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THE INFLUENCE OF ANIMATED VIDEO MEDIA ON ADOLESCENTS' KNOWLEDGE ABOUT HIV/AIDS PREVENTION

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ABSTRACT
To determine the influence of animated video media on adolescent knowledge about HIV/AIDS prevention. Method: Quasy Experiment research design or quasi-experiment with One Group Pretest Posttest Design. Data were collected using a questionnaire then data tabulation and data analysis were carried out.The pre-test value of the animated video media and leaflet groups obtained an average knowledge value that was not much different, namely 5.45 in the treatment group and 5.05 in the leaflet group. This means there was no difference in the average knowledge in the animated video media and leaflet groups before being given knowledge about HIV/AIDS. The level of knowledge of animated video media has an effect compared to leaflet media on HIV/AIDS knowledge. There is a difference in adolescent knowledge about HIV/AIDS before and after being given counseling with animated video media and leaflet media in adolescents.

Keywords: animated videos; HIV/AIDS; HIV/AIDS prevention; knowledge teenagers; leaflets

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INTRODUCTION

Human Immunodeficiency Virus (HIV) is a virus that attacks the human immune system, weakening the body's ability to fight disease. AIDS is a collection of symptoms resulting from a weakened immune system. (Sovia et al., 2019) . If a person's immune system is weakened, they are susceptible to diseases such as tuberculosis, candidiasis, inflammation of the skin, lungs, digestive tract, brain, and even cancer. The HIV/AIDS virus is also a virus that can be fatal if not recognized early by the sufferer. (Sabhita et al., 2022). Until now, no cure has been found for HIV/AIDS sufferers, so people who suffer from this disease can be said to have no long life expectancy (Janah et al., 2019).

World Health Organization (WHO) data shows that there are approximately 39 million (33.1–45.7 million) people living with HIV at the end of 2022. 4. Data with a total of 2.58 million (1.91–3.47 million) HIV cases include children aged 0–19 years. Every day in 2022, approximately 740 children were infected with HIV and approximately 274 children died from AIDS-related illnesses, mostly due to lack of access to HIV prevention, care and treatment services. (Atapukang, 2016)& (Ayubbana et al., 2022) . Today's adolescents are at high risk of contracting HIV/AIDS due to their tendency to engage in sex outside of marriage or at a young age with their boyfriends. This puts adolescent girls at risk because their vaginal canals are still fragile and vulnerable to various diseases. Adolescents at this age are particularly susceptible to infection due to emotional instability and a lack of knowledge and information about HIV/AIDS (Kumalasary, 2021) .

Adolescents infected with HIV/AIDS in Indonesia show a trend of increasing numbers, adolescent ignorance is a trigger for this increase (Rusyidi, 2018) . Knowledge of how HIV/AIDS is transmitted is very important to encourage adolescents to avoid HIV-AIDS (Rusyidi, 2018). The existence of the STOP program is expected that Indonesian people who do not know they are HIV or someone who has been infected with HIV can know their status and access treatment and prevention early (Janah et al., 2019) . There are still adolescents who have never heard of HIV/AIDS and do not know how to prevent its transmission. Although this group is small in

number, it needs more attention from all parties so that this group can avoid the HIV/AIDS virus, both in urban and rural areas (Sunami & Aslam, 2021) . The aim of this study was to determine the influence of animated video media on adolescents' knowledge about HIV/AIDS prevention.

METHOD

This study used a quasi-experimental research design with a One Group Pretest Posttest Design. This research is not yet a true experimental study because there are still external variables that influence the formation of the dependent variable. Then, the questionnaire was distributed again to the same group of respondents. The population in this study was all 11th grade students with a sample size of 100 people using a purposive sampling technique. Data analysis used in this study was the Wilcoxon test.

RESULT

The Wilcoxon test results on the level of knowledge of the animated video media group were used to determine the difference between the pretest and posttest data.
In the table above, the results of the Wilcoxon test of the level of knowledge in the Animated Video Media group show that the calculated Z is -4.041 and sig is 0.001, so it can be concluded that there is a difference in the results of the Animated Video Media group's Level of Knowledge before and after the treatment was given.

Shows that the average value of the animated video media group before treatment was 5.45, while after treatment the average value was 9.55. This shows that the average value after treatment was greater than the average value before treatment. Therefore, it can be concluded that using animated video media has an influence on the level of knowledge in the animated video media group.

The results of the Wilcoxon self-esteem test in the leaflet group show that the calculated Z is -1.508 and the sig is 0.132. This indicates that the sig value of 0.132 is greater than 0.05 (5% error rate), so it can be concluded that there is no difference in the results of the Knowledge Level in the leaflet group before and after being given treatment. In the animated video media group there is an influence from the results of the Sig value of 0.001 while in the leaflet group the sig value is 0.132 where if the p value <0.05 then it is said that there is an influence. The results of this study on the use of animated video media have an influence on the level of adolescent knowledge about HIV/AIDS compared to the use of leaflets.

DISCUSSION

The average knowledge scores for animated video media and leaflets were not significantly different, namely 5.45 in the treatment group and 5.05 in the leaflet group. This means there was no difference in the average knowledge scores between the animated video media and leaflet groups before being given knowledge about HIV/AIDS. Meanwhile, in the post-test of the treatment and leaflet groups, the average knowledge scores were 9.55 in the animated video media group and 6.80 in the leaflet group. Seeing these figures means there was a difference in the average knowledge scores between the treatment and leaflet groups after being given knowledge about HIV/AIDS.

This research aligns with research conducted by Karin (2018) that found that the average knowledge about maintaining dental and oral health increased after being provided with animated video media. This increase is related to the effectiveness of the media and the receptivity of the animated video media used by respondents. (Karin et al., 2018) . In line with Pradesta (2021), there was a change in knowledge about narcotics before and after being given animated video media. (Pradesta & Yogi, 2021) .

This means that animated videos significantly enhance students' knowledge because they incorporate play and learning. This play-and-learn approach is highly suitable for school students, as students at this age generally prefer playing with friends. The use of animated videos is an

effective means of transforming knowledge. Animated videos are an educational medium that contains messages and information, complemented by images (Rahmah et al., 2022).

In this animated video, students will unintentionally read, see, and hear about HIV/AIDS, making it easier for them to remember the messages conveyed in the animated video. This educational media aims to provide material that can educate students about HIV/AIDS in a fun atmosphere (Sutriyanto et al., 2017).

Although statistically shows a change in knowledge after being given HIV/AIDS knowledge with leaflet media, the data shows that the highest average knowledge value after being given education was found in the group given HIV/AIDS knowledge with animated video media. This shows that during the animated video media process, the group given HIV/AIDS knowledge with leaflet media did not understand the material given due to weaknesses in the leaflet media. The weaknesses of leaflet media are that it is not suitable for individual to individual targets, it is difficult to display movement, the division of lesson units must be designed in such a way that it is not easy to get bored quickly, the content or material that is too much makes students lazy to study or read it (Saputra & Prasetiawan, 2018) .

CONCLUSION

Knowledge Level of Animated Video Media has an influence compared to leaflet media on knowledge HIV/AIDS at Al-Fatah Youth High School in the Harapan Sentani Community Health Center working area . There was a difference in adolescents' knowledge about HIV/AIDS before and after being given counseling using animated video media and media .

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