Healthy Community Movement (GERMAS) Education on Behavior and Knowledge of STIKes Bhakti Mulia Students

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Article Information	ABSTRACT
Article History 	Healthy Community Movement (GERMAS) is included in promotive and preventive efforts to the community which aims to reduce the burden Infection-related and chronic non-infectious diseases, reduce population productivity can be avoided, and health services can be reduced. The purpose of the study was to determine the effectiveness of GERMAS education on student behavior and knowledge. A quasi-experimental framework with a single group pre- and post-intervention evaluation was adopted in this study. The research sample was STIKes Bhakti Mulia students totaling 40 respondents. The experimental variable in this research is education, the dependent variable in the study is the behavior and knowledge of students. Measurement was carried out using a questionnaire that had been confirmed to be valid and reliable. Data analysis using Wilcoxon test. The research results confirmed that there was an effectiveness of GERMAS education on the behavior (p=0.000) and knowledge (p=0.000) of students. The conclusion of the study is that healthy behavior during adolescence can reduce the risk of chronic diseases in adulthood. Behavior and knowledge must be comprehensively owned by adolescents on several health issues, including nutrition, environmental health, infectious diseases, and health problems.

Introduction

Health promotion aims to strengthen community capacity through self-directed learning initiatives created by and for the community, empowering them to take action independently, while fostering locally-driven programs aligned with cultural values and supported by health-focused policies [1]. Healthy Community Movement GERMAS is a promotive and preventive efforts to improve the health of the community by strengthening the capacity of individuals and communities. [2].

The studies shown are related to health promotion and health behavior, namely that there are differences and

influences between the provision of GERMAS socialization with lecture methods, explanation of material with power points, videos and real objects on GERMAS, knowledge of vegetable and fruit consumption, attitudes, and actions [3]. Similarly, research shows that there is an effect of the GERMAS campaign on changes in health behavior [4].

An individual's understanding is typically shaped by experiences drawn from diverse channels like mass and electronic media, guidebooks, medical professionals, visual aids, and close social circles. According to [5] many are used to obtain knowledge. However, throughout history the ways of gaining knowledge can be grouped into two, namely traditional or non-scientific ways and modern or scientific ways.

Behavior represents the complete spectrum of biological reactions of individuals to their environment, from actions that are highly visible to those that are imperceptible, and from the most easily noticed to the most faintly perceived [6]. Human behavior is influenced by a variety of experiences and environmental interactions, demonstrated in knowledge, attitudes, and actions. It involves the responses or reactions of an individual to stimuli, whether they come from the external world or from internal factors [5].

Behavior refers to actions that can be observed, characterized by a specific frequency, duration, and intent, whether intentional or not. It is the result of various interacting factors and represents a person's response to external stimuli. This concept is captured by the "S-O-R" theory or "Stimulus-Organism-Response".

According to Lawrence Green, the characteristics that exist in respondents such as age are factors that can promote the development of a health behavior. It's just that age basically does not guarantee maturity and maturity of one's thinking [7]. Ideally, the older a person gets, the more experience he has and the impact on his level of knowledge. Age can influence an individual's mindset and this mindset affects a person's behavior. Studies carried out by Safitri et al. (2021) which argues that young age is easier to capture information and is more receptive to all changes in the new order. Meanwhile, adulthood is when the self adjusts to new patterns of life and new expectations. The environment is very influential on individuals because the environment is the land for behavioral development. Behavior is formed through a process in human interaction with the environment. This study aims to determine the effectiveness of GERMAS education on the behavior and knowledge of STIKes Bhakti Mulia students.

Method

This study uses a quasi-experimental design with a one-group pretest-posttest approach on 40 STIKes Bhakti Mulia students who meet the inclusion and exclusion criteria. The inclusion criteria in this study were students who agreed to become research respondents. The exclusion criteria in this study were students who were sick and absent during the study. The study identifies education as the independent variable, and the dependent variable as in the study is the behavior and knowledge of students. Education was given in one group through lecture media with power point in one class, then given a pre test, given time for 4 weeks and carried out a post test with the same measuring instrument. The data collection tool used was a questionnaire. Data analysis was performed using the Wilcoxon test with SPPS 23 program.

Results and Discussion

Table 1 Univariate analysis of study subject characteristics based on age and gender

Variable	Category	n	%
Gender	Female	30	75.0
	Male	10	25.0
Age	< 22 years	16	40.0
	≥ 22 years	24	60.0

Source: Primary Data, 2024

The results of table 1 explain that the gender variable is mostly female as many as 30 respondents (75.0%), and the least male as many as 10 respondents (25.0%).

Table 2 Descriptive analysis of research variables before and after intervention

Variable	Category	Mean	SD	Min	Max	Median
Behavior	Pretest	35.93	7.423	25	48	34.50
	Posttest	47.08	7.040	34	58	47.00
Knowledge	Pretest	15.45	2.264	11	20	15.00
	Posttest	22.28	1.694	19	26	22.00

Source: Primary Data, 2024

The results of table 2 explain that most behavior variables before the intervention had an average of 35.93, then increased after the intervention, namely 47.08. In the knowledge variable before the intervention had an average of 15.45, then increased after the intervention, namely 22.28.

Table 3 Effectiveness of GERMAS education on student behavior and knowledge

Variable	Category	N	Mean Rank	P value
Behavior	Negative	0	0.00	0.000
	Positive	40	20.50	
	Ties	0		
Knowledge	Negative	9	7.33	0.000
	Positive	29	23.28	
	Ties	2		

Source: Primary Data, 2024

The results of table 3 explain that there is an effectiveness of GERMAS education on the behavior (p=0.000) and knowledge (p=0.000) of students. In the behavior variable, the overall value of behavior before and after increased, namely 40 respondents, and there was no behavior that decreased or was the same before and after the intervention. In the knowledge variable, the value of knowledge increase before and after the intervention was 29 respondents, respondents who experienced a decrease before and after were 9 respondents. And respondents who had the same knowledge value before and after were 2 respondents.

The adult age range is a productive age or has maturity both physically and psychologically so that receiving information is getting better. In addition, in adolescence or entering school age is an age where respondents are still in the formal learning process, directly or indirectly adolescents are more often exposed to information about health protocols through social media, supporting applications such as

TikTok applications, Facebook, Group WhatsApp and others can provide information related to health protocols, which can help expand the knowledge of school-age adolescents in increasing knowledge [9].

Gender has a lot to do with determining a person's attitude and behavior. Some studies also show that women are better able to implement policies. Women are also more compliant with existing rules or regulations. This is in line with Wiranti's research (2020) with the results of statistical tests also showing a relationship between gender and community compliance with PSBB policies in Depok City (p = 0.005). Through the role of women as housewives, cadres, and community leaders, they can participate in socializing the movement to comply with PSBB policies to reduce the spread of disease.

According to gender, the study's results demonstrated that respondents with a favorable attitude towards health protocols implementation behavior were mostly carried out by female respondents. This situation could be attributed to the differing characteristics of each gender. Women are often characterized by their caring disposition, sense of responsibility for others' welfare, and gentleness. Meanwhile, men tend to be aggressive, adventurous, rude, like discretion and are more willing to take risks. In this context, one of the risks is the risk of contracting a disease. So that this difference in nature can cause women to be more afraid to break the rules [11].

The findings of this study suggest that age is a factor associated with disease-related behavior. These results align with Prihanti's research, which indicates a relationship between age and clean and healthy living behavior (p = 0.000) [12]. In accordance with the

theory of Iskriyanti, age is one of the factors that describe physical, psychological and social maturity and at least influence the learning process [13]. Increasing age makes a person more mature or mature and his sense of responsibility and concern increases. Students who have a more mature age feel a sense of responsibility and concern for themselves and the environment increases. He will mobilize other students to keep the merchandise and environment clean, and apply 3M in the campus environment.

According to Lawrence Green, the characteristics that exist in respondents such as age are factors that can support the cultivation of healthy habits. It's just that age basically does not guarantee maturity and maturity of one's thinking [7]. Ideally, the older a person gets, the more experience he has and the impact on his level of knowledge. Hartono (2015) states that age can impact a person's thoughts, which, in turn, shape their behavior. In contrast to research conducted by Safitri et al. (2021) who argue that young age is easier to capture information and is more able to accept all changes in the new order. Meanwhile, adulthood is a time when the self adjusts to new patterns of life and new expectations.

H.L. Bloom outlines four major factors affecting public health, one of which is the behavioral aspects within the community. Benyamin Bloom categorizes behavior into three domains: cognitive (knowledge), affective (attitude), and psychomotor (practice), all of which are interrelated [11].

According to Rogers' research, knowledge affects health behavior in the community, suggesting that behaviors rooted in knowledge last longer than those lacking it. However, the process of behavior formation often deviates from these stages. Numerous factors can

influence behavior, meaning individuals may demonstrate positive practices even with inadequate knowledge or negative attitudes.

Knowledge increases starting with the individual starting to realize (awarnes) the object (stimulus) that exists. Then individuals will be interested in the object [14]. In the final stage individuals begin to consider (evaluation) actions, whether good or bad against the stimulus that has been received. Increased knowledge can be seen from the level of the cognitive domain, namely knowing (know) to measure what has been learned such as definitions, statements and descriptions. Then continue the stage of understanding (comprehension), which is able to explain the material again, can make conclusions and present examples of the material that has been conveyed.

According to Yanti's (2020) research, which is in line with the results of this study, 99% of the Indonesian population has good knowledge, 59% maintain a positive attitude, and 93% show good behavior toward disease prevention efforts, especially social distancing. According to [16] Good knowledge is supported by the information circulating within the community about diseases. With this understanding, individuals are able to make informed decisions on how to approach the disease. Simply put, when someone possesses knowledge about a disease, they can choose how to act towards it [17].

Human behavior can be categorized into cognitive, affective, and psychomotor domains, which are used to assess health education outcomes such as knowledge, attitudes, and practices. Knowledge plays a pivotal role in influencing behavior. Once an individual encounters a health stimulus, they assess it based on their knowledge, which then guides their behavior.

Hence, individuals with higher knowledge levels are more likely to demonstrate better behavior than those with lower knowledge [11]. In conclusion, people with higher knowledge levels are generally more inclined to demonstrate good behavior.

Conclusion

Healthy Community Movement (GERMAS) education is effective in improving students behavior and knowledge about health. It is recommended that similar education be carried out periodically to form healthy living behavior.

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