The Effect of Multimedia Video Learning on Students' Knowledge about Adolescent Reproductive Health in Preparing Puberty

ABSTRACT

Nara Lintan Mega Puspita¹, Huda Rohmawati¹, Raras Sucma Ambar², Putri Erika²

> Midwifery Proffesion Program, Kadiri University, Indonesia
> Bachelor of Midwifery Program, Kadiri University, Indonesia

Email:

naralintan@unik-kediri.ac.id

Received: March 7nd 2022

Accepted: April 11rd 2022

Published: May 27th 2022

Puberty is the maturation and growth that occurs when the reproductive organs begin to function and secondary sex begins to emerge. Lack of preparation of children for puberty is a serious psychological danger. The purpose of the study was to determine the Effect of Video Learning Multimedia on Students' Knowledge of Adolescent Reproductive Health in Preparing for Puberty.

This study uses a one-group pretest-posttest design method. The sample in this study was 37 respondents taken using non-probability sampling technique. The research instruments used were materials and questionnaire sheets. The results of the study were analyzed using the Wilcoxon statistical test.

The results of the research showed that before being given health education most of the respondents (67.6%) were not ready to face puberty and after being given health education almost all respondents (94.6%) were ready to face puberty.

Based on the results of statistical tests obtained p-value 0.000 < (0.05), then H0 is rejected and H1 is accepted, meaning that there is an Effect of Multimedia Video Learning on Students' Knowledge of Adolescent Reproductive Health in Preparing for Puberty.

It is hoped that educational institutions can become a reference for applying health education in schools about puberty as a means to increase knowledge and be prepared earlier to face puberty.

Keywords: Video learning multimedia, Health education,

Puberty readiness

Copyright © 2022 IIK STRADA Indonesia All right reserved.



This is an open-acces article distributed under the terms of the Creative Commons Attribution-ShareAlike 4.0 International License.

INTRODUCTION

According to WHO, adolescents are residents in the age range of 10-19 years, according to the Regulation of the Minister of Health of the Republic of Indonesia Number 25 of 2014, adolescents are residents in the age range of 10-18 years and according to the Population and Family Planning Agency (BKKBN) the age range of adolescents is 10-18 years. 24 years old and unmarried. According to the 2010 Population Census, the number of the 10-19 year age group in Indonesia is 43.5 million or about 18% of the total population. In the world, it is estimated that there are 12 billion youth groups or 18% of the world's population (WHO, 2012).

During adolescence, there is a rapid physical growth accompanied by many changes, including the growth of the reproductive organs (sexual organs) so that maturity is achieved which is indicated by the ability to carry out reproductive functions. Changes that occur in women are followed

by the appearance of signs such as hair, hips, breasts, skin, fat and sweat glands, muscles and voice (Widyastuti, 2011). Puberty is a transitional period between childhood and adulthood. There is no sharp line between the end of childhood and the beginning of puberty, but it can be said that puberty begins with the functioning of the ovaries. Late puberty when the ovaries are functioning steadily and regularly (Erna Setiyaningrum, 2014). The transition process in adolescents that occurs is not only physical and mental, but also gradual changes in the reproductive system that become mature and function like adults. Any changes, however, will cause shocks for individual adolescents who experience it (Purwoastuti, 2015). Lack of parental knowledge of child development will be a problem for adolescents to get the right explanation about sex. In fact, parents still feel uncomfortable or reluctant and do not even understand the right way to discuss biological, psychological development and reproductive health problems with their children (Purwoastuti, 2015). Talks about reproductive health are still considered taboo, let alone discussed with teenagers. Parents are worried that they will trigger their children to do things that are considered taboo. In fact, the desire to know and try something new will always exist in the character of adolescents (Purwoastuti, 2015). The importance of using media is to increase knowledge, skills, attitudes, from the learning process whose success is determined by the effectiveness of learning media and the effectiveness of the use of extension media is determined. by the number of senses used. An innovation is needed, so that students' interest in learning about reproductive education is very high, so something that can make them interested is needed, one of which is multimedia video learning which is currently popular among teenagers. Video Leraning Multimedia is a learning media that uses video or moving displays. Multimedia is the delivery of information using a combination of text, graphics, sound, video, animation. By using learning media technology, it will increase learning ability by 50%, than without using media. (Munir, 2013). Based on the results of research, reproductive health education is very important to know early on so that by the time a person reaches the age of a teenager, they have received enough information so that they know things that should be done and things that should be avoided when facing problems around their reproductive organs (Purwoastuti, 2015). Therefore, the purpose of this study was to intervene in the Effect of Video Learning Multimedia on Students' Knowledge of Adolescent Reproductive Health in Preparing for Puberty.

MATERIALS AND METHODS

Design and Samples

Research is conducted in SDN 1 Ngujang Tulungagung, East Java in January-February 2022. The research design used in this research is a *one-group pretest-posttest design*. The sampling technique is taken by *total populasi* sampling with a total of 37.

Data Collection

Researchers distributed pre-test questionnaires to respondents directly and explained how to fill out the questionnaires. Provide the provision of time to fill out the questionnaire approximately 15 minutes. After all the questions were filled in, the questionnaire was asked to return and collected to the researcher. Then provide counseling to respondents about puberty for approximately 30 minutes of health education using Video Learning Multimedia. After finishing giving the Video Learning Multimedia about puberty, the researcher conducted a post test and then the respondents were given health education by filling out the same questionnaire.

Data Analysis

The statistical test for both variables used the Wilcoxon test.

RESULTS

Table 1. Analysis of Multimedia Video Learning on Students' Knowledge of Adolescent

Reproductive Health in Preparing for Puberty

Student Knowledge	Before being given a multimedia learning video		Before being given a multimedia learning video	
	F	%	F	%
Less	8	21,6	1	2.7
Enough	23	62,1	3	8,1
Well	6	16,2	31	83,8
Total	37	100	37	100
a -value = 0,00 α =	= 0,05			

Table 1 above shows that before being given health knowledge with the multimedia video learning method, most of the respondents (62.1%) were knowledgeable enough to prepare for puberty and after being given health knowledge using the multimedia video learning method, almost all respondents (83.3%) were knowledgeable. well prepare for the bupertas period. Based on statistical tests using the Wilcoxon test, it is known that the p-value < is 0.000 < 0.05 so H0 is rejected and H1 is accepted, meaning that there is an effect of Multimedia Video Learning on Students' Knowledge of Adolescent Reproductive Health in Preparing for Puberty.

DISCUSSION

Based on the table above, it shows that before being given health knowledge with the multimedia video learning method, most of the respondents (62.1%) were knowledgeable enough to prepare for puberty and after being given health knowledge with the multimedia video learning method, almost all respondents (83.3%) had good knowledge. prepare for the bupertas period. Based on the results of the Wilcoxon test, there is a positive change between before and after being given health education with a p-value $<\alpha$ (0.05) then H0 is rejected and H1 is accepted which has the effect of Video Learning Multimedia on Students' Knowledge of Adolescent Reproductive Health in Preparing for Puberty . Everyone in obtaining information depends on each individual. According to health education is a learning process, in this case it means that there is a process of development or change towards knowing and being better at the individual. In the community group from not knowing about health values to knowing, from not being able to overcome health problems to being able to (Purwanto, 2009). This is closely related to the method of health education or counseling, namely the use of learning media is needed to channel messages, stimulate the thoughts, feelings and willingness of students and activate learning and provide feedback and feedback so as to increase learning motivation in students to carry out practical practices, correctly. In audiovisual media there are two elements that unite, namely the presence of audio elements that allow students to receive learning messages through hearing, while visual elements allow the creation of learning messages through visualization (Rohmatun, 2012). In line with research conducted by Septi Ismawati (2010) which states that providing counseling about puberty affects readiness for puberty with research results showing that there is an increase after being given counseling compared to readiness before being given counseling. In the opinion of researchers, respondents who have received health education have high enthusiasm to listen to the information conveyed optimally. As evidenced by the results of the study, it was found that almost all of the respondents were ready to face puberty.

CONCLUSION

It can be a provision for students in facing puberty and knowing the changes that occur so that teenagers can accept and understand things that may occur during the puberty process so that they have good readiness in facing puberty.

ACKNOWLEDGMENTS

The author is thankful to respondents for their valuable information and their awareness to participate in this research.

CONFLICTS OF INTEREST

The author declares that they have no conflict of interest

REFERENCES

- Eva S. 2015. Pengaruh Penyuluhan Terhadap Pengetahuan Tentang Kesehatan Reproduksi Remaja. Yogyakarta: Sekolah Tinggi Ilmu Kesehatan Aisyiyah Yogyakarta.
- Munir, (2013). MULTIMEDIA dan Konsep Aplikasi Dalam Pendidikan. Bandung: Penerbit Alfabeta.
- Rohmatun (2012). *Media Pembelajaran Masa kini Penunjang Prestasi*. Bandung : Sinar Baru Algensindo.
- Setyaningrum, Erna ; Aziz, Zulfa Binti, 2014. *Pelayanan Keluarga Berencana dan Kesehatan Reproduksi*. Jakarta timur: CV.TRans Info Media.
- Septi, I (2010). Pengaruh Penyuluhan Kesehatan Reproduksi Remaja Terhadap Kesiapan Menghadapi Pubertas Pada Siswa Kelas VII di SMP Muhammadiyah 2 Gamping Sleman Yogyakarta Tahun 2010. *Naskah Publikasi*. Sekolah Tinggi Ilmu Kesehatan Aisyiyah Yogyakarta. Bersumber dari : http://opac.unisayogya.ac.id/1804/1.NASPUB.pdf .
- Purwanto, N (2009) Psikologi Pendidikan. Bandung: PT Remaja Rosdakarya.
- Purwoastuti, E Dan E.S, Walyani. 2015. Panduan Materi Kesehatan Reproduksi Dan Keluarga Berencana. Yogyakarta: Pustaka Baru Press.
- Widyastuti. 2009. Kesehatan Reproduksi. Yogyakarta: Pustaka Rihama.