The Animation Video about Pain Management in Ungaran Public Health Center

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Abstract

Immunization is one of the acute painful procedures and cause trauma in infant. Non pharmacologic intervention is pain management 5 (swaddling, side/stomach position, shushing, swinging, sucking). More of moms and parent not understanding about pain management at infant after giving imunization. The purpose of this study was to identify the moms level understanding, so that will be developed information media abaout pain management in infant. The method used are two stage. The first stage to identified respondent characteristic and external factor about moms understanded pain management at infant after immunization and than maked information media. The second stage to tried the animation video about pain management 5S information media. The method used in quasy experiment with pretest postes control group design. The sampling used in 30 moms wint infant get immunization in Ungaran Public Health. Data collected at pre and post test. Then tested by Mann Withnew test. The result showed more respondent (83.3%) at education he results showed that some respondents (83.3%) belonged to the productive age (20-35 years), with the most high school education. The results showed that some respondents had less knowledge about the pain of babies after getting immunizations and how to deal with baby's pain after immunization. Media information expected by respondents is video. There is an effect of the animated video of 5S pain management on infants on understanding 5S pain management in infants in Ungaran Health Center (p value = 0.000). Information media in the form of animated videos is precisely used to improve maternal understanding of 5S pain management in infants.

Keywords: Pain management, animation video, Infant

Introduction

The baby period is an important phase in the growth and development of children and is very susceptible to contracting diseases, especially infectious diseases because the immune system has not been formed and functions optimally(Dilli, Kucuk & Dallar, 2009). The effort that can be done is immunization to prevent disease and death from infectious diseases by actively increasing one's immunity to a disease. (Harrington, A.J.W. & Logan, 2012). However, immunization by injection is one of the most causing pain in infancy. (Jacobson et al., 2001). In addition, routine immunization is the main source of iatrogenic pain in infants and children. Pain that is not treated will have a serious impact both in the short and long term. The purpose of acute pain management is to improve pain, maximize body function and minimize side effects. (Wong et al., 2009)

The intervention to reduced pain consists of two groups, namely non-pharmacological management and pharmacological management. Actions that can be done to manage pain nonpharmacologically. to reduce pain during immunization is a physical intervention method 5S (swaddling, side / stomach position, shushing, swinging and sucking) that can reduce pain during routine immunization. (Sleuwen et al., 2015). .Based on preliminary study data, there are still many mothers who do not understand about the efforts to overcome pain in infants after immunization. One of the factors that influence the success of health education is the use of appropriate information media. The purpose of this study is to produce the right information media and its influence on maternal understanding of pain management in infants.(Kozier,2010). The purpose of this study is to produce the right information media and its influence on maternal understanding of pain management in infants.

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Methods

This study consists of two stages. The first stage was to find out the characteristics of respondents and external factors (information health services) on mothers and about understanding the management of pain in infants and then compiling information media. The second stage was the information media that was compiled was tried out to mothers with babies after immunization with certain treatments. The method used in this study was quasi experiment quasi-experimental. Ouasi experiment or research in this study was to give the treatment of watching an animated video about 5S pain management to the mother. (Ghozali, I, 2010).

The design used in this study was Pretest-Postest Control Group Design. The population in this study were all infants in the Ungaran health center with 200 infants. The first stage was using accidental sampling techniques (30 mothers at Ungaran Health Center). The second stage was taking 30 samples of mothers with infants who were immunizing at the Ungaran Health Center. The sampling technique was purposive sampling. Next the group was divided into control and intervention groups. Data were analyzed using Mann Whitney U-test.

Results

Characteristics of Respondents

Table 1. Frequency distribution of maternal characteristics in Ungaran Health

Center				
Characteristic	frequency	Percentage		
Age (year)				
20-35	25	83.3		
>35	5	16.7		
Education level				
Elementary School	4	13.3		
Junior High School	6	20.0		
Senior High School	14	46.7		
University	6	200		

The results showed that some respondents (83.3%) belonged to the productive age (20-35 years), with the most high school education.

Understanding of Pain Management

Table 2. Frequency distribution of the level of	
understanding of pain management	
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Level of	Frequency	Percentage		
understanding		-		
Knowledge of infant's pain after immunization				
Lower		50		
Good		50		
How to deal with infant's pain after immunization				
Lower		73.3		
~ .				
Good		26.7		
Knowledge of 58	5 3			
pain managemen	t			
in infant				
Lower		100		
Good		0		

The results showed that some respondents had less knowledge about the pain of infant after getting immunizations and how to deal with infant's pain after immunization. All respondents did not know about 5S pain management in infants.

Efforts to Get Information

Based on Table 3, some respondents obtained information on television and the internet, each at 33.3%.

Most respondents expect information in the form of video that was 66.6%.

 Table 3. Distribution of efforts to obtain information source

information source				
Information resources	Frequency	Percentage		
Information resources				
Television	10	33.3		
Internet	10	33.3		
Newspaper	1	3.33		
Social media	9	30		
Form of information expected				
Video	20	66.6		
Poster/leaflet	5	16.6		
Oraly	5	16.6		

The Influence of Animated Video on Understanding 5S Pain Management in Infants Table 4. Effect of animated videos on understanding 5S pain management in infants

Group	Median	Standard Deviation	P Value
Intervention	3.00	0.258	0.000
Control	2.00	0.25	

Based on the results of the study showed an average understanding of post-test in the intervention group 2.93 and in the control group 1.93, with the results of different test data analysis using Mann Whitney test obtained p value of 0.000, so that there was influence animated video on 5S pain management understanding in infants at Ungaran Health Center.

Discussion

The results of this study are in line with the results of Saguni's study, which states that the teaching and learning process using narration and animation is an attractive medium and proven to be effective enough to improve learning outcomes. In accordance with the results of research by Hubeis and Ambarwati, which states that the elements of video packaging that display many images and colors can clarify information and facilitate the appreciation of someone about the information. This is in line with the results of Melina's study which shows that the provision of health education using audio visual media has a better average value compared to leaflet media.

Submission of messages in health promotion is needed by a media so that the message to be conveyed can be received clearly. Videos in conveying the message involve the senses of sight and hearing. There are videos that are long and short in duration. Short duration videos according to Azizah are a part of audiovisual which involves the auditory senses and visual senses so that the interest, attention and concentration of the audience becomes more focused. Lectures with video media used by researchers in information processing involve the sense of hearing and the sense of sight.

The method of health education or health promotion with audio visual media according to

Edgar Dale's theory in Nursalam and Efendi can change a person's behavior, where if using audio visual media one can remember 50% of what is seen and heard, and can change the supporting factors and reinforcement factors, such as the social environment of song guides so that it is expected to increase the motivation of song guides to utilize health services.(Ghozali, 2010).

Health education is basically to increase the degree (welfare), reduce dependence, and improve opportunities for individuals, families, groups and communities to actualize themselves in maintaining optimal health. The purpose of health education is a change in the attitudes and behavior of individuals, families, special groups, and the community in fostering and maintaining healthy life behaviors also play an active role in realizing an optimal degree of health and the output of health education is the ability as the result of change is the healthy behavior of students through health education (Sugiyono, 2011)

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Conclusion

Based on the results of the study of 5S pain management information media development in infants at Ungaran Health Center, the researchers concluded: media information expected by respondents is video and there is an effect of the animated video of 5S pain management on infants on understanding 5S pain management in infants in Ungaran Health Center.

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