The Effect of Health Promotion Through Audio Visual Media About HIV AIDS On Housewives Knowledge

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ABSTRACT

Human Immunodeficiency Syndrome is a virus that attacks the human immune system, while Acquired Immunodeficiency Syndrome (AIDS) is an immune syndrome caused by HIV infection. Housewives are more susceptible to exposure to the HIV virus due to sexual behavior of their partners. The purpose of this study was to determine the effectiveness of health promotion through audio-visual media, about HIV / AIDS on housewives' knowledge. This research is a pre experiment. The population in this study was all housewives. The sample size of 16 respondents was taken based on purposive sampling. Statistical test using Wilcoxon. Based on the Wilcoxon test, the p-value was 0,000, so that there was an effect of providing health promotion about HIV AIDS using audio-visual media on housewives' knowledge in preventing HIV AIDS. It is hoped that housewives can increase their knowledge in preventing HIV AIDS so that the incidence of HIV AIDS can be prevented early.

Keywords: Health Promotion, Audio Visual, Knowledge, HIV AIDS

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BACKGROUND

Human Immunodeficiency Syndrome (HIV) is a virus that attacks the human immune system, while Acquired Immunodeficiency Syndrome (AIDS) is an immune syndrome caused by HIV infection. The course of this disease is slow and the symptoms of AIDS do not appear on average 10 years after the onset of infection, or even longer. The virus enters the human body mainly through blood, semen and vaginal secretions. Most c (75%) of transmission occurred through sexual contact (Noviana, 2016). The cause of HIV / AIDS is an infection by the HIV virus which attacks the immune system so that the body's defense cells are damaged more and more. People with HIV infection are very susceptible to all forms of infection. In the final stage, the patient cannot withstand germs which normally can be easily resisted (Noviana, 2016). HIV / AIDS is one of the world's health problems that can have an impact on the health, economy, culture, government and other sectors (Siregar et al., 2019). Based on the Republic of Indonesia Ministry of Health's report for the second quarter of 2019, there were 117,064 AIDS cases and 349,882 HIV positive cases (Kemenkes RI., 2019). The Kediri City Health Office stated that the number of new HIV / AIDS sufferers was 200 people by the end of December 2018 (Kediri City Health Office, 2019). According to the BKKBN, the spread of HIV / AIDS does not only attack people who have risky behavior, but also housewives who are mostly at home, but are infected by their husbands due to unsafe sexual behavior (Fitrianingsih et al., 2019).

The increasing number of HIV and AIDS cases among housewives is due to a lack of understanding of the "gender concept" in the family, which makes women's position very low in making decisions, including in the health and reproductive health aspects (Dewi., 2018). Housewives are a group that is vulnerable to HIV infection by their husbands, in India, housewives have a higher ranking of being infected with HIV compared to working women (Zunner B, 2016). HIV infection in housewives is caused by being contaminated by the virus from sexual partners who are always changing partners (Tumina and Yona, 2020). Women have a higher risk of transmitting the infection through their sexual partners if they do not get treatment early. (Tumina and Yona, 2020). The causative factor is due to limited knowledge, culture, social relationships, and sexual risk of contracting HIV (Maravilla et al., 2017). According to the husband, sexual behavior outside of marriage is normal because it is part of the nature of men and the husband does not use a condom when having sex with his wife before being diagnosed with HIV. While the wives stated that they lacked knowledge about HIV / AIDS, wives still adhere to cultural norms to respect their husbands, be gentle, even though they are suspected of knowing their husbands had sexual relations outside of marriage and was infected with HIV (Hasanah and Wahyu Sulistiadi, 2019). The vulnerability of a wife to contract HIV is caused by many things, including her partner's not being open to sharing his status as a sufferer with his partner. Several studies have stated that the strong stigma of the environment, including family and partners, against HIV sufferers prevents husbands from disclosing their HIV status to their partners (Purwitasari and Muhammad Atoillah Isfandiari, 2019).

One of the efforts to reduce the number of HIV and AIDS is by providing education and information with clear audiovisual methods about HIV and AIDS, so that people are alert and can change their behavior towards a positive direction to make HIV AIDS prevention efforts (Islamiah, 2018)

METHODS

This study used a pre-experiment with one group pretest-posttest design. Respondents before and after the intervention was given a predefined questionnaire called the pretest and

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posttest. Research to determine the effectiveness of health promotion through audio-visual media, about HIV / AIDS on housewives' knowledge. The population of this research is housewives, the research was conducted in Bujel village, Sukorame Public Health Center working area in December 2019. The independent variable in this study was audiovisual media, about HIV / AIDS and the dependent variable in this study was the knowledge of housewives. The sampling technique used purposive sampling with the inclusion criteria of housewives aged 15-49 years and willing not to bring children at the time of the study, while the exclusion criteria were mothers who were sick with a population of 16 samples, the measuring tool used a questionnaire. Analysis The analysis in this study used the Wilcoxon statistical test.

RESULT

General Data

1) Distribution of Respondents by Age

 Table 1 Frequency distribution of respondent characteristics based on maternal age in Bujel sub-district. The working area of Sukorame Health centers

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Age	F	%
< 20 years	2	12,5
20-35 years	13	81,3
> 35 years	1	6,2
Amount	16	100

Based on table 1 it can be interpreted that almost all respondents (81.3%) are between 20-35 years

2) Distribution of Respondents by education

 Table 2 Frequency distribution of respondent characteristics based on education in

 Buiel sub-district. The working area of Sukorame Health centers

lig alea of Suke	
F	%
7	43,8
9	56,2
0	0
16	100
	<u>F</u> 7 9 0 16

Based on table 2 it can be interpreted that most of the respondents (56.2%) have a senior high school

3) Distribution of Respondents by information

 Table 3 Frequency distribution of respondent characteristics based on information in Bujel sub-district. The working area of Sukorame Health centers

centers			
Information	F	%	
Receive information	4	25	
Received no	12	75	
information			
Amount	16	100	

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Based on table 3, it can be interpreted that most respondents (75%) have never received information about HIV AIDS.

4) Distribution of Respondents Based on Information Sources

Table 4Frequency distribution of respondent characteristics based on
information sources about HIV AIDS among mothers in Bujel sub-
district. The working area of Sukorame Health centers

8		
Information sources	f	%
Print media	1	6,25
Electronic media	4	12,55
Family	0	0
health workers	1	6,25
Never received	12	87,5
information		
Total	16	100

Based on table 4 it can be interpreted that almost all (87.5%) aged never received information about HIV AIDS.

Special Data

1) Distribution of Respondents based on Housewives' knowledge about HIV AIDS before being given health promotion using Audio Visual about HIV AIDS

Table 5 Distribution of knowledge of housewives about HIV AIDS before being	5
given health promotion using Audio Visual about HIV AIDS in the Buje	1
sub-district. The working area of Sukorame Health centers	

No	Category	Knowledge before being given		
		treatment		
		f	%	
1	high (67-100%)	0	0	
2	moderate (34-	7	43,7	
3	66%) low (0-33%)	9	56,3	
	Total	16	100	

Based on table 5 above, it can be interpreted that most of the respondents (56.3%) had low knowledge of HIV AIDS before being given health promotion using audio-visual media.

2) Distribution of Respondents based on the knowledge of housewives about HIV AIDS after been given a health promotion using Audio Visual about HIV AIDS

	Tabel 6 Distribution of knowledge of housewives about HIV AIDS after being given						
	health promotion using Audio Visual about HIV AIDS in the Bujel sub-						
_	district. The working area of Sukorame Health centers						
No Category Knowledge after being given							
treatment							
			f	0⁄0			
	1	high (67-100%)	11	68,7			

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	2	moderate (34- 66%)	5	31,3	
	3	low (0-33%)	0	0	
		Total	16	100	

Based on table 6 above, it can be interpreted that most respondents (68.7%) have high knowledge about HIV AIDS after being given health promotion using audiovisuals.

3) The effect of providing health promotion using audio-visual media about HIV AIDS on housewives' knowledge about HIV AIDS

Tabel 7 The	effect of providing	ng health p	romotion usin	ng audio-visu	al media about HIV			
AI	DS on housewir	ves' know	ledge about	HIV AIDS	in Bujel Village,			
Sukorame Public Health Center work area								
No	No Category Knowledge before Knowledge after							
		being	given	given t	reatment			
		treati	ment	_				
		f	%	f	%			
1	high (67-100%)	0	0	11	68,7			
2	moderate (34-	7	43,7	5	31,3			
66%)								
3	low (0-33%)	9	56,3	0	0			
	Total	16	100	16	100			
Negative rank: 0		p-value: 0,000		$\alpha: 0.05$				
Positive rank : 15								
Ties	:1							

Based on table 7 it can be interpreted that the knowledge of housewives before and after being given health promotion using audio visual media, about HIV AIDS there is an increase in knowledge, it can be seen from the table above that before being given health promotion using audio visual media, about HIV, AIDS, most of the respondents had knowledge low but after being given health promotion using audio visual media they have high knowledge, namely (68.7%) and so on. Based on the Wilcoxon test, the p-value was 0.000, because the p-value α (0.05) then H0 was rejected and H1 was accepted, which means that there was an effect of giving health promotion about HIV AIDS using audio visual media on housewives' knowledge about HIV, AIDS, it was found that the test result was a positive rank of 15 respondents, which means that the knowledge of housewives about HIV AIDS after being given health promotion using audio-visual media, the ties in this study were 1 respondent. meaning that the knowledge before and after being given a health promotion using audiovisual media remains in the same category.

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DISCUSSION

1. Housewives' knowledge about HIV AIDS before been given a health promotion using Audio Visual about HIV AIDS in Bujel Village, Sukorame Community Health Center work area

The knowledge of housewives about HIV AIDS before been given a health promotion using Audio Visual about HIV AIDS can be interpreted that most of the respondents (56.3%) had low knowledge about HIV AIDS before been given a health promotion using audio-visual media, this is in accordance with the research. That only a small proportion of housewives know that the use of condoms is to protect themselves from HIV infection (Zunner B, 2016). Knowledge can be influenced by educational factors that affect the receipt of information, the more information that is entered, the more knowledge housewives will get (Pusparianda and Wamardhana, 2015) this is in accordance with the results of research that most housewives have secondary education. (56.2%), so there is still low information received about HIV AIDS among housewives

2. Knowledge of housewives about HIV AIDS after been given a health promotion using Audio Visual about HIV AIDS in Bujel Village, Sukorame Community Health Center work area

Knowledge of housewives after been given a health promotion using audio visual about HIV AIDS can be interpreted that most of the respondents, 68.7% have high knowledge and 31.3% have moderate knowledge about HIV AIDS after being given a health promotion using audiovisual. Audiovisual media are media that have sound and image elements. This type of media has better capabilities because it includes sound and images. Audiovisual media are the media used to convey learning messages. In Audiovisual media, there are two elements that are united with each other, namely Audio and Visual. The presence of the Audio element allows the housewife to receive learning messages through hearing, while the Visual element allows creating learning messages through forms (Ifroh and Ayubi, 2018). Judging from the data above, it can be concluded that the factors that cause increased knowledge of housewives are due to the provision of health promotion through audio-visual media. Providing counseling using audiovisual media is more effective than other methods, based on the results of this study, using audiovisuals is more interesting because in addition to being able to focus, housewives can immediately understand what is being said. The behavior of HIV and AIDS prevention among housewives is very dependent on the level of knowledge. The results showed that behavior based on knowledge lasted longer than behavior that was not based on knowledge (Mabuie, 2020). Education has an important role in determining the quality of humans, with human education will gain knowledge and information. The higher the level of education of a person, the better the quality of life.

3. The effect of providing health promotion using audio-visual media about HIV AIDS on housewives' knowledge about HIV AIDS

The effect of providing health promotion using audio visual media, about HIV AIDS on housewives' knowledge about HIV can be interpreted that the knowledge of housewives before and after being given health promotion using audio visual media, about HIV AIDS there is an increase in knowledge, it can be seen from the table above that before being given health promotion using audio visual media, about HIV AIDS most of the respondents have low knowledge, but after being given health promotion using audio visual media of the respondents have low knowledge, namely (68.7%) Based on the

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Wilcoxon test, the p-value is 0,000, because p -value α (0.05) then H0 is rejected and H1 is accepted, which means that there is an effect of giving health promotion about HIV AIDS using audio-visual media on housewives' knowledge, it is found that the test result is a positive rank which means the knowledge of housewives after being given Health promotion using audio visual media is greater than before health promotion using audio visual media. Ties occur in one person because the mother is actually afraid of her husband, at the time of the study there was a housewife who had a problem, namely she suspected that her husband was carrying the HIV virus in his family, because the husband worked as a driver and rarely came home, the wife attended counseling secretly. Silent without the husband's knowledge for fear of being scolded and usually not allowed to attend counseling when it is related to HIV, this is what causes the housewives to have their knowledge, even though they have been given counseling using audio-visual media because mothers are less focused on listening to what is conveyed by researchers. This research is in line with the research) whose results were obtained from 31 respondents before health education was carried out, they experienced low knowledge, whereas after being given counseling students experienced an increase in knowledge, namely (Purwitasari and Muhammad Ayatollah Isfandiari, 2019) In addition to analysis research This is in accordance with research on educational effectiveness. Health using audio visuals on the level of knowledge (Al Dilaimy and Abdullah Al-Rawe, 2020)

CONCLUSION

Based on the results of research conducted in Bujel Village, Sukorame Public Health Center, it can be concluded that there is an effect of providing health promotion using audiovisual media about HIV AIDS on housewives' knowledge of HIV AIDS. Suggestions for research sites are expected from the results of this research to be used as input in increasing health promotion using audio-visual media, about HIV AIDS to housewives to increase their knowledge about HIV AIDS.

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