



THE EFFECTIVENESS OF ANIMATED VIDEOS ON KNOWLEDGE AND ATTITUDES ABOUT SEXUAL VIOLENCE PREVENTION

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ABSTRACT

Sexual violence in children has until now become a very concerning problem, deviation of sexual violence can occur in any circle. The impact of sexual abuse can torture children to suffer, emotions, depression, loss of appetite, children become introverts, insomnia, cannot focus at school, grades decrease, and even do not move up in class. Objective: To determine the effectiveness of health promotion with animated video media on knowledge and attitudes about preventing sexual violence. The total population was 220 and a sample of 40 students of elementary school 040484 and elementary school 040483 Payung, Kab, Karo using purposive sampling techniques. Method: Quasi Experimental Campbell Design with Nonequivalent Control Group Design research design. Data was collected by distributing questionnaires to respondents. Data analysis using Wilcoxon test and Mann-Whitney test. Results: The results of the study averaged knowledge about the prevention of sexual violence in children in the video group were pretest (6.95), posttest (8.05), while in the power point group were pretest (8.55), posttest (9.05). The average results of attitudes about preventing sexual violence in children in the video group were pretest (29.45), posttest (35.15), while in the power point group were pretest (33.40), posttest (32.35). Conclusions: There was a difference in the increase in knowledge scores and attitudes about preventing sexual violence in children with animated video media and power points with ($p < 0.05$).

Keywords: animated video; attitude; knowledge; sexual violence

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INTRODUCTION

Children need attention because they are the next generation of the nation. According to Law No. 23 of 2002 children are someone who is not yet 18 years old, including those still in the womb. Meanwhile, WHO defines the age limit of children as from the time the child is in the womb until the age of 19 years. According to the (Kementerian Pemberdayaan Perempuan dan Perlindungan Anak Republik Indonesia, 2023), the number of early childhood in Indonesia is estimated at 30.73 million. This number is equivalent to 11.21% of the total population of Indonesia. Early childhood in Indonesia is more male than female. This can be seen from the early childhood sex ratio of 105.01 in 2022. The ratio indicates that there are 105 boys for every 100 girls. According to age, 58.78% of early childhood in Indonesia is in the age range of 1-4 years. A total of 29.11% of early childhood is in the age group of 5-6 years. Meanwhile, 12.11% of early childhood is less than one year old. From this number, it illustrates the potential of a large enough young generation in the future, but on the other hand, it provides a warning that Indonesia also has a considerable potential risk for cases of sexual violence involving children and adolescents.

In (Ratnasari & Rosida, 2024), according to WHO data, it is estimated that up to 1 billion children aged 2-17 years, have experienced physical, sexual, or emotional abuse or neglect in the past year. Boys and girls are at equal risk of physical and emotional abuse and neglect, and girls are at greater risk of sexual abuse. Cases of sexual violence are like an iceberg phenomenon, where cases that occur are higher than those reported (KPPA RI, 2022). The rise of sexual violence cases that have occurred in children lately can be said to be multifactorial. These factors can be identified as two, namely internal and external factors. The internal factors are causes that come from within the perpetrators of sexual violence such as psychological factors, biological factors, moral factors, revenge factors and past trauma. While external factors can be identified several factors as follows: cultural factors, economic factors, factors of lack of collective awareness of child protection in the educational environment, factors of exposure to child pornography and adult pornography at the expense of children, factors of weak law enforcement and relatively light sentences, factors of disharmony between legislation products related to children's issues, factors of children in disaster and emergency situations (Lewoleba & Fahrozi, 2020).

Efforts that can be made to prevent and protect children from the threat of sexual crimes in the environment are one of them by providing health promotion on the prevention of sexual violence in children through audio and visual media, namely videos. Audiovisual media, also known as video media, is currently being widely used because this media is a teaching tool that can be heard and seen so that it helps children in the learning process which functions to clarify or facilitate understanding of the knowledge being studied (Rupawati et al., 2017). Providing education using animated sexual education videos affects the knowledge that children have regarding sexuality and how to prevent acts of sexual harassment in the environment around children (Margaretta & Kristyaningsih, 2020). The number of victims of violence against children in North Sumatera according to (SIMFONI-PPA, 2021), in the household environment is very high, namely 529 victims, in public facilities as many as 108 victims, followed by the school environment being the 3rd place with 33 victims. Through this data, it is unfortunate that there are victims of violence against children in the school environment. Because of this, the school environment does not exclude the possibility of sexual violence against children, especially in remote villages that are far from the hustle and bustle of the city and certainly lack information related to sexual education in children.

The results of an initial survey conducted by interviewing teachers at State Elementary School 040484 Payung, Karo Regency obtained information that health promotion has not been carried out on the prevention of sexual violence, other than that State Elementary School 040484 Payung, Karo Regency has supported the prevention of sexual violence with the program "safe school escort do not silence acts of violence" such as persecution, harassment, pereloncongan, legislation, extortion and other acts of violence in the form of a board posted in front of the school. (Pratiwi, 2020) animated videos are very good to use in the teaching and learning process because they will be easier to understand and understand. Through his research, health promotion with animated video media has increased, namely there is a difference in the increase in knowledge scores given health promotion on the prevention of sexual violence in children in the animation video group before being given health promotion, the result is 7.2174 and the average after being given health promotion on the prevention of sexual violence in children with animated video media is 9.3913, which means there is an increase in knowledge.

Based on the description above, researchers want to know the effectiveness of health promotion with animated video media on knowledge and attitudes about preventing sexual violence in children at State Elementary School 040484 Payung, Karo Regency.

METHOD

The type of research used is Quasi Experimental Campbell Design with a research design of Nonequivalent Control Group Design conducted on two different groups that receive different treatments, namely the subject group is carried out once the measurement at the beginning (pretest) before the intervention (treatment) and after that the measurement is carried out again at the end (post test) where the experimental group uses animated video media and the control group uses power point media The number of respondents was 40 respondents (20 people in each group). The research was conducted at State Elementary School 040484 and State Elementary School 040483 Payung, Kab, Karo. Data was collected using questionnaires distributed at pre-test and post-test. Data analysis used Wilcoxon test. To determine the difference in effectiveness using the Mann-Whitney test. The design of this study is that in the animation video group, students' knowledge and attitudes were measured before (pre-test) given health promotion using animated video media. Then given a health promotion intervention with animated video media on the prevention of sexual violence in children. Then the measurement of students' knowledge and attitudes after (post-test) was given health promotion using animated video media. In the power point group, the knowledge and attitudes of students were measured before (pre-test) given health promotion using power point media. Then given a health promotion intervention with power point media on the prevention of sexual violence in children. Then the knowledge and attitudes of students were measured after (post-test) given health promotion using power point media.

RESULTS

Univariate Analysis

Characteristics of Respondents

This analysis was conducted to determine the frequency distribution of each research variable, namely age, gender, ethnicity and religion of respondents. The following is an explanation of the characteristics of the respondents :

Table 1.

Characteristics of Respondents Based on Age, Gender, Ethnicity and Religion				
Characteristics	Animation Video		Power Point	
	f	%	f	%
Age				
9 years old	3	15,0	-	-
10 years old	7	35,0	-	-
11 years old	6	30,0	17	85,0
12 years old	4	20,0	3	15,0
Gender				
Male	12	60,0	10	50,0
Female	8	40,0	10	50,0
Tribe				
Karo	18	90,0	18	90,0
Java	2	10,0	2	10,0
Religion				
Islam	7	35,0	3	15,0
Christian	12	60,0	12	60,0
Catholic	1	5,0	5	25,0

Table 1, it was found that of the 20 respondents in the animation video group based on age, most (35.0%) were 10 years old, while in the power point group most (85.0%) were 11 years old. In gender in the animated video media group, most (60.0%) were male, while in the

power point group the number of men and women had the same size (50.0%). The tribe in the animated video group and the power point group had the same size (90.0%) dominated by the Karo tribe. In the animated video group and the power point group, most were Christian (60.0%). Mean Knowledge and Attitudes About Prevention of Child Sexual Abuse Before and After Health Promotion in Animated Video and Power Point Groups This analysis was conducted to determine the mean knowledge about preventing sexual violence in children before and after being given health promotion with animated video media with power point media. Based on the data normality test using the Kolmogorov-Smirnov test, the results of the data processed in the knowledge variable in the animated video group and the power point group are non-normal distribution data, so the test performed is the Wilcoxon test.

Table 2.
Mean Knowledge about Prevention of Child Sexual Abuse Before and After Health Promotion in Animated Video Media Group and Power Point Media Group

Variable	f	Mean	SD	Mean
Animated Video				
Pre	20	6,95	0,945	1,1
Post	20	8,05	0,887	
Power Point				
Pre	20	8,55	1,146	0,5
Post	20	9,05	0,887	

Table 2, the mean knowledge of preventing sexual violence in children before being given health promotion with animated video media is 6.95 and SD 0.945, while in the group given power point media is 8.55 and SD 1.146. Then the mean knowledge of preventing sexual violence in children after being given health promotion with animated video media is 8.05 and SD 0.887 while in the group given power point media is 9.05 and SD 0.887.

Table 3.
Mean Attitudes About Prevention of Child Sexual Abuse Before and After Health Promotion in Animated Video Media Group and Power Point Media Group

Variable	N	Mean	SD	Mean
Animated Video				
Pre	20	29,45	3,486	5,7
Post	20	35,15	1,814	
Power Point				
Pre	20	33,40	3,016	0,659
Post	20	32,35	3,675	

Table 3, the mean score of attitudes about preventing sexual violence in children before being given health promotion with animated video media is 29.45 and SD 3.486 while in the group given power point media is 33.40 and SD 3.016. Then the mean score of attitudes about preventing sexual violence in children after being given health promotion with animated video media is 35.15 and SD 1.814 while in the group given power point media is 32.35 and SD 3.675.

Bivariate Analysis

To determine the difference in mean scores in increasing knowledge and attitudes in the animated video media group and the power point media group, the Mann-Whitney test was used.

Table 4.

Mean Difference in Knowledge and Attitude Score Improvement in Animated Video Media Group and Power Point Media Group

Variable	Mean Rank		Mean Rank
	Animated Video Media	Power Point Media	
Increase in Knowledge Score	26,23	14,78	11,45
Increase in Attitude Score	25,13	15,88	9,25

Table 4, it was found that the average difference in the increase in knowledge scores and attitudes about preventing sexual violence in children. In the group given health promotion with animated video media and in the group given health promotion with power point media. In increasing the knowledge score between the animated video media group and the power point media there is a Mean Rank difference of 11.45 while in increasing the attitude score between the animated video media group and the power point media there is a Mean Rank difference of 9.25.

Tabel 5.

Effectiveness of Health Promotion with Animated Video Media on Knowledge and Attitudes about Preventing Sexual Violence in Children

Variable	<i>p value</i>
Increase in Knowledge Score	0,001
Increase in Attitude Score	0,011

The statistical test results show that knowledge ($p=0.001$) and attitude ($p=0.011$), namely p value <0.05 with a confidence level of 95%, means that health promotion with animated video media is more effective on knowledge and attitudes about preventing sexual violence in children at Public Elementary School 040484 Payung, Karo Regency.

DISCUSSION

Characteristics of Respondents

From the results of the frequency distribution of the characteristics of 40 respondents, it shows that most (85.0%) are 11 years old, most (60.0%) are male, almost most (90.0%) are of Karo ethnicity and most (60.0%) are Christian. In (Rizkia, 2020), Erna explains based on the characteristics, children aged 10-12 years old respond to media such as radio, magazines, advertisements and videos and like to read to get. Therefore, the age of 10-12 years is suitable for health promotion with animated video media because animated videos are easier to remember. Based on (Wiradona et al., 2022) research, the stimulus of animated video media is able to attract students' attention so that students receive good education well through the senses of hearing and vision which has an impact on students being able to apply what is learnt through animated video media in daily behaviour.

According to research (Windasari, 2020), victims of sexual violence are dominated by the largest age group 10-19 years followed by the age group 0-9 years. The age group (0-9 years) is vulnerable to sexual violence and it cannot be denied that children who are still in elementary school have experienced sexual violence, both women and men. This is because women and men can be victims of sexual violence. This age group is in dire need of education related to the prevention of sexual violence, the suitable media is an animated video because it is very easy to understand. (Negara et al., 2022) research revealed that 2D animation media is an effective media because it is favoured by children. This 2D animation technique is very suitable to be delivered to children. With 2D animation media, besides being able to educate

children, they can also conclude the moral message contained in it. In addition, this 2D animation technique will leave an impression on children, if there are interesting things from the media they will continue to remember it, and it is hoped that they can apply the morals in the animation media.

Knowledge before and after being given health promotion on the prevention of sexual violence in children with animated video media and power point

The results of the analysis of the average knowledge of respondents in the animation video group before being given health promotion obtained the results of 6.95 and the average after being given health promotion on the prevention of sexual violence in children with animated video media was 8.05, which means that there is an increase in knowledge. This is in line with research conducted by (Fahrezi, 2021), there is an increase in the average score of students' knowledge about teenage sex after being given health promotion with animated video media with a pretest score of 4.83 and a posttest of 8.87 (Huga et al., 2022), stating that there is an increase in the average score of adolescent knowledge after being given health promotion with animated videos with a pretest score of 14 and a posttest of 16.5. While the average knowledge in the power point group before being given health promotion obtained the results of 8.55 and the average knowledge after being given health promotion about preventing sexual violence in children with power point media was 9.05. This is in line with research (Saripah et al., 2023), showing that there is an increase in the average score of Women of childbearing age knowledge about Cervical Cancer after being given health promotion with power point media with a pretest score of 13.93 and posttest to 18.33.

(Prawesthi et al., 2021) argued that animated videos have the advantage of including the process of transferring information not only through the eyes as vision but also the ears as hearing. One participant said that hearing and seeing information in animated videos was easier and more interesting. This is evidenced by her research, namely the average value of knowledge increased after the treatment of participants with animated videos. (Notoatmodjo, 2012) gives the opinion that knowledge is the result of thought and occurs after a person has used his senses for an object. Sensing occurs through the five human senses such as sight, sensing, smelling, feeling and touching. Knowledge can be obtained in education. Knowledge can also be obtained through the knowledge of others, such as by listening, seeing directly through communication tools such as television, radio, and video.

Attitudes before and after being given health promotion on the prevention of sexual violence in children with animated video media and power point

The average results of respondents' attitudes before being given health promotion in the animation video group obtained the results of 29.45 and after being given health promotion on the prevention of sexual violence in children with animated video media obtained the results of 35.15. This is in line with (Ningsih et al., 2023), stating that there is an increase in the average attitude score in students about dengue fever through animated videos with a large p-value of 0.000. The mean increase in student attitudes from pre to post (average difference) is 12,800. While the mean attitude in the power point group before being given health promotion was 33.40 and the mean attitude after being given health promotion about preventing sexual violence in children has decreased with power point media is 32.35. This is not in line with research (Bahtiar, Andi Surahman Batara, 2022), which shows an increase in the average score of students' attitudes about free sex after being given health promotion with power point media with a pretest score of 39.9 and posttest to 90.0. Respondents' attitude scores after health promotion in the power point group decreased due to classroom conditions

that were not conducive at the time of the posttest filling in the attitude variable as a result students were no longer focused on filling out the questionnaire.

Based on (Wijayanti et al., 2023) research, animated video media showed a high increase in p-value $0.000 < 0.05$ in adolescent attitudes before and after health counselling. (Hartini et al., 2021) suggests that attitude is a ready response with positive and negative characteristics to certain objects consistently. Attitude is not classified as action or activity, but attitude is a tendency towards action, behaviour and role (Notoatmodjo, 2012).

The difference in the increase in knowledge scores and attitudes given health promotion on the prevention of sexual violence in children with animated video media and those given power point media

The results of statistical tests obtained the mean rank of respondents' knowledge in the animated video media group was 26.23 while in the power point media group was 14.78. This shows that the average increase in the knowledge score of respondents in the animated video media group is higher than the power point group. In the mean rank of respondents' attitudes in the animated video media group, there was an increase of 25.13 while in the power point media group it was 15.88, in this case the animated video media group had a higher average increase in attitude scores than the power point media group. This shows that those given health promotion with animated video media experienced an increase in knowledge and attitude scores higher than those given health promotion with power point media. This is in line with research conducted by (Pratiwi, 2020), there is a significant difference in students about the prevention of sexual violence that the mean value in the animated video media group is 16.48 greater than the mean value of 13.66 in the power point group.

(Hanifah et al., 2021) research shows that there is a significant difference in the average difference in knowledge scores between the experimental group through animated video media and the control group through power point media with p-value = 0.006 ($p < 0.05$), which means that there are differences in the effectiveness of health education through animated video media and power points on the knowledge of adolescent girls in facing menarche. Therefore, it can be seen that animated video media is more effective than power point media for intervention or educational media.

Effectiveness of Health Promotion with Animated Video Media on Knowledge and Attitudes About Prevention of Sexual Violence in Children

In statistical tests, the p value of knowledge (0.001) and p value of attitude (0.011) were obtained. So the p value < 0.05 then H_0 is accepted, meaning that animated video media is more effective than power point media in increasing knowledge and attitudes about preventing sexual violence in children. (Notoatmodjo, 2012) suggests that the delivery of information can be influenced by the methods and media used to deliver information so that it gives significant results for increasing knowledge. This underlies the results of the analysis of this study which shows an increase in knowledge and attitudes before and after the provision of health promotion on the prevention of sexual violence in children.

Meanwhile, in the opinion of (Hamtiah et al., 2012), media is a factor weighing the success or failure of learning. From the media the learning process can be more interesting and fun (joyfull learning). Through the use of media that follows technology, for example audia visual media (video), it is very helpful in the teaching and learning process. The advantage of using this media is that it clarifies the information to be conveyed. Oral information is sometimes not fully understood, especially if you are not proficient in explaining the material. So the role

of media is needed for tools that can explain information from learning. With video media can display information that cannot be felt directly to the respondent, this situation is due to video media displaying real events from the information displayed to provide deeper information. Not only does it shorten the learning process, with video aids, the level of intelligence can increase and change passive and static attitudes towards active and dynamic attitudes (Wahyuningsih, 2011).

The video on sexual violence prevention efforts in this study is presented with a combination of pictures, words and animations that are easily understood and accepted by respondents. Some pictures and words combined with animation are in fact more effective for memory than using pictures and words alone. In (Panjaitan, 2019), according to Mills and Mc Mullan in their research on short-term memory obtained from pictures, words and combined pictures and words. The presentation of colourful images and words in the cervical cancer video given to students also has an influence on increasing knowledge, where colour has a strong effect on short-term memory and visual attention.

The combination of animation (moving images) cartoons displayed in video form can attract students' attention. This is in line with (Pratiwi, 2020) research, which suggests that video media containing animation can increase significant development and can be seen from the pre-test and post-test scores when giving animated videos. In (Sofiani, 2020), according to Furoidah animated video is a medium that contains a collection of moving images and is made as creatively as possible to produce movement that is equipped with audio-visual impressions that can channel information for counselling respondents which is certainly easier to accept. In (Rochmania & Restian, 2022) research, it showed that student learning outcomes were better when using animated video media. Optimisation by using media to support learning is very important in the teaching and learning process. Through animated video media students can think creatively, this will have an impact on the influence of student learning outcomes.

CONCLUSION

The characteristics of the respondents showed that most of them were 11 years old, most of them were male, most of them were of Karo ethnicity and most of them were Christian. Knowledge about the prevention of sexual violence in children after being given health promotion with animated videos has increased. Attitudes about preventing sexual violence in children after being given health promotion with animated videos have increased. There is a difference in the increase in knowledge and attitude scores given health promotion on the prevention of sexual violence in children with animated video media and those given health promotion on the prevention of sexual violence in children with power point media. Animated video media is more effective in increasing knowledge and attitudes about preventing sexual violence in children compared to power point media.

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