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Original Article

The Influence of Health Education on Mothers' Knowledge About Prevention of Acute Respiratory Infections (ARI) in Toddlers at Majalengka Public Health Center



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ABSTRACT

Acute Respiratory Infections (ARI) can be easily transmitted and if not treated immediately will cause high morbidity and mortality rates in children under five. A low level of knowledge regarding ARI in toddlers will have an impact on mothers' inability to prevent and treat children with ARI. One intervention that can be done to solve the problem of lack of knowledge is health education. This study aims to determine the effect of health education on mothers' knowledge about preventing ARI in toddlers. This type of research was quantitative and a Quasi Experimental method with a pre test-post test design. The sample in this study was 49 mothers who had ARI toddlers (1-5 years) obtained using accidental sampling technique. Data was obtained using a questionnaire and univariate analysis with the T-Test. The results of this research showed that most of the knowledge was poor (40.8%) and this increased after health education was carried out, most of the knowledge was good (46.9%). The statistical test results obtained a p value of 0.000, meaning that there is an influence of health education on mothers' knowledge about preventing ARI in toddlers. The conclusion of this research was that health education can increase knowledge about preventing ARI in toddlers. Suggestions to the community health center nurses to develop innovative and more interesting health promotion media (for example: animated videos, motion graphics, etc.). It would be better if the health promotion media can be shared widely on the internet and social media (Instagram, WhatsApp, Facebook, YouTube) so that people can easily access information provided by the Puskesmas.

INTRODUCTION

Acute respiratory tract infection (ARI) is an acute infectious disease that attacks one or more parts of the respiratory tract from the nose (upper respiratory tract) to the alveoli (lower respiratory tract), including tissue. appendages such as sinuses, middle ear cavity and pleura (Irianto, 2015).

ARI causes many deaths, but very little effort has been made to overcome the ARI problem, so ARI continues to be a problem throughout the world, including Indonesia (Ministry of Health of the Republic of Indonesia, 2018).

The low level of knowledge about ARI in toddlers will influence the mother's inability to prevent or treat children with ARI. Qiyaam and Febriyanti, (2016) found that maternal knowledge had the largest relative contribution to environmental and socio-economic factors in influencing the incidence of ARI in toddlers.

According to Notoatmodjo, (2015) Health knowledge will influence a person's behavior. This is in accordance with the results of research conducted by Kore, (2021) when his research showed that before apply education health, generally respondents had sufficient knowledge with a total of 45 people (48 people). 0.9%) and after receiving health education communication material about Acute Respiratory Infections (ARI), showed that respondents experienced a good increase in knowledge, up to 89 people (96.7%). There is a significant influence on the provision of ARI health education by providing communication materials related to the respondent's knowledge.

Based on this description, the author is interested in conducting research on the influence of health education on mothers' knowledge about preventing ARI toddlers in the working area of the Majalengka Community Health Center.

METHOD

This type of research includes approaches quantitative with use approach experimental with an approach that uses a pre-test design that shows a causal relationship between education health withknowledge. The sample in the research was 49 mothers who had ARI children under five (1-5 years) who visited the Majalengka Community Health Center for the period January-April 2023. in this research is accidental sampling.

RESULTS

The results of this study explain the influence of health education on mothers' knowledge about ARI in toddlers in the working area of the Majalengka Community Health Center.

Table 1. Distribution of Respondents Knowledge Level of Mothers Regarding Prevention of ARI in Toddlers Before Health Education in the Working Area of the Majalengka Community **Health Center**

No	Knowled	n	%	Mea	Media	Mi	Ма
	ge			n	n	n	Х
1	Good	14	28 ,6	13,90	14.00	10	20
2	Medium	15	30 , 6				
3	Low	20	40 ,8				
	Total	49	10				
			0				

Table 1 shows that the average knowledge before being given Health Education was13.90 and after becoming 18.90. The results of the paired T test obtained a t count of 8.489 and a p value of 0.000.

Table 2. Distribution of Respondents' Level of Knowledge of Mothers Regarding Prevention of ARI in Toddlers After Health Education in the Working Area of the Majalengka Community **Health Center**

No	Knowled	n	%	Mea	Media	Mi	Ma
	ge			n	n	n	Х
1	Good	23	46	18,9	18.00	13	24
			,9	0			
2	Medium	14	28				
			,6				
3	Low	12	24				
			,5				
	Total	49	10				
			0				

Table 2 shows that the respondents' scores after being given health education about preventing ARI in toddlers, most of the respondents had good knowledge, 23 people (46.9%), while a small number of respondents had poor knowledge, 12 people (24.5%).

Table 3. Effect of Health Education on Mothers' Knowledge About Prevention of ARI in Toddlers in the Working Area of the Majalengka Community Health Center

Skor	N	Mean	SD	thitung	ρ value
Pre Test	49	13.90	3.782	8,489	0.000
Postest	49	18.90	4.431		

Sumber: Data primer 2023

Table 3 shows that the average knowledge before being given Health Education was 13.90 and after being given 18.90. The results of the paired T test obtained a t count of 8.489 and a p value of 0.000. This shows that hypothesis H1 is accepted, meaning there is an influence of education to Mother's knowledge about preventing ARI in toddlers in the working area of the Majalengka Community Health Center.

DISCUSSION

Knowledge Mother about prevention of ARI in toddlers before health education is carried out in the working area of the Majalengka Community Health Center

The results of the study showed that the score of subjects before receiving health education about preventing ARI in toddlers was the highest among subjects with incomplete knowledge

20 people (40.8%), while a small number of subjects had good knowledge as many as 14 people (28.6%). Indeed, respondents had never received health education about preventing ARI in toddlers.

This research is consistent with Nugraha's (2023) research on the level of knowledge of the experimental group previous tests, most were in the worst category up to 15 people (55.6%) and in Ririn's research. I Sahawaitun (2020) showed that before receiving health education, of the 52 respondents, 31 people (60%) had worse knowledge criteria. The respondents majority of knowledge due to the lack of information received (Kore 2021; Sidabutar, 2022).

Mother's knowledge about preventing ARI in toddlers after health education was carried out in the working area of the Majalengka Community Health Center

The results showed that the majority of subjects' scores after receiving health education about preventing acute respiratory infections in toddlers were 23 people with good knowledge (46.9%). while the small number with poor knowledge was 12 people (24.5%). Based on this data, the author can say that knowledge Mother about prevention infection channel acute respiratory especially increased, from 13.90 become 18.90. Growth knowledge This is results from health education, Which is an important factor in changing someone who doesn't know how to know. This is in accordance with the theory that health education is carried out with the aim of increasing the knowledge, attitudes and actions of individuals or communities so that they are consistent with healthy living standards, education and training. health education (Notoatmodjo, 2015). Goals of health education is change behavioral person or society from behavior bad behavior into better behavior.

The influence of health education 3. on mothers' knowledge about preventing **ARI** in toddlers

The research results showed that the average knowledge before being given health education was 13.90 and after being given health education was 18.90. The results of the paired T test obtained a t count of 8.489 and a p value of 0.000. This shows that hypothesis H1 is accepted, meaning there is an influence of education to Mother's knowledge health about preventing ARI in toddlers in the working area of the Majalengka Community Health Center.

Results of data processing, author opinion implementation of health that the education is effective in increasing maternal knowledge because it proves that there is a change in the level of knowledge before and after implementation. currently GDSK. This happened because the mothers were the willing to accept information communicated and focused on listening to what the researcher had to say. The respondents were very active and curious, so they were very eager to be educated. Health. Respondents with good memory easily absorb good information and they can be asked to work together and can participate in research activities until the end. The output of research results has increased significantly, so health education is very important to carry out regularly to increase knowledge for mothers.

The results of this research are consistent with research by Nugraha (2023) which after conducting health shows that education, it shows that 52 respondents (100%) are classified as having good knowledge level criteria. . Research by Nikmah &; Wijiastutik, (2023) health education is carried out through discussion and question and workshops. The media used are leaflets to convey health education information. A leaflet is a sheet

a paper containing printed material on a particular subject intended for reading purposes. Handouts containing words and pictures were distributed after health education to serve as memory aids.

Researchers can ensure that providing health education about ARI prevention is consistent with the aim of health education, namely shifting knowledge from inadequate or incomplete knowledge to good knowledge about ARI. This is in accordance with Notoatmodjo (2015), who states that health education is the addition of knowledge and abilities somebody through learning techniques or practices with the aim of improving or influencing people's behavior as individuals, groups or communities so that people can be more independent in achieving goals.

Researchers conducted a 3-step health education session (introduction, presentation and closing) for approximately 30 minutes using the method of presenting and distributing ARI prevention leaflets and then studied. banners, Researchers assessed the respondents' knowledge after receiving health education (tests).) using a test sheet. This is in line with Sidabutar & Waruwu's (2022) study that mothers' knowledge increased after receiving health education through lectures and leaflets.

With this research, the author can say that with health promotion, whether modulebased or electronic or other means, it is and possible influence motivate families and community respondents, efforts to prevent respiratory diseases from an early age, to increase knowledge about maternal health, and the community to understand the importance of preventing ARI in the daily lives of toddlers.

CONCLUSIONS

In Conclusion Health education can increase knowledge about preventing ARI in toddlers.

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