The Barriers of Self-care among Street Children in Banda Aceh

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Abstract: Self-care is a basic human regulatory function which is essential to be performed by any individuals to sustain their lives, health, development, and well-being. As well as other individuals, the street children perform self-care for the same purpose. However, little was known about how they perform it, particularly the barriers which they might find to meet their self-care needs. This study was aimed to explore the barrier of self-care among street children living in Banda Aceh city. This descriptive phenomenological study involved eight street children of a punk community living in Banda Aceh. Data collected in this study was analyzed using Collaizí’s method. Two themes emerged as the results of the study: 1) negative perceptions of self, environment and society; and 2) paid health services and self-care facilities. These findings are expected to serve as the evidences for the stakeholders to develop a supporting program which facilitates the fulfillment of street children’s self-care needs, instead of merely focusing on the enforcement of public regulation or sharia law in Banda Aceh.

1 INTRODUCTION

The large number of the world’s street children population, which reached 150 million, caused by many factors such as violence; drug and alcohol abuse; the death of parents; family conflict; war; natural disaster; and socio-economic issues. Those conditions implied many of poor children being forced to earn living by themselves for living on the street; scavenging; begging; peddling food in the slums area; sleeping and living on the street; and sheltering under bridges, gutters, or at the train station.

Many of them faced problems such illness, died in the pavement, victimized by drug crime, involved in fighting or conflicting among groups, and even suffered from other diseases. Risks of violence and exploitation are also high in this group of population (UNESCO, 2011).

Various researches outline the description of the problem experienced by street children. One of those study in India illustrates that majority of the street children (64%) live in slum area and do forced labor in polluted environment with long duration and minimum wages. One-seventh of them (13%) only having meal once a day, they also experienced physical and verbal exploitation (69%), and physical abuses (74%). The uses of psychoactive substances were also found, such marijuana (35%), inhalation (35%), pharmacy opioids (18%), sedatives and heroin (18%) and injections (12,6%) (Khatun & Jamil, 2013; Srivastava & Sharef, 2016; Bhattacharjee & Kumar, 2016). Meanwhile in Africa, the identified cases of street children were suicide, unprotected sexual intercourse, sexual exploitation, drugs abuses and physical violence (Hills et. al, 2016).

In Indonesia, the population of street children rises significantly. The Ministry of social affairs (2017) mentioned that there are about 4.1 million of street children in Indonesia that spread in several provinces in Indonesia. The biggest population is in Jakarta with the total population is 7.600 children then followed by West Java 5.200 population (Ministry of Social Affairs, 2017).

The increasing numbers of street children create various cases impacted to physical, social and psychological violence, economic exploitation, sexual harassment, trafficking, accident threat and diseases (Ministry of Social Affairs, 2016).

Although these street children and punk community issues have been existed for long time, but still very few studies conducted related to the problem particularly in Aceh Province. There are...
some studies that have been conducted in this community, including the community development and point of view of Banda Aceh citizen (Syam & Hasan, 2013), studies encompassed sexual harassment, social issues, political views, genre music of punk community as well as life values of punk community (Hasnadi, 2012; Sugianti, 2014). Among the studies, health care issue for punk community and street children is the subject that missing especially the barriers they might face to fulfill their self-care needs. Therefore, this study was conducted to explore the obstacle faced by punk community in meeting their self-care needs.

2 METHODS

This research is qualitative research using descriptive phenomenological design to investigate extensively, critical, and systematic phenomenon. The selection of design aims to explore the depth and complexity of the punk community in Banda Aceh regarding self-care.

The data collection used in depth interview method started from December 2017 to March 2018. The researcher has been conducted in-depth interview to all participants in this study through face to face interview. The additional instrument applied in this study namely audio tape recorder, demographic data form, interview guidelines as well as field note to write the moment, body language and nonverbal gesture occur during the data collection.

This research has been passed the test of practice by Faculty of Nursing’s Ethical Review Board of Syiah Kuala University with (No. 320/MKEP/UN11.1.19/KM/2017). After that, the researcher obtained permission from National Unity and Politics Agency of Banda Aceh to be passed to social office of Banda Aceh.

Before collecting the data, the researcher has been clarified about the study to all participants in order to get their informed consent. The explanation covers the participant’s right to participate or ignore their self without any consequences, contribution of the participants expected in this study; data confidential, data collection method, data collection tools, and participant’s right to determine the information given to be shared with other researcher or parties. Participants who agreed to get involved in this study give their consent by signing the approval sheet. Before conducting in-depth-interview, the main researcher built rapport with the participants while they were doing their daily activity.

3 FINDINGS

3.1 Setting

Banda Aceh is the capital city of Aceh province which is a center of government as well as focal point of economics, politics, socials and culture of Aceh. Banda Aceh was known historically as the oldest Islamic city in Southeast Asia. This city used to be as capital city of sultanate Aceh Darussalam, one out of the five biggest Islamic sultanates in the world. The city conserved historical heritage sites form various period, ranging from the sultanate, the colonial period, joined in a frame of unitary of Republic Indonesia period, during the conflict time to reconciliation phase after Tsunami. The historical heritage sites are Baiturrahman Great Mosque, Gharah Park compound, Aceh Historical Museum, Aceh Tsunami Museum, Mausoleum of Sultan Iskandar Muda and another historical relic sites in various spot of the oldest Islamic city in South-east Asia (Government of Aceh, 2010).

Post-Tsunami in early 2005 is a time when other cultures entered and developed in Banda Aceh. One of those is Punk community, as told by one of participants. There are some Acehnese teenagers who joined in this community and they choose Taman Sari Park as they center point to meet and gather. Early 2014, this community moved to Museum Tsunami and then until 2018 they used a small highway in traditional market as their center point. In the area, it looks different and striking compared to surrounding environment. Almost every inch of the pathway full of the graffiti and doodle shown punk’s identity about rebellion.

The government of Banda Aceh considers the punk community as persons of social welfare problem who must be organized in order to implement the Qanun number 11 about social well-being. The authority of Banda Aceh, in collaboration with stakeholders, such as social workers, polices, and wilayatul hisbah (sharia police), arrange routine patrols and controls towards punk community and other groups which considered to contribute to social problems.

Based on District Office of Social Affairs (2017), the regulations have been implemented since 2010 to 2017 in some focal points of development. At least 29 street children from punk community were in the sweeping and they finally returned home to their parents. However, even when the regulations are enforced, this punk community keeps gathering and doing their activities in the streets without staying overnight on it. This community has been renting a
house close to the traditional market. The participants used this way to prevent the sweeping from the officers. This house occupied by the punk children who has no family to stay with, while for gathering spot they are still using the small alley near the traditional market.

To control of the social welfare problems, the district office of social affairs conducts regular patrols every month on 2018. The officer confiscated their belongings and accessories like outfit, jacket, boots, guitar, and their saving money. In reconciliation phase, this group obtained knowledge and education about religious thing, briefing and instruction for not return to the street’s life and to adjust the appearance in order to meet the expectation of shariah Islam determination. They were suggested to wear long sleeve shirt and long pants to cover the tattoo in their body. In addition to that, the hairstyle is also change significantly from what they used to be as a punk identity with their accessories like earrings and metal necklace which seized by the officer. The last step to return the punk children into their own family, unfortunately some of them were arrested due to drugs abuses.

3.2 Participants

This study involves eight children from punk’s community who are spending their life in above setting area. All the participants in this study are male, Muslim, whose age are scaled from 26 up to 30 years old. One of eight participants are married and having two kids under five years of age, while the rest are still single. Most participants are Acehnese, one person is Acehnese-Javanese and the other one is Javanese - Batakkenese. Most of them are graduated of Senior High School. Six out of eight children are categorized into “on the street children” which means the street children who earn on the street but return home at night. The rest are labelled as “off street children” who are spending all activity on the street. The characteristic of the subject in this research is presented in table 1.

Generally, the participants are not wearing any of punk’s accessories, but their former piercings are still visible clearly especially in the ears with the width of the hole piercings about one centimeter. During process of the research, the participants were wearing long sleeves shirt to cover their tattoo in the wrist. Some of them were also had it in their neck. The color of the shirt mainly black with the doodles and scratches typically punk children used. Moreover, their jeans are deliberately torn knee or wear short pants as well as putting on shoes. All of them are smoking in both public area and the place they gather. To transport from one place to another spot they more often on foot or utilize unpaid public transportation. They stick on their idealism to have simple life, independently without taking and receiving any property from their parents as a guideline for anti-established life.

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>19-25</td>
<td>1</td>
</tr>
<tr>
<td>25-30</td>
<td>7</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
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<tr>
<td>Islam</td>
<td>8</td>
</tr>
<tr>
<td>Educational</td>
<td></td>
</tr>
<tr>
<td>Junior high school</td>
<td>1</td>
</tr>
<tr>
<td>Senior high school</td>
<td>5</td>
</tr>
<tr>
<td>University</td>
<td>2</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>1</td>
</tr>
<tr>
<td>Single</td>
<td>7</td>
</tr>
<tr>
<td>Ethnic</td>
<td></td>
</tr>
<tr>
<td>Acehnese</td>
<td>6</td>
</tr>
<tr>
<td>Acehnese-Javanese</td>
<td>1</td>
</tr>
<tr>
<td>Javanese- Batakkenese</td>
<td>1</td>
</tr>
<tr>
<td>Type of street children</td>
<td></td>
</tr>
<tr>
<td>On the street children</td>
<td>6</td>
</tr>
<tr>
<td>Off the street children</td>
<td>2</td>
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</tbody>
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Participants are often seen together as a group. One brings the guitar and others having the percussion instrument made of the used good that have been modified. They usually busk together around the coffee shop, food court and traditional market. After finishing the activity, they took a rest in an alley behind unoccupied shop while smoking one cigarette for all members. They often buy meals and eat by hand together and referred it as Sunnah of the prophet. In the morning until afternoon they just have a rest at their meeting point and creating the bracelet made from thread. While waiting for others friend to gather, sometimes they play guitar and compose the song. Among them, there is a participant who runs a cloth printing business, while the rest mostly just earn money from busking.

In the afternoon the participants are ready for busking together in coffee shops or cafes at traditional market or culinary spots. The busking activities will be stopped for a while before the evening prayer to honor those who pray. Later, the
participants return to the market hall and smoke cigarettes together.

In the evening, participants will do same activities as they did in the afternoon until around 23.30 PM. Finished busking, they regrouped in the alley and calculated the money they earned. For them, the money they collected is enough to buy food and cigarette. If there are some money remained, they will be saved as collective saving.

The saving then stored to use for anytime needed, like to pay the treatment of sick punk community member or as a business capital in the future. After that, the members will have coffee together in the nearest coffee shop from their gathering point and last return home.

3.3 Themes

Two themes emerged as the results of the study: 1) negative perceptions of self, environment and society; and 2) paid health services and self-care facilities.

3.3.1 Negative Perceptions of Self, Environment and Society

The theme of “negative perceptions of self, environment and society” describes about how participants consider their self-suspected by the society and environment will behave negative like stealing and disturbing the community. Due to those negative stigmas, the punk community feel frightened utilize self-care facility to fulfill their personal hygiene needs which is available and free in the mosque. Below is their expression about it.

There are many obstacles we face, especially in the mosque. They suspect us stealing or destroy the facility or make a noise. At the end they will chase us away. Because the mosque is a clean and holy place, so we cannot enter it with our dirty outfit. We decide to find gas station or coffee shop and house of resident. (Participant 3)

Other participants also express the same thinking with participants 3. It is inappropriate to enter the mosque and using self-care facility if they are wearing the punk outfit which is contrast with religion value. Below is the expression from one of participants.

I never even thinking to enter the mosque for any basic needs due to my appearance (Participant 5)

3.3.2 Paid Health Services and Self-care Facilities

This theme elaborates on how the participants recently used their own money and their collective saving for receiving health services when they faced any health problem. At the same time each of them also spends two thousand rupiah to use personal hygiene or self-care facility both for bathing and other needs elimination. Below is the expression on how they spend money to have medicine or treatment regarding any health issues.

When we got sick, we spend our collective saving to buy the medicine. We cannot just let our friend being sick without any treatment. Sometimes for fever case, we buy bodrex or paracetamol and take it then getting better next day. If any of us get accident, we will bring them to the hospital. (Participant 3)

Another participant also told that they used the community saving to buy the drug that commercially available in the stall or generic drug in the drug store as expressed by the participant here:

We take the drug that we buy in drug store or hospital. If we need to get hospitalized, we spend money from our collective saving, some we used to buy medicine the rest to visit our sick friend in the hospital. (Participant 6)

Paying for self-care facility is also become a barrier for the participants in fulfill their self-care needs. They will be able to have only by paying it. The conditions as shared by some participants:

To use the public toilet, sometimes we must pay. (Participant 4)

We used public toilet, but we must pay for it. As Padangnese said, indak ado hepeng indak ado means you have nothing if you have no money ((laughing)) there are a lot of public toilet and we spend two thousand for enjoying the facility. (Participant 6)

4 DISCUSSION

Syam and Hasan (2013) conducted the research concerning about the development of punk community in Banda Aceh. This study found that the existence of punk community in Banda Aceh has been disturbing the resident at the same time it also desecrates the image of Banda Aceh as Islamic city.
The data shown that 68 residents of Banda Aceh (77.28%) viewed that the government of the city failed in handling and eradicating the growing of punk community in Banda Aceh. Furthermore, the citizen of Banda Aceh also rejected the development and existence of the punk community in the city of Banda Aceh, because the existence of the community was contrary to religious values, as well as the customs and culture of Banda Aceh. In addition, the punk child community also considered to bring the negative effects for families and young generation in Banda Aceh.

The same view as above also found in other research. In Ilhami’s (2018) study of women’s punk existence in Surabaya found that the punk community was labelled as having behavior appearance counter to culture within the society. In a society that still honored the Eastern culture, which is full of manners, punk life style is still consider as Western culture oriented that respects freedom of speech, action, deed and behavior.

Public views related to punk community were also found in a research conducted by Helmy (2012). Helmi described negative perceptions of the Bakonang community in Surakarta which against punk children. The community views teenagers who are punk children who have adopted a lifestyle that is not in accordance with the surrounding environment, as the freedom adopted by punk children has been misunderstood through the behavior of punk children such as hanging out while drinking, making noise, behaving indifferently to the surrounding environment by ignoring the prevailing norms and influencing other teenagers to become punk.

From the perspective of the punk community itself, Anditya (2016) found that the punk community did not care and listen to negative words, nor did they feel the negative label given by the community to participants. So that participants are free to do anything regardless of the surrounding community.

Regarding health-seeking behaviors, several studies describe the behavior patterns of street children when experiencing health problems and need health care. Research conducted by Ali (2005) in Islamabad, Pakistan, states that self-medication is preferred by punk children due to several things, such as medical pluralism, long waiting time, monetary. These things are obstacles they feel to use health services.

Furthermore, a survey conducted in Cambodia shows that street children who experience with health problems prefer to treat themselves by buying drugs or taking medication in a house they live in together. The choice is taken based on the decisions or costs they have (Rivenbark, 2008). The punk children of Banda Aceh also experienced the same thing, where participants chose self-medication because it was easier and faster by using shared savings, namely collective money that participants had collected through the group treasurer.

Although some of the studies above emphasize that street children prefer to treat themselves and avoid public health services, Slesnick, et al (2008) and Calheiros (2014) state that homeless teenagers can be involved in treatment and respond well to intervention efforts provided by health workers. This is supported by Whelan (2010) who conducted a study involving 150 homeless people in Canada. The study showed that 86.0% of homeless people who had health problems chose to use mobile cars to get basic treatment. This is done by the government to reach services for high-need populations (Whelan, 2010).

In addition to health services in the form of mobile cars, an alternative form of other health services is the medical home care model. Toole et al. (2016) describes a medical home care model conducted by the Veterans Health Administration (VHA) in Pennsylvania to serve homeless patients. Toole et al also mentioned that there was an increase in visits and types of primary care services that homeless patients received with the existence of the medical home care model (Toole et al, 2016).

Cumber and Gwegweni (2015) also explained some alternative solutions to protect street children from neglect, abuse, increase their access to education, and improve their health status. Some of the primary interventions that need to be upheld by policies and laws in all countries in Africa include such as providing safe housing, proper nutrition, access to health care, health education, and sexual reproduction health, protection from all forms of harassment, violence and substance abuse.

Based on the description above, there are many solutions that can be done by health care providers in the community. In addition, policies, local regulations or laws are needed to eliminate obstacles faced by street children, especially punk children, in doing self-care, including obtaining accessible primary health services. Some alternative solutions that can be realized include the provision of safe shelter, proper nutrition, and access to health care as well as health education. For the context of street children in Banda Aceh, similar forms of service may be used as an alternative to the Banda Aceh city government policy.
The same thing is expected to be realized, in order to facilitate risk groups such as street children and punk children to utilize free health care facilities that are easily accessible to this community. With this service, the government can also more easily screen, prevent and control treatment for the spread of infectious diseases, such as TB, HIV, STDs, as well as monitoring other deviant behaviors such as violent behavior and drug abuse in punk communities.

5 CONCLUSIONS

The themes emerged in this study explicated concerns on self-care which might be considered as evidence for stakeholders and policy makers to change the policy towards punk community or other risk groups. Instead of merely focusing on law enforcement, the policy should also support the fulfillment of the groups’ basic need, including their self-care needs.

ACKNOWLEDGEMENTS

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