouth. Giving chokes help needed choking handling training to improve the mother's ability in addressing choke cases. This research aims to determine the implementation of choking handling towards the ability of mothers in helping children at Adzikri Merakurak Early childhood education programs, Tuban District. This research uses the experimental analysis method with the One-group Pre-Post Test Design approach. Sampling techniques using the probability sampling technique (Simple Random Sampling). The number of samples in this study was 25 respondents. The instrument used is a questionnaire about maternal abilities. This research uses the Wilcoxon Sign Rank Test with the level of the significance of $\alpha = 0.05$ and the calculation using the SPSS software application is obtained by the value $p = 0.000$ where $0.000 < 0.05$, the H_1 is accepted. The results of the analysis showed that most of the maternal ability before the training was choked handling has enough ability and after the training was given chokes handling almost all mothers have good ability. They concluded that there is the influence of choking handling training on Mother' ability in child relief in the Early Childhood Education Programs Adzikri Merakurak. From the results of the study can be concluded that the training of choke treatment can improve mother's ability in children's relief.

Keywords: Handling choke training, skill level, choking

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INTRODUCTION

Choking incidents in *Toddler*- aged children are often ignored by parents who do not know the dangers of choking. The parents considered choking to be a minor problem and a common occurrence. This assumption is because parents do not know the effects of choking and how to handle it properly. Handling choking in children requires an important role from mothers to reduce morbidity and mortality experienced by children. Choking events if left for too long the body can experience a lack of oxygen (hypoxia)¹.

According to the *World Health Organization* (WHO) in 2011, approximately 17 537 cases of choking were most common in children ages *toddler* (18-36 months). The causes of choking from this incident were 59.5% due to food, 31.4% of choking due to foreign objects, and 9.1% of the causes of choking were unknown. In the United States in 2010, data on 710 cases of choking occurred in children under 4 years of age. The percentage of incidence showed 11.6% occurred in children under 1 year of age, 36.2% occurred in children aged 1 to 2 years and 29.4% occurred in children aged 2 to 4 years².

The cause of choking in children is caused by a foreign object around the child that is accidentally put into the mouth. Airway obstruction is caused by the aspiration of fluids and small objects scattered on the floor such as toys, food, and candy. 90% of children aged <5year experience death due to obstruction of a foreign object in the airway³.

Choking cases can be handled by anyone, especially a mother's ability to care for and raise the chicks is important for me Preventing the occurrence of choking⁴. Parents' abilities include knowledge, attitudes, and actions. Knowledge is also important for individuals, especially mothers who have *toddler* children. In addition to the knowledge that a mother must have about handling choking, the mother's attitude also affects the incidence of choking in toddlers. Action on first aid to children is the next step that should be taken by a mother. The right, fast and appropriate actions of a mother have a profound influence on the safety of her child⁵.

Improving and supporting the ability of parents in choking first aid requires choking management training so that parents are willing and courageous to take appropriate action when a choking case occurs. There are several effective techniques to deal with choking, among other parts of the back (backflow), stomping on the abdomen (*abdominal thrust*) / *Heimlich maneuver*, and pounding on the chest (*chest thrust*). Choking management training can reduce morbidity and mortality in choking victims³.

The provision of choking management training aims to improve the ability of mothers to perform first aid for choking in children².

After being given training in handling choking, it is hoped that the mother will be able to increase the willingness and courage to provide early assistance to choking children, by increasing the number of practices to increase the readiness of mothers to help children who are victims of choking. Mothers who have good knowledge, positive attitudes, and appropriate actions to provide choking first aid to children correctly and precisely will reduce morbidity and mortality rates in children who are victims of choking⁶.

The purpose of this study was to determine the implementation of chocking handling towards the ability of mother in helping children at Adzikri Merakurak Early childhood education programs, Tuban District

METHOD

This research uses *experimental* analytical design and uses the type of research "*One Group Pre-Post Test Design*". This research was conducted by giving a *pre-test* (initial observation) before being given treatment. After being given the treatment, then the *post-test* (final observation) was carried out again. This is done to determine the resulting difference between the *pre-test* and *post-test*.

Respondents in this study were guardians of Early Childhood Education Programs Adzikri Merakurak students who were taken using the *simple random sampling* technique with the return method. Each selected number must be returned so that each sample has the same percentage chance of being sampled in the study. A total of 25 student guardians were sampled in the study.

The dependent variable instrument in this study was a questionnaire sheet covering three aspects, namely: cognitive, affective, and psychomotor. The questionnaire sheet has been tested for validity and reliability. In the validity test, 15 cognitive questions, 8 affective statements, and 22 psychomotor statements were all declared valid. Valid values are obtained from the results of the r count $\geq r$ table. Based on the results of the reliability test, it was obtained that r count (*alpha Cronbach*) from cognitive was 0.961, r count (*alpha Cronbach*) from affective was 0.962, and r count (*alpha Cronbach*) from psychomotor was 0.978. Meanwhile, the independent variable instrument uses standard operating procedures.

Data collection in this study was carried out primarily starting with permission from the institution and related parties until it received permission from the Adzikri Early Childhood Education Programs. On the day of the research, the researcher gave a statement sheet that was willing to be a respondent to the mother or guardian of the Early Childhood Education Programs student to be signed as evidence that the researcher was doing research. Researchers researched for one week with two meetings. On the first day, the researcher gave a *pre-test* questionnaire to the respondent to find out his

ability, after being given the questionnaire respondent was given training in handling choking. In the second meeting, the respondents were given another questionnaire for the *post-test* after being given training. This study uses data analysis with the *Wilcoxon Sign Rank Test*.

RESULTS

1. Age

Table 1 Distribution of Age Frequency of Student Respondents in Adzikri Merakurak Early Childhood Education Programs

No.	Age	<i>f</i>	Percentage (%)
I	23-27	6	24%
II	28-32	8	32%
III	33-37	8	32%
IV	38-42	3	12%
	total	25	100%

Based on table 1, it can be seen that most of the respondents' age of guardian students in Early Childhood Education Programs Adzikri Merakurak aged 28-37 years are 16 (64%).

2. Last education

Table 2 Frequency Distribution of Student Respondents Based on Recent Education at Adzikri Merakurak Early Childhood Education Programs

No.	Last education	<i>f</i>	Percentage (%)
I	Junior High	3	12%
II	High school	15	60%
III	D3	1	4%
IV	S1	6	24%
	total	25	100%

Based on table 2, it can be seen that most of the respondents based on the last education in Adzikri Early Childhood Education Programs, namely SMA are 15 (60%).

3. Profession

Table 3 Frequency Distribution of Student Guardian Respondents by Occupation at the Adzikri Merakurak Early Childhood Education Programs

No.	Profession	<i>f</i>	Percentage (%)
I	Housewife	11	44%
II	Private	6	24%
III	Entrepreneur	5	20%
IV	Private Employees	1	4%
V	Civil Servants	1	4%
VI	Teacher	1	4%
	total	25	100%

Based on table 3, it can be seen that almost half of the respondents of guardian students in Adzikri Early Childhood Education Programs work as a housewife, amounting to 11 (44%).

Table 4 Maternal Ability Score Before Being Given Choking Management Training at Early Childhood Education Programs Adzikri Merakurak

No.	Mother Ability Score	<i>f</i>	Percentage (%)
I	Good	6	24%
II	Enough	14	56%
III	Less	5	20%
	total	25	100%

Based on table 4, shows that most of the respondents before being given choking treatment training at Adzikri Early Childhood Education Programs had sufficient abilities amounting to 14 (56%).

Table 5 Maternal Ability Score After Being Given Choking Management Training at Early Childhood Education Programs Adzikri Merakurak

No.	Mother Ability Score	<i>f</i>	Percentage (%)
I	Good	19	76%
II	Enough	6	24%
III	Less	0	0%
	total	25	100%

Based on table 5, shows that almost all respondents after being given choking treatment training at Adzikri Early Childhood Education Programs had good abilities totaling 19 (76%).

Table 6 Cross Table of Effects of Choking Management Training on the Ability of Mothers to Help Choking Children at Adzikri Merakurak Early Childhood Education Programs

Choking Management Training	Good		Enough		Less		Total	
	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%
<i>Pre-test</i>	6	24%	14	56%	5	20%	25	100%
<i>Post-test</i>	19	76%	6	24%	0	0%	25	100%

Based on table 6, shows that the majority of respondents before being given choking treatment training at Adzikri Early Childhood Education Programs had sufficient abilities amounting to 14 (56%). Meanwhile, after being given training in handling choking, almost all respondents had good abilities, amounting to 19 (76%).

DISCUSSION

Identification of Mother's Ability Before Being Given Choking Management Training at Adzikri Merakurak Early Childhood Education Programs

H acyl *pre-test* showed that the mother's ability before being given training choke handling most of the respondents have sufficient capacity amounted to 14 respondents (56%).

Ability (*ability*) is the ability or ability of an individual in mastering a skill and is used to do various tasks in a job⁶. Ability is divided into three aspects, namely: cognitive, affective, and psychomotor aspects. To improve the ability of mothers to perform first aid for choking in children, choking management training is conducted. These findings are consistent with research conducted were performed to determine the behavior of the mother in first aid when choking in children ages *toddler* in IHC Harapan Ibu showed that before being given treatment the majority of respondents have a behavior quite as many as 22 people⁷.

In this study, several internal factors affect the ability of mothers to handle choking including cognitive, affective, and psychomotor aspects. The cognitive aspect includes the mother's knowledge of choking. If the cognitive aspect of the mother is lacking, then this will have an impact on the affective aspect, so that the mother does not know how to respond properly if a choking case occurs. When the mother does not know how to react to it, then the mother also cannot help in cases of choking.

Identification of the Ability of the Mother After Being Given Choking Management Training at Adzikri Merakurak Early Childhood Education Programs

The *post-test* results showed that the ability of mothers after being given choking treatment training, almost all respondents had good abilities, amounting to 19 (76%).

p Training is a systematic effort to master the skills, rules, concepts, or ways of behaving that have an impact on performance improvement (Goldstein and Gressner, 1988 in Kamil, 2010). Choking treatment is an action taken to provide relief to a choking victim. In choking cases there are some proven techniques effective on toddlers and adults, among other pats on the back (*backflow*), pounding on the abdomen (*abdominal thrust*) is also called the *maneuver Heimlich*, and pounding on the chest (*chest thrust*)⁹.

Based on the research that has been done, it can be concluded that the factors that influence the ability of mothers to handle choking cases in children at Adzikri Merakurak Early Childhood Education Programs are age, education, and occupation. Mothers who are of productive age and have advanced education (diploma and bachelor) have more experience so that they have good cognitive abilities about choking, less affective abilities because the mother has not been able to optimally supervise her child so that the mother cannot perform choking aid properly and correctly. Mothers who are of productive age with junior high school and senior high school education and the equivalent have sufficient cognitive abilities, good affective because mothers always supervise their children and want to do choking and psychomotor assistance sufficiently because mothers do not know about the correct and proper handling of choking. Apart from age and education, the work done by the mother also affects her abilities. Working mothers have good cognitive abilities, less affective and psychomotor abilities. Mothers who do not work have low cognitive and psychomotor abilities and good effective abilities.

Analysis of the Effect of Choking Management Training on the Ability of Mothers to Help Choking Children at Adzikri Merakurak Early Childhood Education Programs

The results of the analysis using the *Wilcoxon Sign Rank Test* with a significance level of $\alpha = 0.05$ and the calculations were carried out using the *SPSS for Windows software* application, the *Asymp* value was obtained. *Sig. (2-tailed) = 0.000* where $0.000 < 0.05$, then *H1* is accepted, which means that there is a significant difference between the *pre-test* and *post-test* groups.

Some changes indicate that choking management training on the ability of mothers to help to choke children at Adziki Merakurak Early Childhood Education Programs is caused by providing training that is fun and voluntary so that it can be well received by respondents.

This research is also by the research conducted to determine the effect of health education on the level of knowledge of parents in dealing with children choking show that before being given

treatment the majority of respondents have enough knowledge of as many as 29 people. Bivariate analysis using the *Wilcoxon Signed Rank Test* obtained a *p-value* of $0.000 < \alpha 0.005^7$.

This study has limitations experienced by researchers. The researcher realized that there were other factors that the researcher could not rule out, namely parents who did not *review* the training that had been given

CONCLUSIONS AND SUGGESTION

From the results of this research it can be concluded that: Before being given training in handling choking at Early Childhood Education Programs Adzikri Merakurak, most of the respondents had sufficient abilities, After being given training in handling choking at the Adzikri Merakurak Early Childhood Education Programs, almost all respondents had good abilities and There was a significant difference between the *pre-test* and *post-test* abilities after being given treatment at Adzikri Merakurak Tuban Early Childhood Education Programs. Some suggestions are given after the research was conducted: Expected mother educated child chew food before swallowing it, forbid children to eat while bi way, cuts to shape children's food into small pieces, and perform appropriate handling of choking to children who are choking; It is hoped that the teacher will provide material about the dangers of choking to children and the teacher will be able to provide appropriate assistance when there is an incident of choking in children at school; It is hoped that the next researcher can develop this research by using the variable of parental negligence with the incidence of choking in children.

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