

NUTRITION CONSULTATION FOR INDONESIAN MIGRANT WORKERS IN TAIWAN

Catur Wulandari¹, Ira Dwijayanti², Anugrah Linda Mutiarani³, Farah Nuriannisa⁴

^{1,2,3,4} Program Studi Gizi, Fakultas Kesehatan, Universitas Nahdlatul Ulama Surabaya
e-mail: cawulan@unusa.ac.id

Abstrak

Permasalahan gizi dan kesehatan menjadi perhatian utama pada pekerja migran Indonesia di Taiwan yang termasuk dalam kelompok usia produktif, sehingga rentan terhadap sindrom metabolik. Tujuan kegiatan ini adalah memberikan konsultasi gizi kepada pekerja migran Indonesia di Taiwan dengan fokus pencegahan sindrom metabolik. Konsultasi gizi dilakukan dalam dua sesi secara online melalui platform Zoom dan Google Meet. Konsultasi gizi diikuti oleh 31 peserta dari pekerja migran Indonesia di Taiwan dengan sembilan konselor gizi yang telah tersertifikasi. Konsultasi gizi dilakukan secara individu dan bergantian untuk setiap peserta. Berdasarkan hasil konsultasi gizi, didapatkan peserta memiliki status gizi lebih (41,9%), obesitas (12%), dan kurang (3,2%). Peserta memiliki pola makan yang kurang baik (42%). Konselor melakukan food recall pada peserta untuk mengetahui asupan energinya, dengan hasil asupan energi yang defisit (42%) dan lebih (26%). Intervensi gizi yang diberikan oleh konselor menyesuaikan dengan permasalahan gizi dari masing-masing peserta. Secara keseluruhan, kegiatan ini berjalan lancar dan menyoroti pentingnya pemenuhan kebutuhan gizi dan mendorong pola makan sehat untuk mencegah sindrom metabolik pada pekerja migran Indonesia di Taiwan.

Kata kunci: Konsultasi Gizi, Sindrom Metabolik, Pekerja Migran

Abstract

Nutrition and health problems are a major concern for Indonesian migrant workers in Taiwan who are in the productive age group, making them vulnerable to metabolic syndrome. The aim of this activity is to provide nutritional consultation to Indonesian migrant workers in Taiwan with a focus on preventing metabolic syndrome. Nutrition consultations are carried out in two online sessions via the Zoom and Google Meet platforms. The nutrition consultation was attended by 31 participants from Indonesian migrant workers in Taiwan with nine certified nutrition counselors. Nutrition consultations are carried out individually and alternately for each participant. Based on the results of the nutritional consultation, it was found that participants had overweight (41.9%), obesity (12%), and underweight (3.2%). Participants have poor eating patterns (42%). The counselor conducted food recalls on participants to determine their energy intake, with the results of energy intake being a deficit (42%) and more (26%). The nutritional intervention provided by the counselor adapts to the nutritional problems of each participant. Overall, this activity ran smoothly and highlighted the importance of meeting nutritional needs and encouraging healthy eating patterns to prevent metabolic syndrome in Indonesian migrant workers in Taiwan.

Keywords: Nutritional Consultation, Metabolic Syndrome, Migrant Workers

INTRODUCTION

The Ministry of Manpower in Taiwan reported that the total number of Indonesian Migrant Workers in Taiwan reached 257,496 and the majority (75.99%) were female Indonesian Migrant Workers (1). Research conducted by Huang & Mathers (2008) found that migrant workers in Taiwan had difficulty accessing health facilities and health information due to language barriers (2). A total of 248 Indonesian Migrant Workers as research respondents, 85.1% of respondents stated that they had experienced illness, but only 48.8% visited health services due to language barriers (3).

Interviews conducted with 15 Indonesian women in Taiwan showed that Indonesian women in Taiwan experienced physical health problems because they had difficulty adapting to food and accessing halal food in Taiwan (4). Indonesian migrant workers in Taiwan are a group vulnerable to various problems, one of which is nutritional problems due to difficulties in accessing appropriate and halal food due to language barriers, beliefs and different cultural factors between Taiwan and Indonesia.

Indonesian Migrant Workers in Taiwan are a productive age group. The adult age group (19-59 years) is one of the groups that is vulnerable to experiencing a decline in fitness due to degenerative or metabolic diseases. According to Basic Health Research, the incidence of degenerative diseases in the form of hypertension is 34.1%; diabetes mellitus by 21.7%; and obesity by 21.8% (5). Health problems can be caused by nutritional intake (deficiency and excess of certain nutrients), inappropriate food choices, inappropriate information about nutrition, and public confusion about nutrition and food. Degenerative diseases can be caused by consuming risky foods, such as sweet, salty, fatty, preserved and flavored foods/drinks (6).

This activity is a series of providing education to Indonesian Migrant Workers in Taiwan regarding metabolic syndrome. Where, this nutritional consultation is given to Indonesian Migrant Workers in Taiwan with the aim of being able to provide nutritional interventions according to the nutritional problems each participant in the nutritional consultation has. The nutrition consultations provided are a concrete form of helping Indonesian Migrant Workers in Taiwan who experience difficulties in accessing information related to nutrition in Taiwanese health services.

METHOD

This community service was carried out in collaboration with PCINU Taiwan which was carried out online via Zoom and Google Meet. Nutrition consultations are carried out in two sessions, namely on 19 August 2023 for the first session, and 2 September 2023 for the second session. Previously, the author distributed a registration link for nutrition consultations to Indonesian Migrant Workers in Taiwan. Prospective nutritional consultation participants can register via the link <https://unusa.id/RegisKozi2023>. There were 50 participants who filled in the registration link, then the committee contacted them to convey the consultation procedure. A total of 31 participants responded, so the respondents in this activity were 31 Indonesian Migrant Workers in Taiwan. Nutrition consultations are provided individually by nine certified nutrition counselors. Each session a nutrition counselor provides consultation to two participants.



Figure 1. Poster for Community Service Activities

RESULTS AND DISCUSSION

Nutrition consultation activities were provided to 31 participants from Indonesian migrant workers in Taiwan. The first consultation session was carried out via breakout room zoom media which was carried out after nutrition education. The second consultation session was carried out via Google Meet by each counselor for the consultation participants. The following presents the characteristics of participants who took part in nutrition consultations.

Table 1. Characteristics of Participants in the Nutrition Consultation for Indonesian Migrant Workers in Taiwan

Characteristics	Total	Percentage (%)
Gender		
Man	1	3,2
Woman	30	96,8
Total	31	100
Age		
20-30 Years	4	12,9

31-40 Years	12	38,7
41-50 Years	15	48,4
Total	31	100
Education		
Elementary School	0	0
Junior High School	7	22,5
Senior High School	24	77,5
College	0	0
Total	31	100
Work		
Household Assistant	18	58,1
Caregiver of the elderly	12	38,7
Housewife	1	3,2
Total	31	100
Disease History		
Cholesterol	3	9,7
Gastritis	5	16,1
Non	23	74,2
Total	31	100

Based on the table above, it is known that almost all (96.8%) of the respondents were women. Nearly half (48.4%) of respondents were aged 41-50 years. The majority (77.5%) of respondents had a high school education. Most (58.1%) respondents work as household assistants in Taiwan. There were 16.1% of participants who had gastritis, and 9.7% of participants had a history of high cholesterol.

This nutritional consultation was carried out to identify the nutritional status and nutritional adequacy of Indonesian Migrant Workers in Taiwan. The following is data regarding the nutritional status of participants based on Body Mass Index (BMI).

Table 2. Data on Characteristics of Nutrition Consultation Participants

Characteristics	Total	Percentage (%)
Physical Activity		
Light Activity	0	0
Moderate Activity	22	71
Heavy Activity	9	29
Total	31	100
Dietary Habit		
Good	18	58
Not Good	13	42
Total	31	100
Energy Intake		
Severe Deficit	0	0
Moderate Deficit	0	0
Mild Deficit	13	42
Enough	10	32
More	8	26
Total	31	100

Nutrition consultation begins by identifying the participant's habits which include physical activity, eating patterns, and energy intake. Based on the picture above, it is known that most of the participants from Indonesian Migrant Workers in Taiwan carry out moderate physical activity. Most (58%) of the participants had a good diet, but almost half (42%) of the participants had a poor diet. Nutrition counselors conducted a 24h recall to assess participants' energy intake, and it was found that almost half (42%) of participants had a deficit energy intake.

Table 3. Nutritional Status Based on BMI for Nutrition Consultation Participants

Characteristics	Total	Percentage (%)
Underweight	10	32
Normal	13	41,9
Overweight	13	41,9
Obese	4	12
Total	31	100

Identification of the nutritional status of consultation participants is carried out by giving questionnaires to participants to determine the participant's height and weight. It is known that almost half of nutritional consultation participants have overweight and normal nutritional status. There were 12% of participants who were obese, and 3.2% of participants had underweight.

Physical activity is one of the factors that determines nutritional status. Low physical activity is a risk factor for obesity, large food interactions and low physical activity can cause obesity (7). Research by Retno and Dewi (2017), found that there was no relationship between physical activity and diet and nutritional status. However, food consumption affects a person's nutritional status. Good nutritional status occurs if the body gets enough nutrients (8). Underweight occurs when the body experiences a deficiency of one or more nutrients. Overweight occurs when the body obtains excessive amounts of nutrients, making it dangerous for health (9).

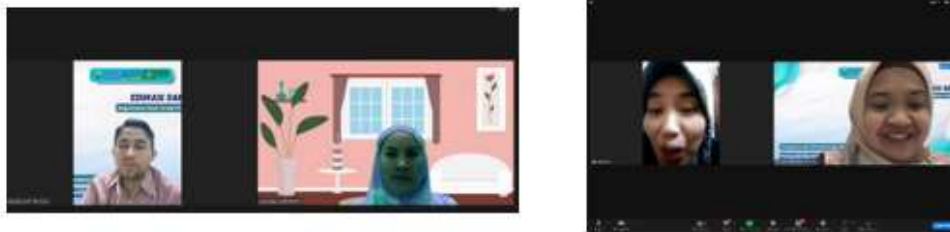


Figure 1. First Session Nutrition Consultation Activities via Breakout Room Zoom



Figure 2. Second Session Nutrition Consultation Activities via Google Meet

CONCLUSION

Nutrition consultations provided to Indonesian Migrant Workers in Taiwan by nutrition counselors can identify nutritional status and nutritional problems faced by participants. Nutrition counselors provide nutritional care according to the complaints and nutritional needs of each consultation participant. In order to improve the health status of Indonesian Migrant Workers in Taiwan, nutritional consultation activities should be carried out regularly.

SUGGESTION

It is hoped that nutritional consultation activities for Indonesian migrant workers in Taiwan can be carried out directly, so that nutritional care can be provided more appropriately.

REFERENCE

- Pangaribuan, S. M., Lin, Y.-K., Lin, M.-F., & Chang, H.-J. 2022. Mediating Effects of Coping Strategies on the Relationship Between Mental Health and Quality of Life Among Indonesian Female Migrant Workers in Taiwan. *Journal of Transcultural Nursing*, 33(2), 178–189. <https://doi.org/10.1177/10436596211057289>
- Huang, Y. C., & Mathers, N. J. 2008. Postnatal depression and the experience of South Asian marriage migrant women in Taiwan: Survey and semi-structured interview study. *International Journal of Nursing Studies*, 45(6), 924–931. <https://doi.org/10.1016/j.ijnurstu.2007.02.006>
- Weng, S.-F., Malik, A., Wongsin, U., Lohmeyer, F. M., Lin, L.-F., Atique, S., Jian, W.-S., Gusman, Y., & Iqbal, U. 2021. Health Service Access among Indonesian Migrant Domestic Workers in Taiwan. *International Journal of Environmental Research and Public Health*, 18 (7), 3759. <https://doi.org/10.3390/ijerph18073759>
- Yang, M., Liang, W., Zhao, H. H., & Zhang, Y. 2020. Quality analysis of discharge instruction among 602 hospitalized patients in China: A multicenter, cross-sectional study. *BMC Health Services Research*, 20 (1), 647. <https://doi.org/10.1186/s12913-020-05518-6>
- Kemkes RI. Riset Kesehatan Dasar. 2018. Badan Penelitian dan Pengembangan Kesehatan. Jakarta: Badan Penelitian dan Pengembangan Kesehatan Kementerian Kesehatan RI. Available from: http://labdata.litbang.kemkes.go.id/images/download/laporan/RKD/2018/Laporan_Nasional_RKD2018_FINAL.pdf
- Riset Kesehatan Dasar. 2017. Badan Penelitian dan Pengembangan Kesehatan. Departemen Kesehatan RI.
- Strauss, RS. 2000. Childhood Obesity and Self Esteem. *Pediatric*; 105 (1):E15
- Noviyanti RD, Dewi M. 2017. Hubungan Pengetahuan Gizi, Aktivitas Fisik, dan Pola Makan Terhadap Status Gizi Remaja di Kelurahan Purwosari Laweyan Surakarta. *The 6th University Research Colloquium 2017*. ISSN 2407-9189.
- Almatsier, S. 2004. *Prinsip Dasar Ilmu Gizi*. Jakarta: PT. Gramedia Pustaka Utama.