



Youth Mean's Knowledge Differences As Impact Of Health Education Implementation Using Multimedia

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ABSTRACT

Background : Teenage pregnancy in Indonesia is relatively high, according to the WHO the incidence of teenage pregnancies is 58 per 1000 teenagers and the Asia Pacific ranks 4th after South Africa. Indonesia is one of the countries in the Asia Pacific region with high teenage pregnancies. According to *Riset kesehatan dasar* there were 77.6 per 1000 adolescents who had become pregnant and 69% of adolescents had given birth, whereas in West Java, there were 126 per 1000 adolescents who had become pregnant and giving birth. One factor that causes high teen pregnancy is low of knowledge. This condition is related to the lack of health education provided by health workers and the amount of information in social media about premarital sexual behavior so that many teenagers engage in deviant sexual behavior and end up in pregnancy. The purpose of this study was to find out the mean and differences in the mean knowledge of adolescents pre and post intervention.

Method : The research sample was 30 students of Lembang Senior High, West Bandung Regency. Analysis of this study used the Paired Sample T Test.

The results : The results showed that the average at pre test: 70,7 while in the post test: 82.6 There was a statistically significant difference in the mean value of knowledge pre and post test with a value of $p < 0.05$. The mean value of knowledge after intervention was significantly higher than the mean value of knowledge before intervention.

The conclusion : The conclusion of this study is that there are mean differences in pre and post after giving of health education using multimedia. Multimedia is needed as a media to change adolescent knowledge. Suggestions from this study, Giving of health education in adolescents should be given gradually and repeatedly using multimedia to give effect of changing in knowledge. For adolescents, multimedia is an effective media for disseminating information so that it can change knowledge for the better and ultimately have an impact on decreasing premarital sex in adolescents.

Introduction

Adolescence is a transition period in the span of human life, connecting childhood and adulthood. Children are considered adults when they are able to reproduce.¹

Every 126 Of 1,000 people in West Java who aged 15 to 19 years there are married people in adolescence and childbirth. With regard to teenage marriage, the incidence of teenage pregnancy in Indonesia is high. According to WHO the incidence of teenage pregnancy is 58 people per 1000 teenagers and the Asia Pacific ranks 4th after

South Africa. Indonesia is one of the countries in the Asia Pacific region with high teenage

pregnancies. According to *Riskesdas* there were 77.6 per 1000 adolescents who had become pregnant and 69% of adolescents had given birth to a child, whereas in West Java, there were 126 per 1000 adolescents who had become pregnant and giving birth.²

Teenage pregnancy has an impact on increasing morbidity and mortality in both the mother and her baby. Various studies on the effects of adolescent pregnancy are two to four times the incidence of mortality and morbidity, labor with *Section Secarea*

(SC), episiotomy, vacuum, forceps, Cephalo Pelvic Disproportion (CPD), eclampsia, abortion, infection, Urogenital Fistula, preterm labor, anemia, LBW (Low Birth Weight Babies), infant disability and Asphyxia. In addition to these impacts there are also the effects of partner violence, divorce and dropping out of school.^{3,4}

Based on various research results, it is stated that several factors that influence adolescent pregnancy are the low adolescent knowledge about adolescent reproductive health, including the risk of teen pregnancy and adolescent contraception, other factors namely social culture, husband support and economic status. Riskesdas data shows that 78.5% of adolescents in West Java do not get information about adolescent reproductive health. As we all know that knowledge is one of the important factors in forming the behavior of these adolescents.^{5,6}

Various theories suggest that health education carried out by presenting a background picture similar to the target / adolescent can make teenagers more interested. The stimulus given with the same background / experience picture can help the target feel it and be more arousing.⁶

The purpose of this study was to look at the mean and differences in the mean knowledge of adolescents pre and post intervention. The research sample was 30 students of Lembang Senior High, West Bandung Regency.

Methods

Research design was quasy experiment. Samples were 30 student who second grade of senior high school. Data collected in july 2017. Analysis of this study used the Paired Sample T Test.

Results and Discussion

Tabel 1 . Description of respondents' knowledge in the pre test and post test at Lembang Senior High

Knowledge	N	Mean
Pre	30	70.74
Post	30	82.59

The results showed that the average at pre: 70,7 while in the post test: 82.6

From the results, it was found that the average level of knowledge of the post test was higher than the pre test.

Tabel 2 .Impact Of Health Education Implementation Using Multimedia of Youth Mean's Knowledge Differences at Lembang Senior High

Knowledge	Mean	N	St Dev	Correlation	Sig
Pre	70.74	30	15.04389	0.497	0.05
Post	82.59	30	10.39179		

There was a statistically significant difference in the mean value of knowledge pre and post test with a value of $p < 0.05$. The mean value of knowledge after intervention was significantly higher than the mean value of knowledge before intervention.

From the results of the above research, it can be found that there is an impact of multimedia on increasing knowledge. This is in accordance with the results of research conducted by Liana and Asnindari (2015), that audio-visual media influence the knowledge in adolescents. Supported also by Agustini's research (audio-visual media influences the knowledge and attitudes of young women about the treatment of dysmenorrhea. One of the factors that influence one's knowledge is information, in addition interest factors will influence someone to seek information. In theory, knowledge is the result of a person's senses (eyes, ears, nose, tongue, and skin), or the results of a person understand and know through their senses towards an object, Important knowledge in determining attitudes and for motivating someone to behave in a healthy manner, even though knowledge does not always cause behavior change, but between them has a positive relationship (Green, et al., 1980). Without having adequate knowledge, people may not be aware and do not care about their health problems. Thus knowledge is an important aspect of behavior change (Simons Morton et al., 1995).

Health education is part of health promotion. Health education using multimedia greatly supports the increase in the absorption of information obtained. Effendy (2012) also revealed that the purpose of providing health education is to achieve changes in the behavior of individuals, families, and communities in fostering and maintaining healthy behaviors and healthy environments, as well as playing an active role in efforts to realize optimal health degrees. Viewed in terms of the use of the five senses, health education delivered using multimedia will interact with several senses namely, hearing and vision. In accordance with Edgar Dale's theory that the more use of the five senses in absorbing the information provided, the more storage of information recorded in a person in the sense of absorption of the information provided.^{7, 8,}

From the results of research conducted by Lange, et al, knowledge, attitudes and practices (KAP) of remote staff in three work settings Indigenous communities in the Northern Territory show that health promotion does not only increase knowledge, attitude and behavior but also build awareness. Regarding the respondents in this study in the adolescent age category, where adolescent cognitive development has a strong curiosity followed by the desire to explore things around them, starting critically, everything must be rational and clear, but the way the mind is egocentric, still see things from their own perspective. The connection with the results of the above research is the existence of health education by using multimedia to high school students. The teenagers in the middle age support the increase in the absorption of information provided by researchers.⁹

Subroyo (2014) Using multimedia in interactive learning had an impact on increasing knowledge from 66% to 81%. There was a statistically significant increase in knowledge using multimedia in a study conducted by Suryani (2008) in her research

The results of research conducted by Sari (2006) about, there was a change in knowledge before and after being given health education using audio visual media.

Conclusion

There are differences in the mean level of knowledge of adolescents after getting health education with multimedia.

Competing Interest

The authors of this paper have no competing interest to report.

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