
Use of Visual Media in Health Promotion About Immunization

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ABSTRACT

One way to overcome the problem of rejection of immunization by parents is to provide the right information about proper immunization to parent through health promotion activities. Implementation of health promotion needs to be addressed is the selection of media y ang accordance with the target. Health promotion media is a tool used to help the health promotion process. The right media make information more easily accepted by the target, so that behavior will also change according to the knowledge gained.

The purpose of this study is to determine the effect of using visual media (leaflets) in health promotion about immunization. This research is a pre-experimental study with One Group Pretest-Posttest Design. The data analysis technique used univariate and bivariate analysis. Univariate analysis was performed to see responden characterstic, while while bivariate data analysis was performed using the Wilcoxon test to see how visual media's effect to knowledge and behaviour of immunization.

The result showed that health promotion using visual media, namely leaflets can significantly increase both the knowledge and behavior of mothers about immunization.

Keyword: Behavior, Health Promotion, Knowledge, Leaflet, Visual Media

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INTRODUCTION

WHO stated that there were 1.5 million children who died of disease that could be prevented by immunization (PD3I) in 2013 (Kemenkes RI, 2015). The infant mortality rate (IMR) is one of the indicators in assessing the degree of public health so that government programs always focus on efforts to reduce the infant and child mortality, one of which is immunization (Depkes RI, 2009; Kemenkes RI, 2015). Immunization is a national program that has existed for a long time with the main objective being to reduce the incidence of PD3I so as to reduce the infant mortality rate (IMR) in Indonesia (Khasanah, Mualim, & Dibyo, 2018). The immunization program implemented by the government so far has succeeded in preventing the death of around 2-3 million children per year (Pratiwi, 2019). The magnitude of the effect of immunization on IMR makes immunization an important program that has always been noted for its success. The success of the immunization programs can be measured by the achievement of the village's Universal Child Immunization (UCI) which can be seen from the coverage of complete basic immunization. The indicators that determine the achievement of UCI are complete basic immunization including getting HB 0-7 days 1 time, BCG once, DPT-HB-Hib 3 times, Polio 4 times and Measles once at age under 1 year (Kemenkes RI, 2015). According to the Directorate of Disease Prevention and Control, Ministry of Health in 2014-2016 as many as 1.7 million children are not getting or not completed their immunization status (Pratiwi, 2019). Based on data from the Sukoharjo District Health Office, although the UCI rate is quite high, in 2018 there was an outbreak of diphtheria. Epidemiology investigation conducted that risk factors for transmission of diphtheria outbreak was caused by incomplete immunization status or the refusal of immunization by parents (Dinas Kesehatan Kabupaten Sukoharjo, 2019). The results of Friedrickson, et al. (2004) showed that parents who do not understand the importance of immunization mostly refuse to immunize their children for fear of side effects of immunization that they think can cause illness such as fever and others (Friedrickson, et al., 2004).

One way to overcome the problem of rejection of immunization by parents is to provide the right information about proper immunization to parent through health promotion activities. Implementation of health promotion that needs attention is the selection of media. Health promotion media is a tool used to help the health promotion process. The right media make information more easily accepted by the target, so that behavior will also change according to the knowledge gained (Depkes RI, 2008). According to Igiyany (2016) the use of visual media is very helpful in digesting the information conveyed and can attract the attention of the target (Igiyany, 2016).

Printed media or visual media are media that are often used because of their ease in reproducing and using them when conducting health promotion (Musfiquon, 2012). In addition, visual media such as leaflets and picture books also show good results after being used to improve knowledge, attitudes and skills (Jha, Bajracharya, & Shankar, 2014; Weedon, 2014). Based on preliminary interviews with mothers who came to the "Posyandu" in Gabahan, Sukoharjo, many claimed that they were still afraid of the effects of immunization, especially if their children were sick, they would not even come to the "Posyandu" despite the schedule for immunization. This is because the information about the immunizations they got is not right. In the initial survey was also found that health promotion had never been carried out using any

media. That's why researchers want to conduct research about the use of visual media in the promotion of health about immunization to change mothers' knowledge and behavior about immunization.

METHODS

This research is a pre-experimental study with One Group Pretest-Posttest Design. The sample collection of 35 respondents in this study was taken using purposive sampling technique determined by the researchers, among others, willing to be a respondent, have a toddler, and live in the area of Gabahan, Sukoharjo. Data collection was used a questionnaire containing 15 questions about immunization knowledge and 10 questions that assess immunization behavior where the correct or positive answers get a value of 1 and one gets a value of 0. The data analysis technique used univariate and bivariate analysis. Univariate analysis was performed to see respondent's characteristics, while bivariate data analysis was performed using the Wilcoxon test to see how visual media's effect to knowledge and behaviour of immunization.

RESULT

From the research that has been done, it is obtained the characteristic data of respondents, namely age and education of the respondents which can be seen in Table 1 and Table 2.

Table 1. Age Distribution of Respondents

No	Age	Total	
		N	%
1	26	2	5.7
2	27	3	8.6
3	28	5	14.3
4	29	7	20
5	30	8	22.9
6	31	5	14.3
7	32	4	11.4
8	33	1	2.9
TOTAL		35	100

Table 1 show that the age of respondents is in the range of 26-33 years with the majority aged 30 years at 22.9% and 2.9% of respondents aged 33 years.

Table 2. Distribution of Respondent Education

No	Level of Education	Total	
		N	%
1	Elementary school	2	5.4
2	Middle School	8	22.9
3	High school	20	57.1
4	College	5	14.3
TOTAL		35	100

The education of respondents seen in Table 2 shows that as many as 57.1% of respondents had high school level education, while the respondents with elementary school level education were 5.4%.

Table 3 . Wilcoxon Test Results

No	Variable	Mean	P value
1	Knowledge	Pretest	0.00
		Posttest	
2	Behaviour	Pretest	0.00
		Posttest	

The results showed that mother's knowledge had increased from 9.31 to 11.57. Likewise, for mother's behavior, the value has increased from 6.66 to 8.51. Based on the results of statistical tests conducted, it appears in Table 3 that p-value of 0.00 was obtained for both knowledge and behavior variables, which means health promotion using visual media, namely leaflets can significantly increase maternal knowledge and behavior about immunization.

DISCUSSION

Respondents in this study have an age range of 26-33 years, due to the way the research respondents were collected based on inclusion criteria by researchers, namely mothers who have children under five and come to the "Posyandu". Age did not affect the knowledge and behavior because the results of the analysis of respondents, not all of the older respondents have the value of knowledge and a better behavior than younger respondents. It is also told in the prior study that there is no affect of age to the knowledge, attitudes and behavior of the respondents. It is because the older a person does not mean they will have better knowledge, attitudes and knowledge than the younger one (Darmawan, 2016; Hudhah & Hidayah, 2017). These results are consistent with the results of this study because the age of the respondents in this study did not have a role to increase knowledge, and behavior. Riyanti (2010) also mentioned that the level of education of respondents did not directly affect the knowledge, attitudes and skills of respondents, but education would affect a person's ability to receive and understand information provided to them so as determining how much change would be achieved through new information received. In this study, this can be seen from the ability to receive good respondent information, because the majority of respondents have a high school education. Information received by someone will become new knowledge for respondents and change their behavior (Oluwafemi, Fasubaa, Ekhaguere, & Azeez, 2017).

Giving information through health promotion will increase the knowledge, awareness and eventually someone will do a practice in accordance with the knowledge, which will be referred to as behavior (Mandagi, Umboh, & Wantania, 2017). In health promotion, health promotion media is one that influences the success of information delivery at the time of implementation so it needs to be determined precisely media is one element of the health promotion process that cannot be separated because the media has an important role, namely as an intermediary that

can provide understanding the same information between the messenger and the target (Kurniawan, Putri, & Widiani, 2019).

Print media are one of the visual media that is often used in the process of delivering messages. The media used in this study is visual media in the form of leaflets, which contain information about immunization. This study showed that after being given visual media, in this case is leaflets an average increase in the value of respondents' knowledge from 9.31 to 11.57. This shows that the leaflet media can be used as media for health promotion with the aim of increasing knowledge.

According to Levie and Lentz in Musfiquon (2012), there are four functions of visual media, namely attention, affective, cognitive and compensatory functions. The affective function of visual media is to attract and direct the target to concentrate on the contents of the message displayed. Affective functions can be seen from the target's attitude when looking at pictorial text. The cognitive function of visual media helps to achieve the goal of understanding and remembering information contained in images. Whereas the compensatory function of visual media is to provide context for understanding texts in the presence of the images displayed (Musfiquon, 2012). Because the leaflets have these four functions, leaflets can increase knowledge from mothers related to immunization. In addition, leaflets which are included in visual media, have advantages that can be observed compared to audio media that can only be heard. This is because the ability of individual absorption can also be seen from the senses that channel information to the brain. The sense of sight is the most effective of conveying information to the brain with an absorption ability of 82% compared to the sense of taste (2.5%), touch (3.5%), smell (1%) and hearing (11%) (Daryanto, 2010). The results are consistent with a study by Fish et al. (2008) which said there was a significant difference in knowledge between pretest and posttest after being given information through visual media (Fish, et al. , 2008). Other studies also prove that there is a significant effect of providing health education with the right media to change knowledge (Pratama, Widodo, & Listyorini, 2013).

Changing the mother's knowledge for the better also changes the mother's behavior in providing immunization to her child. After giving health promotion by using leaflets, the value of maternal behavior also changed from an average of 6.66 to 8.51. A person's behavior about health is determined by knowledge, attitudes, beliefs, traditions and so on from the person or community concerned (Notoatmodjo, 2007). In this case health promotion using visual media or leaflets is one of the causes of changes in maternal behavior for the better. The use of leaflets can also be adjusted to the wishes of respondents to read the information provided. Respondents were able to repeat the reading desired parts that affect behavior (Igiany, 2016). It is supported by a study by Hamdalah (2013), that educational approach with the right media can change a person's behavior including knowledge. This is because the intervention give a health education process to change in a positive direction (Hamdalah, 2013). Adam & Wintoni (2016) also said that the use of health promotion media can improve health behavior, which means it is in line with the results of this research that has been done (Adam & Wintoni, 2016).

CONCLUSION

Health promotion using visual media, leaflets, can increase mother's knowledge about immunization and mother's behavior in giving immunizations to their children. The analysis

showed that the increase in knowledge and behavior that occur is said to be significant. Seeing these results it can be concluded that the leaflet media can be used as a health promotion media to facilitate information transfer with the aim of increasing knowledge and behavior.

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