

# THE INFLUENCE OF AUDIO-VISUAL MEDIA ON YOUNG WOMEN'S KNOWLEDGE IN MAINTAINING THE CLEANLINESS OF GENITALIA EQUIPMENT DURING MENSTRUATION IN KALURAHAN WUKIRHARJO, KALASAN, SLEMAN DIY

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## ABSTRACT

### Article Info

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The lack of knowledge of young women about how to keep the genitals clean during menstruation is one of the causes of various health problems due to poor sanitation during menstruation. Based on a preliminary study at Losari II Subvillage Wukirharjo Village that has been done as many as 8 out of 10 young women have less knowledge, with the percentage of correct answers between 30-50% and the other 2 have sufficient knowledge with the percentage of correct answers 60% and 70%. A total of 5 young women experienced itching and irritation in the pubic area during menstruation. As many as 9 young women smelled an unpleasant odor in the pubic area during menstruation. This study aimed to determine the effectiveness of audio-visual media in increasing young women's knowledge of maintaining the cleanliness of the genital organs during menstruation. This research design is one group pre and post test. The population of this study were all female adolescents of Padukuhan Losari II who had menstruated. The sampling technique in this study was Total Sampling with reference to the inclusion criteria with a sample of 36 people. The results of this study indicate that before the intervention, the knowledge of respondents was in the good category 2 people (5.6%), enough 29 people (80.6%), and less than 5 people (13.8%). After the intervention, the respondents' knowledge increased, the good category became 28 people (77.8%), the moderate category decreased to 8 people (22.2%), and there were no respondents who had less knowledge (0.0%), with the Asymp value. Sig (2 tailed) 0.000 < 0.05. From the results of this study, it can be concluded that providing health education using audio-visual media has an effect on the knowledge of young women in Padukuhan Losari II Kalurahan Wukirharjo in maintaining the cleanliness of the genital organs during menstruation. The results of this study are expected to be a guideline for young women to always maintain the cleanliness of the genital area properly and correctly, especially during menstruation. For Padukuhan Losari II, recommends more health education using audio-visual media.

Keywords: Health Education, Hygiene of Genitalia, Audiovisual Media.

## 1. INTRODUCTION

According to data from WHO (2018), the so-called adolescents are all residents aged between 10-19 years. According to the Regulation of the Minister of Health of the Republic of Indonesia (2014), adolescent age is the population in the age range between 10-18 years. Meanwhile, according to BKKBN (Population and Family Planning Agency), adolescents are unmarried people between the ages of 10-24 years and are vulnerable (Asiah et al. 2020). At this age, the majority of adolescents have shown signs of maturity, especially in the reproductive organs, one of the characteristics that the reproductive organs of adolescent girls are mature is the occurrence of menstruation (UNICEF, 2016).



Menstruation or what is often called menstruation is the process of blood discharge from the vagina that occurs regularly every month experienced by women (Amalia & Amrullah, 2019). According to BKKBN, the duration of normal menstruation will occur for 3-7 days and the length of a normal menstrual cycle lasts approximately 28 days (between 21-35 days). However, in adolescence, this cycle is usually irregular (Durmaz, 2017). Menstrual cycles that are less than 21 days and more than 40 days can be categorized as abnormal or pathological and need to be consulted with a Gynecologist (Ernawati et al., 2017).

Menstrual hygiene management is the management of hygiene and health when women experience menstruation, especially in the genitalia area. Based on basic health research data in 2016, from 43.3 million adolescent girls in Indonesia aged 10-14 years have poor menstrual hygiene behavior (Sulaikha et al., 2018). Annals of Community Health explains that several factors affect menstrual hygiene in adolescent girls, including age, religion, socioeconomic conditions and the educational status of the adolescent girl's mother (Purwati 2017). In addition, other researchers also stated that poor behavior in maintaining the cleanliness of the genitals during menstruation such as washing with dirty water, rarely changing underwear and pads during menstruation is a trigger for infection (Phonna et al. 2018). Therefore, socialization about Sanitary Hygiene during menstruation must be given early so that adolescent girls avoid the risk of infectious diseases resulting from poor hygiene during menstruation (Ardiani & Andhikatis, 2018).

One way to overcome this problem is to increase the knowledge of young women about how to maintain the cleanliness of genetic devices during menstruation through health education and the use of appropriate media so that information can be received properly and applied in everyday life. Green (1980) suggests that broadly speaking, health education is a planned activity to improve one's health degree by collaborating with several learning methods (Fitri & Jamiati 2020).

Teaching aids (media) are everything that can be used to channel messages from sender to receiver, so as to stimulate the thoughts, feelings, attention, and interests of educational targets so that the learning process runs optimally (Ramli 2012). One of the health education media is Audio visual, which is a health education media that prioritizes the sense of hearing and the sense of vision, examples of Audio visual media include video, television, film, etc. Counseling with audio-visual media is also known to increase knowledge, attitudes, and behavior (Muthia et al. 2015). Based on research that has been conducted in one of the State Aliyah Madrasahs in Indragiri Hilir, the results showed that the use of audiovisual media effectively increases young women's knowledge about vulva hygiene (Fitri & Jamiati 2020). In line with research conducted by Sri Mastuti, et al that there is a significant increase in respondents' knowledge before and after receiving health education with audiovisual media, in addition to attracting attention to the use of audio-visual media can also be played repeatedly (Sri Mastuti, Laila Ulfa 2023).

According to a preliminary study that was carried out using a questionnaire instrument by utilizing the Google form application on November 15, 2021 for 10 young women in Padukuhan Losari II, it was found that the lowest age of young women at Padukuhan Losari II was getting their first menstruation at the age of 9 years and the highest age was getting their first menstruation. at 13 years old. As many as 8 young women have never received health education regarding how to maintain genital hygiene during menstruation, specifically from parents, teachers, health workers, etc. Meanwhile, 2 of them only received basic information about how to use pads, how to wash pads, how to wash genitalia from their parents, especially mothers. As many as 6 teenagers answered that it was easier for them to understand an education through video media, 2 teenagers answered through text or reading media, and 2 through sound or recording media. The knowledge category of young women in Padukuhan Losari II, related to personal hygiene during menstruation with a total of 10 questions that 8 out of 10 young women have insufficient knowledge with a percentage of correct answers between 30-50% and 2 others have sufficient knowledge with a percentage of answers correct 60% and 70%. A total of 5 young women experienced itching and irritation in the genital area during menstruation, and as many as 9 young women smelled an unpleasant odor in the genital area during menstruation. The researcher also conducted a preliminary study at the Head of the Losari II Padukuhan, and obtained information that there had been no activities or counseling related to genital hygiene during menstruation for young

women, most of the counseling aimed at teenagers was about HIV AIDS and Drugs. Information from midwives in the Wukirharjo Village, the majority of young women do not want to have their complaints examined regarding personal hygiene during menstruation for reasons of embarrassment and it is a very sensitive matter.

## 2. METHODS

This research is a quasy experiment using a one group pre and post test research design. The population in this study were all teenage girls of Losari II hamlet who had menstruated aged 10-24 years and were not yet married. The sampling technique used in this study was Total Sampling, which consisted of 36 people. Univariate analysis was performed to see the frequency distribution of the respondents' characteristics and the distribution of the knowledge frequencies of young women. Meanwhile, bivariate analysis was carried out using the Wilcoxon test to see the effectiveness of health education using audio-visual media on the knowledge of young women in maintaining the cleanliness of the genitalia during menstruation.

## 3. RESULTS AND DISCUSSION

### Univariate Analysis

#### Characteristics of respondents by age

Table 1. Characteristics of Respondents

Age of Responden	Frequency (n=36)	%
Early teens ages 10-12	8	22,2
Remaja Mid-age 13-16	15	41,7
Remaja Late age 17-21	10	27,8
Early Adult age 22-24	3	8,3
<b>TOTAL</b>	<b>36</b>	<b>100</b>

Based on table 1 of the characteristics of the respondents according to age, it is known that there were 8 respondents who were in the 10-12 age group or early adolescent age group (22.2%), most of the respondents were in the 13-16 year age group or the middle adolescent group. 15 people (41.7%) then a group of teenagers aged 17-21 or a group of late teenagers with 10 people (27.8%), and a group of teenagers aged 22-24 years with 3 people (8.3%).

Table 2. Knowledge level on how to maintain genital hygiene during menstruation

Kategori	Pretest		Posttest	
	f	%	f	%
Baik	2	5,6	28	77,8
Cukup	29	80,6	8	22,2
Kurang	5	13,8	0	0,0
<b>Total</b>	<b>36</b>	<b>100</b>	<b>36</b>	<b>100</b>

Based on table 2, the knowledge of young women about genital hygiene during menstruation in each category has increased, namely in the good category during the pretest 2 people (5.6%) posttest to 28 people (77.8%), the good category during the pretest 29 people (80.6%), the posttest became 8 people (22.2%), the poor category at the pretest was 5 people (13.8%) during the Posttest there were no young women who had less knowledge (0.0%).

### Bivariate analysis

Table 3. Descriptive Analysis of Knowledge Scores for Young Women in Maintaining Genital Cleanliness During Menstruation.

	N	Min	Max	Mean	Median
Pretest	36	40	77	64,17	66,7
Posttest	36	67	97	83,61	86,7

Based on the table above, it can be seen that the lowest score on the pre-test is 40 and the highest score is 77. While the post-test score is 67 and the highest score is 97. The average score has increased, namely the average value before the intervention is 64, 17 and the average after the intervention was 83.61. Likewise with the min, max values, the mean median value has increased at the pretest, the median value is 66.7 and at the posttest it becomes 86.7.

Table 4. Results of the Wilcoxon test for health education using audiovisual media with knowledge of young women in maintaining the cleanliness of the genitalia during menstruation.

	Negative Ranks	Positive Ranks	Ties	Sig.(2-tailed)
Posttest - Pretest	0	36	0	.00

Based on the data in table 2. it can be seen that the data from the Wilcoxon test results have changes in the Pretest and Posttest values. Negative Ranks with a value = 0, indicating that there is no decrease in value from the Pretest to Posttest scores. Positive Ranks with a value of 36 means that all of these samples experienced an increase in value from the Pretest to the Posttest. The Ties value is 0 which means there is no similarity in value between the Pretest and Posttest scores.

Asymp value. Sig. (2-tailed) in the Wilcoxon test is 0.00 which means the Asymp value. The sig is <0.05 then the hypothesis is accepted. Thus there is an influence of health education using audiovisual media on the knowledge of young women in maintaining the cleanliness of the genitalia during menstruation.

### Discussion

The results of the research conducted at Padukuhan Losari II Village, Wukirharjo Village, with data collection locations conducted at the house of the Head of Padukuhan Losari II, to 36 young female respondents, the distribution of respondents according to age found that respondents who were in the group of adolescents aged 10-12 were 8 people ( 22.2%), the 13-16 year age group was 15 people (41.7%) then the 17-21 age group was 10 people (27.8%), and the 22-24 year old group was 3 people ( 8.3%). According to Sebayang (in Hapsari, 2019) the age limit of adolescence is divided into 3 (three), namely early adolescence in the age range of 10-12 years, mid-adolescence in the age range of 13-16 years, and late adolescence, namely adolescents aged 17- 21 years. Respondents in this study were mostly in the middle adolescent group. According to Hasanah (2019) in his research, it states that middle adolescents have better knowledge compared to early adolescents because the older a person gets, the more developed their comprehension and mindset will be so that the knowledge they have will also be better. A person's age can affect the pattern and ability to think in receiving the information provided. The older a person is, the more a person's ability to receive information and one's way of thinking will also develop. (Fitri & Jamiati 2020).

According to Arikunto, 2010 a person's level of knowledge can be categorized into 3 levels, good category with a percentage of correct answers 76-100%, good category 56-75%, less category if the percentage of correct answers < 56%(Arikunto 2011). The level of knowledge of adolescent girls in maintaining the cleanliness of the genitalia during menstruation before the intervention, good category as many as 2 people (5.6%), k a t e g o r i cukup 29 people (80.6%), k a t e g o r i kurang as many as 5 people (13.8% ). It can be seen that most of the respondents, namely as many as 29 people (80.6%) are in the category of sufficient knowledge. This could be because young women only get knowledge about how to keep genitalia clean at first glance not specific. Basically, how to maintain the cleanliness of the genitals during menstruation must be given, because it will continue to repeat every month until he is



in *menopause*. Previous research has also stated that adolescents who are poorly informed about the health and hygiene of reproductive organs are at great risk of disease due to poor *sanitary hygiene* (Ardiani & Andhikatis 2018).

After being given health education interventions using audio-visual media, well-informed adolescent girls increased to 28 people (77.8%), the category decreased to 8 people (22.2%) and no adolescent girls who had less knowledge (0.0%). Audio-visual media is influential in increasing the knowledge of young women because audio-visual media can stimulate 2 human senses, namely vision and hearing. According to Dermawan (2008), audio-visual media contributes greatly to aspects of information and persuasion in changing one's behavior, this happens because audiovisual media is able to stimulate as much as approximately 75-87% in channeling information to the brain (Urrahmah & Jatmika 2019). Other researchers also mentioned that there is a significant influence of health education using audio-visual media on adolescent girls' knowledge about *personal hygiene* during menstruation (Hartati et al. 2019).

Descriptive analysis of pre-test and post-test scores showed an increase in pre-test scores to post-test scores. The lowest score at the time of the pre-test or before the intervention was 40, the average or mean value was 64.17, and the highest score was 77. Then after the intervention or at the time of the post-test the lowest score increased to 67, the average score was 83.61, and the highest score was 97. The median score also increased when the pretest median score was 66.7 then when the posttest increased to 86.7. Berdasarkan hasil *pre test* dan *posttest* yang telah dianalisis menggunakan *k a n test wilcoxon*, showing a n bahwa there is no decrease in the value of pretest to posttest proven in the column Negative Ranks with value = 0, then in the column Positive Ranks with value = 36 meaning that all samples have increased value results from *Pretest* to *Posttest values*. The Ties value is 0 which means there is no similarity in value between the *Pretest* score and the *Posing score*. This result is in line with previous research which stated that there was an increase in the average score before the intervention using video media by 4.27 and after the intervention the average value increased to 7.13 (Ardiani & Andhikatis 2018).

Nilai signifikansi yang diperoleh sebesar 0.000 which means that the hypothesis is accepted or there is a problem for health education using audiovisual media against *pe n g e k n o w a n r e s p o n d e n* in maintaining the cleanliness of the genitalia during menstruation. The researcher's assumption was strengthened by an increase in the value of 18.50 in the posttest value. The results of this study are in line with the previous one which stated that the level of knowledge of female students who were included in the good category increased after being given health education using audio-visual media (Urrahmah & Jatmika 2019). Another study also concluded that there was an increase in subject knowledge scores from 15 to 17 after health education (Hartati et al. 2019). The results of this study were reinforced by previous research which stated that there was an influence of video learning on personal hygiene care knowledge in adolescents of Sruni, Boyolali (Ardiani & Andhikatis 2018).

#### 4. CONCLUSION

Before the intervention, the knowledge of respondents in the good category was 2 people (5.6%), 29 people (80.6%) were sufficient, and 5 people (13.8%) were lacking. After the intervention the knowledge of the respondents increased, the good category became 28 people (77.8%), the moderate category decreased to 8 people (22.2%), and no respondents had less knowledge (0.0%). There is an influence of health education using audiovisual media on the knowledge of young women in maintaining genital hygiene during menstruation. With a value of *Asymp.Sig (2 tailed)* 0.000 < 0.05.

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