Proceeding of The International Conference on Health Sciences (TICHes)
Vol 3, No 3 (2024) Print ISSN 9772722511 Online ISSN 3026-3689

P-04

3M EDUCATIONAL VIDEO TO INCREASE KNOWLEDGE AND ATTITUDES OF PUBLIC REGARDING COVID-19 PREVENTION

[1)]Hartiana, [2)]Husni, [3)]Mardiani, [4)]Widia Lestari
[1,2,3,4]) Health Polytechnic Ministry of Health Bengkulu
Jalan Indragiri Number 03 Padang Harapan Bengkulu City

ABSTRACT

Covid-19 is an infectious disease caused by a virus that was first identified in Wuhan, China in December 2019. To help the Indonesian government implement management programs to improve public health, you must implement 3M protocols, wear masks, and maintain social distancing. In addition, the public must also wash their hands frequent. The purpose of this study was to determine whether the 3M educational video media had an effect on preventing Covid-19 on the knowledge and attitudes of the people in the work area of the Sidomulyo Health Center, Bengkulu City. This study was conducted with a quasi-experimental pre-post design with a control group. The research sample consisted of 40 people, 20 people in the control group and 20 people in the intervention group. The sampling technique used is purpossive Sampling. The analysis used an independent t test of 0.05. The results showed the effect of 3M education through video media on knowledge with a p-value of 0.005 and attitudes with a p-value of 0.036. 3M education through video media can increase people's knowledge and attitudes about preventing Covid-19.

Keywords**:** Covid-19, Videos, 3M

INTRODUCTION

Covid-19 is an infectious disease caused by infection crown, first discovered in animals & humans in Wuhan, China December 2019, is considered Cut off Intense Respiratory Condition CoronaVirus2 (SARS-CoV-2) or known as Coronavirus. Signs of people infected with Coronavirus usually range from asymptomatic, mild signs, namely ARI, can be accompanied by fever, coughing, sneezing, shortness of breath and can cause serious conditions such as pneumonia, sepsis, heart failure and even death. The course of infection in the body begins with an incubation period of approximately 3-14 days (Susilo et al., 2020). Coronavirus transmission can be avoided and controlled using 3M health protocols, using masks, maintaining distance and washing hands, this is regulated by Law Number 6 of 2020, especially 3M, must be adhered to and implemented very strictly.

There were still many residents in Sidomulyo Village, Gading Cempaka District, Bengkulu City at RT 15 who had not observed the 3M pattern, for example they were still crowding at parties, sitting close together and some were not wearing masks. Based on interview results, the average resident in RT 15 does not know how to wear a mask correctly, wash their hands with soap and maintain distance when implementing health protocols. The results of survey for 10 people, the average score of 54.4% was categorized as low. Information obtained from the Sidomulyo Health Center, Gading Cempaka District, Bengkulu City, there are still 9 people with a confirmed history of Coronavirus problems. This research aims to determine the effect of 3M education through video media on the knowledge & attitudes of residents in the Sidomulyo Health Center Working Area, Bengkulu City regarding Coronavirus prevention.

METHOD

This research is a type of quantitative research with a quasi-experimental design using a pre-test and post-test design. In this setting, there are two intervention or experimental groups and

Vol 3, No 3 (2024) Print ISSN 9772722511 Online ISSN 3026-3689

one control group. In the intervention group, 3M education was carried out about preventing Coronavirus through video media. while the control group was given an educational booklet.

The sample for this research was taken using a purposive sampling technique with a sample size of 40 respondents, 20 respondents in the control group, 20 respondents in the intervention group.

RESULT

1. Univariate Analysis

Table 1. Characteristics of Respondents Based on age, gender, occupation, education

Variable	Group	
	Control	Intervention
Age		
Mean	43,1	43,9
Min	36	36
Max	65	65
SD	9.403	7.937
Gender		
Man	14(70%)	9(45%)
Women	6(30%)	11(55%)
Education		
Low Education	2(10%)	2(10%)
Moderate Education	15(75%)	12(60%)
Higher Education	3(15%)	6(30%)
Type Of Work		
Work	14(70%)	8(40%)
No	6(30%)	12(60%)

Based on the research results, the age characteristics of the intervention group were between 36-65 years, with a mean age of 43.9 years, more than half were female (55%), the highest education was secondary (60%) and more than half (60%) Work

Age characteristics in the intervention group were between 36-65 years, with a mean age of 43.1 years. and dominated by men (70%), the highest level of education is secondary (75%). Employment status of 70% of respondents is working.

The value for all respondent characteristics is $p > 0.05$, meaning the variable is homogeneous.

2. Bivariate Analysis

Table 2. Difference in average knowledge of respondents before and after being given intervention regarding Covid-19 prevention

Knowledge	Mean	Min-Max	*P value* between group
Pre Intervention			
Control	52,00	20-80	0,399*
Intervention	57,50	30-90	
Post Intervention			

Vol 3, No 3 (2024) Print ISSN 9772722511 Online ISSN 3026-3689

Control	56,00	30-80	0,005*
Intervention	69,50	50-100	

The mean value of respondents' initial knowledge regarding preventing Covid-19 using 3M which was carried out before receiving video media in the intervention group had a mean value of 57.50, SD 15.51 between the range 30-90, while the control group used an initial mean knowledge value of 52.00 , SD 18.23 is in the range 20-80.

After being given the intervention, the knowledge score was higher in the group with a mean knowledge score of 69.50, SD 15.38 between the range of 50-100, an increase of 12 points, while the control group's mean knowledge score was 56.00, SD 13.13 using the range 30-80 there is an increase of 4 points.

The results of the independent t-test statistical test showed a p-value of 0.005 ($p \leq \alpha = 0.05$), meaning that there was a difference in mean knowledge scores between groups after the intervention.

Table 3. Average differences in respondents' attitudes before and after being given interventions regarding Covid-19 prevention

Attitude	Mean	Min-Max	*P value* between group
Pre Intervention			
Control	69,45	53,37-82,14	
Intervention	65,35	53,57-82,14	0,399*
Post Intervention			
Control	70,88	53,57-82,14	
Intervention	76,60	67,95-92,85	0,005*

Based on Table 3, the mean attitude score for preventing Covid-19 in the intervention group before the intervention was 65.35, SD 7.78, in the range 53.57-82.14, and the mean attitude score in the control group was 69.45, SD 7, 37 on range 53.57-82.14. The mean attitude score for the intervention group changed by 7.6 points, with a range of 67.95 to 92.85.

The data shows that the mean attitude score in the intervention group increased by 11.25, while the mean attitude score in the control group was 70.88, with an SD of 8.921, with a range of 53.57 to 82.14, an increase of 1.43 points.

The independent t-test showed a p-value of 0.036 ($p \leq 0.05$), meaning that there was a difference in mean attitude scores between groups before and after the intervention.

DISCUSSION

1. Description of Respondent Characteristics

In this study, the majority of people in the control group were male, namely 14 people (70%). However, more than half of the intervention group was female (55%).

The majority of respondents who received secondary education in the control group (75%) also received secondary education in the intervention group (60%). The findings of this research are similar to those found in previous research by Raharyani (2020).

The majority of respondents in this study worked, 14 people (70%) in the control group, while in the intervention group more than half did not work (60%), this is in accordance with research. Suharmanto (2020), the percentage of people who worked was (19.45%). %) in their research also shows that in the p-score analysis = 0.007, meaning there is a relationship between work and preventing the Handover of the Corona Virus.

2. The influence of 3M education through video media on knowledge of preventing Covid-19

Vol 3, No 3 (2024) Print ISSN 9772722511 Online ISSN 3026-3689

This research found that there was an effect of using video media on people's knowledge, where there was a difference in average knowledge between the two groups of people and an increase in attitude scores after receiving intervention in the intervention group. The impact of education on knowledge and attitudes about preventing the corona virus was quite significant.

The distribution of corona virus prevention videos using social media is also carried out to convey information quickly and accurately so that it is better able to increase people's knowledge and attitudes. WhatsApp social media was chosen because it is the most popular public media used by the public with its existence (84%) during the Covid-19 pandemic (Junawan, 2020)

This research is in line with the theory of Notoatmodjo (2012) which states that attitude is a person's response which includes the emotions involved (agree, disagree, good or bad). Research conducted by Sinananto (2020) does not agree with the findings of this research which found that the percentage People who have a moderate attitude about washing hands with soap to prevent the corona virus are 8%.

CONCLUSIONS AND SUGGESTIONS

The conclusion from the results of this research proves that 3M education using video media on people's knowledge and attitudes has an effect on preventing Covid-19. This video can be used as a media for educating the public in preventing the transmission of Covid-19.

REFERENCES

1. Audri Okta AWD (2019) Hubungan Pengetahuan dan Sikap Terhadap Perilaku Cuci Tangan pada Masyarakat Kelurahan Pegirian, Jurnal Promkes : The Indonesian Journal of Health Promotion And Health Education, vol 7 No, 1 (2019) 1-11 DOI : 10.20473/jpk.V7.11.2019 .1-11
2. Darmawan, A. A. K. N., Studi, P., & Keperawatan, S. (2015). Faktor-Faktor Yang Mempengaruhi Perilaku Kunjungan Masyarakat Terhadap Pemanfaatan Pelayanan Posyandu Di Desa Pemecutan Kelod Kecamatan Denpasar Barat. 5, 29–39.
3. Dinkes Provinsi Bengkulu. Profil Covid-19, Dinas Kesehatan Provinsi Bengkulu Tahun 2020.
4. Fadzilla, nadya noor. (2557). Lembar Kuesioner Pengearuh Edukasi Tentang Pemakaian Masker Terhadap Pengetahaun dan Sikap Paramedis di Puskesmas Non Rawat Inap Gamping I dan Sewon II. 7(2), 1–16.
5. Herman, P. F. (2021). Pengembangan Media Video Pencegahan Covid-19 Dikabupaten Pamekasan Menggunakan Teori P-Process. 11(April), 321–332.
6. Hodijah, S., & Wicaksana, E. J. (2020). Mempersiapkan Masyarakat Dalam Pelaksanaan Protokol Kesehatan Covid-19 Menghadapi Fase “New Normal.” 2–6.
7. Igiany, P. D., Sudargo, T., & Widyatama, R. (2016). Efektivitas penggunaan video dan buku bergambar dalam meningkatkan pengetahuan, sikap, dan keterampilan ibu mencuci tangan memakai sabun. Berita Kedokteran Masyarakat, 32(3), 89–94
8. Kasman, Noorhidayah, K. B. P. (n.d.). Studi Eksperimen Penggunaan Media Leaflet Dan Video Jurnal Publikasi Kesehatan Masyarakat Indonesia , Vol . 4 No . 2 , Agustus 2017 Jurnal Publikasi Kesehatan Masyarakat Indonesia , Vol . 4 No . 2 , Agustus 2017. 4(2), 10–14.
9. Kemenkes, R. (2020). Pencegahan, Pedoman Pengendalian Coronavirus Disease (Covid-19).
10. Leonita, E., & Jalinus, N. (2018). Peran Media Sosial dalam Upaya Promosi Kesehatan : Tinjauan Literatur. 18 (2), 25–34.

Vol 3, No 3 (2024) Print ISSN 9772722511 Online ISSN 3026-3689

11. Listiarsasih, S., Dewi, A., & Listiowati, E. (2016). Efektifitas Media Video Penggunaan Spill Kit Terhadap Kemampuan Petugas di RS PKU Muhammadiyah Yogyakarta unit II. 2 (2), 1-8.
12. Putri, S. F., Setyowati, D. A., Putri, R., & Indah Nur Santi. (2020). Vidio Animasi Prilaku Hidup Bersih Sehat sebagai Media Pendidikan Masyarakat di Masa. 3(3), 201–207.
13. Raharyani, I. P. ; A. E. (2020). Jurnal Ilmiah Kesehatan 2020 Jurnal Ilmiah Kesehatan 2020. Mei, 33–42.
14. Rahmatina, L. A., & Erawati, M. (2020). Evaluasi Program Edukasi dengan Video dan Poster Terhadap Perilaku Masyarakat dalam Menghadapi COVID-19 (Preliminary Study). 3(1), 9–16.
15. Tizaoui, K., Zidi, I., Lee, K. H., Ghayda, R.A., Hong, S. H., Li, H., Koyanagi, A., Jacob, L., Krinbichler, A., & Shin, J. II. (2020). Upadate of the current knowledgeon genetics, evalution, immunopathogenesis, and transmission for coronavirus disease 19 (COVID-19).
16. Putri, S. F., Setyowati, D. A., Putri, R., & Indah Nur Santi. (2020). Vidio Animasi Prilaku Hidup Bersih Sehat sebagai Media Pendidikan Masyarakat di Masa. 3(3), 201–207.
17. WHO. (2020). Tatalaksana klinis infeksi saluran pernapasan akut berat (SARI) suspek penyakit COVID-19. World Health Organization, 4 (March), 1–25.

Yanti, N. P. E. D., Nugraha, I. M. A. D. P., Wisnawa, G. A., Agustina, N. P. D., & Diantari, N. P. A. (2020).Gambaran Pengetahuan Masyarakat tentang Covid-19 dan Perilaku Masyarakat di Masa Pandemi Covid-19. Jurnal Keperawatan Jiwa, Vol. 8 No.(3), 485–490.