

Research Article



The Effect Of Health Education Video Of Bullying Behavior On Student's Knowledge

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ABSTRACT

Background: Bullying is a harmful behavior, especially among elementary school students. Bullying problems and cases that occur must get special attention, so efforts are needed to overcome them. One of the efforts that can be done is through health education using video media.

Methods: This research with Quasi experiment approach with pretest- posttest without control group design. Health education was conducted for 10 minutes and repeated 3 times to test the effect of the intervention. The population in this study were all fifthgrade students at SDN Cisarua, West Bandung Regency, to 70 people. This study used a total sampling technique. This research has been conducted at SDN Cisarua, West Bandung Regency, data collection was taken in March 2024.

Results: there was an effect of health education with video on bullying behavior on student knowledge. After being given health education there are 50 students with good knowledge, 20 students with sufficient knowledge and no students with poor knowledge. The results of the analysis using the marginal homogeneity test obtained a value of p = 0.0001 < 0.05, it can be concluded that Ho is rejected, meaning that there is an effect of health education on the knowledge of respondents.

Conclusions: Health education through video media can increase knowledge about bullying on the knowledge of elementary school students.

Keywords: Bullying, Behavior, Health Education, Video



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INTRODUCTION

The Indonesian Child Protection Commission (KPAI) stated that there were 2,982 complaints of child special protection case clusters. The highest number of case complaints, namely; 1. Children with victims of physical and/or psychological violence with a total of 1,138 cases, 2. Children with victims of sexual crimes with a total of 859 cases, and 3. Children with victims of pornography and *cyber crime* in 2022.

The Regional Technical Unit (UPTD) for the Protection of Women and Children (PPA) in West Java has increased significantly this year. Until November 2023, the number of child abuse cases reported by the UPTD PPA this year reached 10 cases. This number increased significantly compared to 2022, when there was only one report.

Bullying behavior can be said to be one of the increasingly worrying problems for elementary school students today. Over the past few decades bullying behavior among school-age children has increased. Bullying incidents that occur include ridicule, mockery, exclusion, kicking, and pushing at least once a week. Based on the data, it is known that the psychological impact of bullying that occurs in elementary schools is 42% where children experience mental disorders such as sensitivity, overflowing anger, depression, low self-esteem, anxiety, decreased sleep quality, desire to hurt themselves to suicide. Students experienced moderate intensity bullying behavior tended to experience moderate depression by 66.7%, and of those who experienced mild intensity *bullying* behavior, 33.3% experienced mild depression.

Bullying problems and cases that occur must receive special attention, so efforts are needed to overcome them. One of the efforts that can be made is through health education using video media. Health education through video was chosen because this media is very influential in changing bullying behavior.

Health education through video media has a very good role and helps increase knowledge and attitude changes, especially in emphasizing material that is very important for respondents to know. Educational video media can also facilitate understanding of concepts and absorption of material by students in receiving information delivery, and can help researchers to be able to present material in a directed and interesting manner so that the objectives of the study can be achieved.

Several previous studies have shown that media-based learning methods, including video media, can make a positive contribution to improving students' understanding of health issues including bullying. Therefore, it is important to identify the extent to which the use of video media in health education can influence primary school students' knowledge of Bullying behavior.

Based on the results of research conducted by Higa, educational video media is effective in increasing knowledge and changing attitudes about *bullying* in seventh grade students of SMP Negeri 5 Kupang City. The study provides a theoretical and empirical basis regarding



the impact of *bullying* and its prevention efforts, including the role of media in health education.

METHOD

This type of research is a Quasi experiment with a pretest-posttest without control group design. In this study, video media health education about bullying will be given to respondents. The health education intervention was conducted by researchers to fifth grade students of SDN Cisarua for 10 minutes and repeated 3 times to test the effect of the intervention. The population in this study were all fifth grade students at SDN Cisarua, West Bandung Regency, totaling 70 people. This study used a sampling technique with total sampling. The research instrument used a knowledge questionnaire about bullying in the form of a guttman scale with 17 statement items with correct and incorrect answer options. This research has been conducted at SDN Cisarua, West Bandung Regency, data collection will be taken in March 2024.

The forms of ethics carried out by researchers are: *Ethical clearance*: The *Ethical Clearence* process has been carried out at STIKes Budi Luhur Cimahi.

Explanation and consent (Informed Consent): In this study, respondents will be given an explanation of the objectives, benefits and all matters relating to the research in writing through so that respondents can decide whether to take part or not. Researchers will give respondents the opportunity to ask questions about explanation that has been given. Confidentiality: Respondents have the right to request that the data provided must be kept confidential. In collecting data, researchers do not include names, and keep the information obtained from respondents confidential. The data obtained can only be processed by researchers and destroyed immediately after not being used. Benefit: Researchers in carrying out research according to research procedures in order to obtain results that are as beneficial as possible for research subjects, such as increasing knowledge, influencing respondents to always maintain oral health. Justice: Respondents are not differentiated in terms of gender, economic status. Each respondent is treated the same as other respondents either before, during or after the study.

RESULTS

UNIVARIATE ANALYSIS

Table 1.Frequency Distribution of Respondents' Knowledge Before Health Education

Knowledge	Frequency	Percentage (%)
Good	9	12,9
Enough	27	38,6
Less	34	48,6
Total	70	100



Based on the data above, it is known that before being given health education, less than half, namely 34 respondents (48.6%) had less than half, namely 27 respondents (38.6%) had enough knowledge, and a small proportion, namely 9 respondents (12.9%) had good knowledge.

Table 2 Frequency Distribution of Respondents' Knowledge After Providing Health Education

Knowledge	Frequency	Percentage (%)
Good	50	71,4
Enough	20	28,6
Less	0	0
Total	70	100

Based on the data above, it is known that after being given health education more than half, namely 50 respondents (71.4%) have good knowledge, and a small proportion, namely 20 respondents (28.6%) have sufficient knowledge.

BIVARIATE ANALYSIS

Table 3 Marginal Homogeneity Test Results

		Good	Simply	Less	P	
Knowledge	Good	9	0	0	9	
Pre (Before)	Simply	26	1	0	27	0,0001
	Less	15	19	0	34	
Total		50	20	0	70	

The results of the analysis of the effect of health education on *bullying* behavior on the knowledge of fifth grade students of SDN Cisarua showed that before health education there were 9 students with good knowledge, 27 students with sufficient knowledge, and 34 students with insufficient knowledge. After being given health education there were 50 students with good knowledge, 20 students with sufficient knowledge and no students with poor knowledge. The results of the analysis using the marginal homogeneity test obtained a value of p = 0.0001 < 0.05, it can be concluded that Ho is rejected, meaning that there is an effect of health education on the knowledge of respondents.

DISCUSSION

Overview Of Fifth Grade Elementary School Students' Knowledge About Bullying Before Being Given Health Education Through Video Media.

The results showed that most of the information before being given well-being instruction was not exactly half, specifically

34 respondents (48.6%) had not exactly 50% of the information, in particular 27 respondents (38.6%) had adequate information, and a little extent, in particular 9 respondents (12.9%) had great information. Information is the consequence of knowing, and this happens after individuals see a specific item. Detecting happens through the human detects, to be specific the feelings of



sight, hearing, smell, taste and contact. Most the human information is acquired through the eyes and ears. Moreover, the variables that impact information are training, broad communications/ wellsprings of data, socioculture, economy, climate, and experience. A person's knowledge arises because of curiosity to seeking experience as well as

one's reasoning and knowledge can affect two aspects, namely positive and negative.

Bullying is also referred to as bullying and violence. Bullying comes from the word merundung, according to the KBBI (Big Indonesian Dictionary), bullying disturbing. According to Surilena, bullying is a negative action carried out repeatedly by a person or group of people that is offensive in nature due to an imbalance of power between the parties involved [31]. Meanwhile, violence according to the KBBI (Big Indonesian Dictionary) is the act of a person or group of people causing injury or death to another person or causing physical damage or other people's property.

Students' knowledge of bullying behavior includes their understanding of the concept of bullying, its negative impacts, and strategies to prevent and respond to bullying. Good knowledge of Bullying behaviors is important to reduce the incidence of Bullying in schools and promote a safe and inclusive learning environment.

Students' knowledge of the dangers of bullying is very low. The level of students' knowledge about the dangers of bullying is very low due to the lack of cognitive function of children (59.7%), which will result in the impact of bullying on the perpetrators of bullying, namely promiscuity, using drugs, and mental health problems. Students' knowledge about bullying is very important to learn and be used as information for children because it can shape behavior

through the process of change. mental complex with changes in beliefs that can affect attitudes, subjective norms.

Overview of fifth grade elementary school students' knowledge about bullying after being given health education through video media.

Based on the data above, it is known that after being given health education more than half, namely 50 respondents (71.4%) have good knowledge, and a small proportion, namely 20 respondents (28.6%) have sufficient knowledge. So it can be concluded that there is an effect of health education through videos about bullying on the knowledge of fifth grade students of SDN Cisarua.

This shows that health education with educational video media about bullying is effective and has an influence in increasing students' knowledge in a short period of time and in accordance with the theory put forward previously. As well as the packaging of interesting material, the way of delivery and the language of message delivery in accordance with age, the level of education an effect on increasing students' has knowledge [6]. In line with the theory put forward by Notoatmodjo, in the health education process there is a mutual influence between various factors, including: learning subjects, teachers, learning methods and techniques, learning aids and materials or materials studied. While output is the result of the learning process, namely in the form of abilities and changes in behavior of the learning subject. The methods used when conducting health education also affect the increase in knowledge.

This study is in line with the results of research conducted by Higa, et all. which



shows that based on the results of data analysis using the Wilcoxon test, a significance value of $\rho = 0.00$ or smaller (<) the value of $\alpha = 0.05$ was obtained.

This shows that there is a change or increase in the knowledge of seventh grade students of SMP Negeri 5 Kupang City, that indicating health education educational video media about bullying is effective and has an influence in increasing students' knowledge in a short period of time and in accordance with the theory previously stated. As well as the packaging of interesting material, the way of delivery and the language of delivery of messages in accordance with age, level of education affect the increase in knowledge of students.

Health education can make students and schoolgirls experience increased knowledge about verbal bullying and that way students and schoolgirls can realize the importance of education about verbal bullying. Students' knowledge about bullying is very important to learn and be used as information for children because it can shape behavior through a complex process of mental change with changes in beliefs that can affect attitudes, subjective norms.

Children at the age of 12-15 years can already think critically and can be invited to solve problems using their minds. This is in line with research by that children who are victims of bullying at the age of 10-12 years and one of the factors for bullying is children aged 6-12 years, because in that period children have begun to be directed to interact with the social environment. This is in accordance with the results of the study that in the intervention group experienced an increase in the number of respondents who were well informed. This is reinforced by one of the factors that influence knowledge, namely mass media / sources of information

in the form of training and providing videos about bullying.

Effect of health education through video media on Bullying on primary school students' knowledge.

Before health education, there were 9 students with good knowledge, 27 with knowledge, sufficient and 34 with insufficient knowledge, according to the analysis of the effect of health education on bullying behavior on the understanding of fifth-grade students at SDN Cisarua. In the wake of being given well-being training, there were 50 understudies with great information, 20 with adequate information. and no with unfortunate details. consequences of the examination utilizing the minimal homogeneity test got a worth of p = 0.0001 < 0.05, it very well may be inferred that Ho is dismissed, intending that there is an impact of well-being schooling on the information on respondents.

The results of this study align with those conducted by Higa that educational video media is effective in increasing knowledge and changing attitudes about bullying in seventh grade students of SMP Negeri 5 Kupang City. The study provides a theoretical and empirical basis regarding the impact of bullying and its prevention efforts, including the role of media in health education. Bullying has a negative impact on both victims and perpetrators. The greatest impact of bullying is experienced by the Victims of bullying tend experience difficulties in socializing, fear of coming to school and missing out on learning. difficulty in focusing learning, which impacts their ability to learn.on their learning outcomes. Based on Yerger's examination, to assist with bettering



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location harassing among understudies, this article researches the causes and results of tormenting in schools and afterward gives information, assets, and help to directors and educators fully intent on diminishing tormenting in schools.

The delivery of messages carried out in health education can not only be done faceto-face but can also be done using one of the media, namely video. With increasingly advanced technology, video media has become one of the alternative methods in disseminating health information. Therefore, the effectiveness of educational video media in increasing knowledge and changing attitudes in junior high school students is closely related to the purpose of video media.

Video media is an intermediary media whose material and absorption are through the senses of sight and hearing so as to build conditions that can make students gain knowledge and skills. The material in the video is packaged in the form of moving image effects with interesting storylines and sound so as to make video media provide a more real picture.

The use of educational video media has a very good role and helps increase knowledge and attitude changes, especially in emphasizing material that is very important for respondents to know.(39-40) Educational video media can also facilitate understanding of concepts and absorption of material by students in receiving information delivery, and can help researchers to be able to present material in a directed and effective manner. Interesting so that the objectives of the study can be achieved. The ability of video media to increase knowledge has also been stated by Sayuti's research which states that video media has better abilities because the use of video media in research can not only describe a moving object accompanied

by interesting sound, but can also present information, explain processes, complex concepts, and can influence respondents. Video media also displays material in a concise, clear, and easy to understand manner so that it can facilitate understanding and strengthen the memory of the respondent.

CONCLUSIONS

Before being given health education, less than half, namely 34 respondents (48.6%) had less than half, namely 27 respondents (38.6%) had sufficient knowledge, and a small proportion, namely 9 respondents (12.9%) had good knowledge. After being given health education more than half, namely 50 respondents (71.4%) had good knowledge, and a small proportion, respondents namely 20 (28.6%)sufficient knowledge. The results of the analysis using the Marginal homogeneity test obtained a p value = 0.0001 < 0.05, it can be concluded that Ho is rejected, meaning that there is an effect of health education on respondents' knowledge.

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