

Community Service

HEALTH EDUCATION THROUGH VIDEO MEDIA IMPROVES THE KNOWLEDGE AND ATTITUDE OF PERSONAL HYGIENE IN PREVENTING LEUCORRHOEA IN ADOLESCENT GIRLS

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ABSTRACT

Background. Lack of knowledge and attitudes about personal hygiene in preventing leucorrhoea in adolescent girls' is due to a lack of health promotion, one that can increase knowledge and attitudes about personal hygiene is health education with videos. The purpose of this community service was to 1) increase adolescent girls' knowledge about personal hygiene in preventing leucorrhoea, and 2) improve adolescent girls' attitudes about personal hygiene in preventing leucorrhoea.

Implementation Method. This community service was carried out for adolescent girls' aged 16-18 years in Yosowilangun Manyar Gresik Village with a total of 16 adolescent girls'. The activity was carried out on May 20-27, 2022. The method used was in the form of providing health education about personal hygiene in preventing vaginal discharge with video media using a pre-test and post-test.

Findings. The results of the activity showed that the majority of 14 adolescent girls' (87.5%) had good knowledge and the majority had a positive attitude, namely 15 adolescent girls' (93.75%)

Conclusion. Health education with video media can increase knowledge skills and personal hygiene attitudes in adolescent girls' in preventing leucorrhoea.

Keywords: Attitude, Health education, Knowledge, Personal hygiene, Vaginal discharge, Video.

BACKGROUND

Adolescence is a period of transition from childhood to adulthood. During this time many changes occur such as hormonal, physical, psychological, and social. Problems with the reproductive organs are still commonly found in adolescents due to a lack of information about reproductive health education [1] Personal hygiene is a self-care activity that is carried out independently to maintain physical and psychological health.[2] Conditions of physical and psychological fatigue such as stress can affect an increase in the hormone estrogen which can trigger vaginal discharge.[3] Increased energy expenditure suppresses the secretion of the hormone estrogen which causes a decrease in glycogen levels which are used by Lactobacillus *doderlein* for metabolism, the rest of this metabolism is lactic acid which is

used to maintain vaginal acidity, if little lalic acid is produced, then bacteria, fungi and parasites easily develop.[4] Overcoming leucorrhoea prevention by cleaning vaginal hygiene, changing underwear regularly, avoiding antiseptic liquids for the vagina, not using tight underwear, and going to the doctor regularly.

Indonesia is a tropical area so the body becomes more humid and sweaty. As a result, bacteria easily develop and cause odor in folds such as the armpits and folds of the genital organs in women.[5] In Indonesia, the percentage of women who have experienced vaginal discharge is around 75% of the 118 million women who have had vaginal discharge at least once, while women in Europe who have experienced vaginal discharge are only 25%. This is due to the humid climatic conditions of Indonesia and dry Europe, so they are not easily infected with the fungus that causes vaginal discharge.[6] In East Java, 75% of teenagers experience vaginal discharge.[7] According to the World Health Organization (WHO) states that 5% of adolescents in the world are infected with STD with symptoms of vaginal discharge every year and 75% of women worldwide experience candidiasis or vaginal discharge once in their lifetime and 45% will experience two or more times.[8]. In Indonesia, 52% of adolescents have bad behavior in preventing leucorrhoea, 10% frequently use excessive feminine hygiene products, 17.59% of adolescents do not dry the external genitalia after defecating or urinating, 25.76% of adolescents often use tight underwear, 8.2% of teenagers wear pants that are not made of cotton and 2.5% often wear underwear together.[9]

Someone who has good personal hygiene knowledge and attitudes will have the right behavior, meaning that this behavior will be able to maintain the quality or condition of personal hygiene. keeping the vaginal area clean from the vagina to the anus, avoiding tight underwear, not using excessive antiseptic fluids, and using clean running water and clean toiletries.[10] If leucorrhoea is not handled properly, one of the very dangerous effects is that it will cause cervical cancer. According to the East Java Health Office, the number of new cervical cancer sufferers in East Java in 2012 was 2,940 and increased in 2013 to 3,917 people. Meanwhile, according to a previous study, Gresik Region had a positive IVA of 11.60% from the CBE clinical examination in 2019.[11]

Many media can be used in the health education process, one example is audio-visual media, which is media that presents information or messages audio-visually.[12] Audio-visual makes a major contribution to changing people's behavior in the aspects of information and persuasion. This can be achieved because the five senses transmit the most

knowledge to the brain, namely the eyes \leq 75% - 87%, while 13% - 25% of knowledge is obtained or channeled through other senses. [13].

Health education can increase knowledge and attitudes about personal hygiene in preventing leucorrhoea in adolescent girls' through learning methods through videos that can improve cognitive, affective, and psychomotor aspects which attract and encourage youth to enter into the material that has been presented. So that the atmosphere is not tense, the enthusiasm for learning increases, not boring and active because the learning atmosphere is fun. Information about knowledge and attitudes toward personal hygiene in preventing leucorrhoea in adolescents can be obtained from education by showing videos.

METHOD OF ACTIVITIES

This community service activity uses the method of providing Health Education with video media. The service participants were adolescent girls' aged 16-18 years in Yosowilangun Manyar Gresik Village with a total of 16 adolescent girls'. This community service activity was carried out in Yosowilangun Manyar Gresik Village on May 20-27 2022. The stages of this community service activity are:

1. On the first day of the pre-test the researcher explained to the respondents regarding the purpose, benefits, and how to fill out the knowledge and attitude questionnaires, each respondent was guaranteed the confidentiality of the data obtained, the researcher took care of the respondents in filling out the questionnaire to avoid random answers because the respondents were still unfamiliar with questions about personal hygiene in preventing leucorrhoea.
2. On The second day the researchers intervened to provide material on personal hygiene health education in preventing leucorrhoea with video media for 3-5 minutes.
3. The knowledge post-test was carried out after the intervention, and the attitude post-test was carried out 5 days after the health education intervention because there is a process of receiving information.[14]
4. After the intervention and post-test were completed, the team conducted data analysis and statistical tests to obtain test results and draw conclusions.

Before the stage of this community service activity begins, permits must first be obtained from the head of Yosowilangun Village and provide informed consent to activity participants. The instrument used is valid and reliable and uses a descriptive test to describe the results of the activity. The tools and materials used in this activity are 1) LCD projector; 2) Projector screen; 3) Laptops; 4) The video contains: Definition of leucorrhoea,

Classification, and characteristics of leucorrhoea, Definition of personal hygiene, Influence factors of personal hygiene, Purpose of personal hygiene, Impact of personal hygiene, Personal hygiene in Prevention of leucorrhoea.

RESULT OF ACTIVITIES

The general description of the place of service is that Yosowilangun Village is one of the 23 villages in the Manyar sub-district, Gresik district. Yosowilangun Village is divided into 15 RWs, 87 RTs and 213 Dasawisma. Geographical Location of the Boundaries of Yosowilangun Village, Northside: Sukomulyo Village, East Side: Roomo Village South side: Randuagung Village West side: Suci Village. Yosowilangun Village Area: 1.01 ha. The socio-economic conditions of the people of Yosowilangun Village can be said to be good.

This can be seen from the condition of the residents' houses, many of which are built of brick with tiled floors. Most of the population work as factory employees with a total of around 2,692 workers, this is due to the large number of factories in the Gresik area. Public education has a lot at least high school graduates and even Strata 1 (bachelor). Public health is in good condition, if sick they can seek treatment at local health service facilities. The surrounding environment and public health conditions are relatively good, it's just that there is a lack of direct health education by health services to the community. Based on the results of the interview with the village secretary, there is a lack of direct health promotion by the community because the local people work and do not have free time.

Table 1 Characteristics of Participants

No	Category	Frequency	Percentage
1	Age		
	16 th	6	37.5
	17 th	7	43.75
	18 th	3	18.75
2	Education		
	Elementary school	2	12.5
	Junior High School	3	18.75
	Senior High School	11	68.75
	No School	0	0
3	Experiencing vaginal discharge		
	Yes	16	100
	No	0	0
4	Personal Hygiene Information		
	Yes	16	100

No	0	100
5 Resources		
Friends	3	18.75
Health Services	0	0
Parents	4	25
Internet/social networking	9	56.25
Not knowing the information	0	0

Table 1 shows that most of the participants were 17 years old, namely 7 (43.75%), had high school education, 11 girls (68.75%) had experienced vaginal discharge, and 16 (100%) girls had known personal information. hygiene of as many as 16 (100%) adolescent girls' and most of them get personal hygiene information from the internet/social networks as many as 9 adolescent girls' (56.25%). Below is the documentation of the provision of Health Education using video media.



Figure 1. Provision of health education using video media and filling out questionnaires

Table 2 Adolescent Girls' Knowledge

Knowledge Level	Pre-Test		Post-Test	
	Frequency	Percentage	Frequency	Percentage
Good	0	0	14	87,5
Fair	13	81,25	2	12,5
Not enough	3	18,75	0	0
Total	16	100	16	100

Table 2 shows the results of the knowledge of adolescent girls' about personal hygiene in preventing leucorrhoea in the pre-test, namely that most of them had sufficient knowledge of 13 adolescent girls' (81.25%), while during the post-test it was found that most of them were 14 adolescent girls' (87.5%) who were knowledgeable Good.

Table 3 shows the results of the attitudes of adolescent girls' about personal hygiene in preventing leucorrhoea in the pre-test, namely the majority of 10 adolescent girls' (62.5%) had a negative attitude, while during the post-test, the majority had a positive attitude 15 adolescent girls' (93.75%) and 1 young girl (0.25%) has a negative attitude.

Table 3 Attitudes of Adolescent girls'

Attitude	Pre-test		Post-test	
	Frequency	Percentage	Frequency	Percentage
Positive	6	37,5	15	93,75
Negative	10	62,5	1	6,25
Total	16	100	16	100

DISCUSSION

Based on the results of a survey that was conducted on December 15, 2021, with 11 adolescent girls who live in Yosowilangun Manyar Gresik Village with interviews, all 11 adolescent girls interviewed experienced vaginal discharge. From the results of interviews with adolescents who lack knowledge of behavior and attitudes about personal hygiene 9 out of 11 adolescent girls', the results of interviews with village secretaries show that adolescents lack knowledge of behavior and attitudes about personal hygiene supported by a lack of health promotion in Yosowilangun Manyar Gresik Village and have never been given Health education using the video method in Yosowilangun Manyar Gresik Village.

Health education can increase personal hygiene knowledge in preventing leucorrhoea in adolescent girls' through the video method because it can improve cognitive, affective, and psychomotor aspects which attract and encourage young people to get into the material that has been presented. According to Notoatmodjo an important step in health education is to make information tailored to the target including media selection, intensity, and duration of information delivery.[15] The delivery of information is influenced by the methods and media used in conveying information so that it can have a significant effect on knowledge. Health education with the video method can increase a positive attitude. This result is similar to previous community service in that the Course Review Method increases behaviour of health.[16] Adolescent girls' knowledge has changed after health education, and this result is not different from another research that showed that training programs also increase the knowledge of participants.[17]

CONCLUSION & SUGGESTION

Before this activity was held, adolescent girls' in Yosowilangun Village, Manyar Subdistrict, Gresik Regency, did not understand and did not do personal hygiene properly to prevent leucorrhoea. After carrying out this community service activity, it creates knowledge and attitudes of adolescents to carry out good personal hygiene, this activity is very useful

so that health workers in the village, especially community nurses, can provide health education regarding personal hygiene by delivering material through video shows that can attract teenagers.

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Conflict of Interest

There is no conflict of interest during community service activity and release of this article

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