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The effectiveness of counseling using videos with demonstrations of dental brushing on improving dental health knowledge of students of SDN 3 Sila in the region remote, disadvantaged by borders and islands (DTPK)

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Abstract

Background: Dental caries is still one of the maximums not unusualplace preventable persistent illnesses in children. Likewise, children at SDN 3 SILA in the Remote, Disadvantaged, Border and Archipelago (DTPK) areas also have the same right to obtain optimal degrees of oral health.

Purpose: The purpose of this study was to determine the effectiveness of counseling using videos accompanied by demonstrations of brushing teeth to increase dental health knowledge of students at SDN 3 Sila in the DTPK area, Bima Regency, NTB, Indonesia.

Material and Methods: This form of studies makes use of a quantitative descriptive approach with a cross sectional approach. The college students who had been sampled on this examine had been magnificence V college students with a complete of 24 people. Education is carried out using a learning approach using educational videos and after that a demonstration of brushing teeth is carried out. Evaluation will be carried out using a pretest and post-test design. analysis test used paired sample t-test with 95% confidence level and processed using IBM SPSS 21.

Results: statistical test paired sample t-test before and after being given counseling showed an increase in students' knowledge and skills (p<0.05).

Conclusion: providing counseling using video media accompanied by a demonstration of brushing teeth can increase students' knowledge so that it can be an effort to improve dental and oral hygiene for elementary school students who live in remote, remote, and island areas (DTPK).

Keywords: Video Media Extension; Dental Health Knowledge; Elementary school students; Caries; DTPK

1. Introduction

Health-associated conduct is stimulated via way of means of know-how and awareness, inclusive of dental and oral fitness. Dental and oral fitness is an necessary element of fashionable fitness that performs an crucial function in kid's lives [1]. A wholesome smile has a good sized have an impact on on social interactions, which play an crucial position in how kids are seen, felt and perceived through another. Dental disorder or dental facial abnormalities convey damaging psychosocial outcomes that have an effect on kids, similarly to interfering with their speech and consuming habits. Changes because of dental caries, each because of ache and aesthetics changes, affecting the first-rate of existence of kids[2]. The provision of fitness schooling, and progressed get entry to to information, is aimed toward enhancing

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information approximately to be had services, the reasons of fitness and illness, and their non-public duty for movements affecting their fitness. There are some of distinctive media to be had to supply fitness care information, together with pamphlets, interactive multimedia, videos, posters and net applications. Health interventions and fitness schooling through DVD/video were proven to offer a convenient, on hand and fee powerful approach to inspire a tremendous alternate and development in affected person behaviour[3].

Elementary schools are potential targets of this intervention to support children in developing healthy behaviors independently [4]. due to the fact approximately one thousand million kids international spend maximum in their day there [5]. However, parental advice and further knowledge about dental health can reduce caries risk in school children. Parents, teachers and dentists are the most important people involved in the dental health education of school children[6].

Dental and oral health, according to the results of the 2018 Basic Health Research (RISKESDAS) by region, recorded the proportion of dental caries in NTB Province of 41.4% and 10% who received services from dental medical personnel[7]. According to the 2017 NTB Provincial Health Profile, the number of permanent tooth fillings was higher than the number of permanent tooth extractions, but the number of permanent tooth extractions in 2017 was still high. This needs to be a concern, because most people choose to extract their teeth rather than keep them, so it is necessary to provide counseling on how to take good care of their teeth as early as possible[8].

2. Material and methods

This kind of studies makes use of a quantitative descriptive technique, that is a studies technique executed with the principle intention of creating an goal photo or description of a scenario that has to do with the hassle being studied, particularly the effectiveness of counseling using videos accompanied by demonstrations of brushing teeth to increase dental health knowledge of SDN 3 students. please in the DTPK area.

The research approach used in this study uses cross sectional approach, observation, or data collection at one time. Collecting statistics on this observe the usage of a questionnaire approach carried out with the aid of using researchers to magnificence V college students with a complete pattern of 24 people. The steps taken are to do a pretest using a questionnaire about oral health, then the target will be given education Education using video media and training on brushing techniques. Then the target will be given a questionnaire again (Post test) for the assessment of student knowledge.

3. Results and discussion

Table 1 The average value of students' knowledge before and after being given counseling using video media

	Mean	N
Before counseling	7.75	24
After counselling	13.33	24

In table 1 it can be seen that the average value of the pre-test of students before being given counseling with video media is 7.75% and the average value of post-test of students after counseling using video media is 13.33%. From these two results, it is known that before and after being given counseling using video media there was an increase in students' knowledge of 5.98%.

Table 2 The state of knowledge before and after being given counseling with video media

	Sig. (2-tailed)
Before counseling - after counseling	0.000

Table 2 above may be visible that the correlation among the 2 variables is 0.254, which means that the relationship is strong and positive. The existence of this change is supported by the results of statistical tests with Paired TTest obtained p.value = 0.000. This situation shows that Ho is rejected and Ha is accepted, there is a significant difference in

changes in the level of knowledge before and after the group of respondents who were given counseling treatment with video media.

Increased student knowledge because this audio-visual method is very interesting and audio-visual media presents lesson materials using teaching media tools that can listen to, or demonstrate these materials so that students can witness firsthand, observe carefully. The duration of this video playback is done without stopping so that the target's grasping power is very influential on students' understanding and knowledge.

The lifestyles of this situation is according with Edgar dale's idea which says that the greater concrete the media, the higher the goal reputation rate, at the opposite the greater summary a media, the much less reputation rate.

4. Conclusion

This study has recommended the provision of interactive videos as an effort to improve dental and oral hygiene for elementary school students living in the DTPK area. This method can be used in promotions that are given counseling, practice / demonstration of brushing teeth and are accompanied by counseling through videos. In this study, through community service based on this research, it can be proven that there has been an increase in the degree of public health, in accordance with the National Health System, namely efforts to improve health status through increasing community participation as agents of health reform. The results of the study prove that the provision of interactive videos through video media has an effect on improving children's oral and dental hygiene.

Compliance with ethical standards

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Disclosure of conflict of interest

The data published in this manuscript is not a conflict of interest to any party or between the two authors

Statement of informed consent

Written informed consent was collected form the school authorities and parents, and verbal consent was obtained from the subject.

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