

The Effect of Health Promotion through Video Media on HIV/AIDS Stigma among Adolescents

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ABSTRACT

Background: HIV/AIDS is both a health and social issue, as its spread is heavily influenced by people's behaviors and knowledge. According to WHO data from 2022, 20 million adolescent females and 17.4 million adolescent males were infected with HIV. Meanwhile, data from the Indonesian Ministry of Health (Kemenkes RI) in 2022 reported that 741 adolescents were diagnosed with HIV. In its efforts to combat HIV/AIDS, the Indonesian Ministry of Health is committed to achieving the "3 Zeroes" targets: zero new HIV infections, zero stigma and discrimination, and zero AIDS-related deaths. Video serves as a medium for delivering information and messages, which focuses on promoting health programs by prioritizing education, engaging health information, and effective communication. **Aims:** This study aims to investigate the effect of health promotion using video media on HIV/AIDS stigma among adolescents. **Method:** This study employed quantitative method with pre-experimental design. The sample consisted of 38 respondents selected through purposive sampling. A video about HIV/AIDS and a questionnaire were used as instruments. This study utilized a one-group pretest-posttest design with the Wilcoxon statistical test. **Result:** The results showed that health promotion through video media had a significant effect on reducing HIV/AIDS stigma among adolescents. The p -value is $0.000 < 0.05$, which indicated that the (H_0) was rejected, and the (H_a) was accepted. **Conclusion:** There was a reduction in stigma following the health promotion using video media.

Keywords: Health Promotion, Video Media, HIV/AIDS Stigma

INTRODUCTION

Human immunodeficiency virus (HIV) is a virus that attacks the human immune system while acquired immunodeficiency syndrome (AIDS) is a group of disease symptoms resulting from the weakening of the immune system due to HIV infection (UNAIDS, 2019).

Based on WHO 2022 data, there are 39.0 million people infected with HIV/AIDS and 630 HIV-related deaths worldwide. As many as 20 million adolescent girls and 17.4 million adolescent boys are infected with HIV. The National Narcotics Agency (BNN) reports that in 2022 there were 62,856 HIV infections in humans and 741 people diagnosed with HIV among adolescents. According to the DIY Health Office in 2022, there were 6,214 people infected with HIV and 1,966 people with AIDS. In addition, Sleman Regency had 1,360 HIV-infected cases. The Sleman Health Office recorded 188 HIV infections in the first half of 2023. Of these, 41 people already had AIDS.

The high rate of HIV and AIDS infection is certainly inseparable from the

problem of discrimination against people with HIV, which often hampers efforts to reduce the incidence of HIV and AIDS. Stigma itself leads to discrimination, which is the assessment of a person based on their HIV status, both certain and estimated, or their health status (Mardhatillah *et al.*, 2021).

Adolescents are 1.5 times more likely to be stigmatized than adults. One of the factors that influence the occurrence of stigma towards PLWHA among adolescents is knowledge (Rahmawati, 2019). Stigma toward PLWHA among adolescents is caused by the assumption that HIV/AIDS is caused by deviant behavior, promiscuity, and drug abuse. Many people, especially adolescents, act as if they do not want to be friends with people living with HIV because they believe that HIV/AIDS can be transmitted through close proximity, even without having sexual intercourse (Sagitha, 2020).

One of the biggest obstacles to HIV/AIDS prevention in Indonesia is the high level of stigma and discrimination against people living with HIV/AIDS. These barriers will affect the success of the

prevention process, treatment adherence, care, and support for PLWHA. In general, the impact of community stigma leads to feelings of shame and burdened by the condition, in addition to the impact of negative emotional responses such as low self-efficacy and social isolation behavior (Kurniawan, 2019). Seeing the facts that have been described previously, it is important to convey information related to HIV/AIDS and stigma against PLWHA to adolescents from the beginning, where the early adolescent age group is in the junior high school education period which has an age ranging from 13-15 years. In this short period, students experience significant development in their lives, namely physical, social, behavioral, intellectual and moral and are considered the age group most affected by the environment (Ministry of Education and Culture 2016).

One alternative health promotion media that can be used is through HIV/AIDS video media. Video is a medium for delivering information and messages that will refer to the socialization of programs in the health sector, by prioritizing education, information and attractive health communication (Jatmika *et al.*, 2019). Therefore, video media public service advertisements (PSAs) are prosocial messages made with the intent and purpose of raising awareness or influencing to change attitudes or behavior toward a particular problem or cause (Fulton, 2014).

The advantage and effectiveness of using electronic media is that the presentation is attractive, so people will be more focused in paying attention to the delivery of information (health promotion). Electronic media also can be durable and make presentations easier if the topic of conversation needs to be repeated (Widyaningtyas, 2019). concluded that there is a difference between leaflets and videos as health promotion media for HIV and AIDS. Video media is more effective when used as a health promotion tool in various aspects of the health sector. According to research conducted by Yuniastuti (2021), the effective time in using video media for learning is around 5 to 7 minutes.

In the HIV/AIDS response, the Indonesian Ministry of Health is committed to overcoming HIV/AIDS by targeting three zeros, namely no new HIV infections, no stigma and discrimination, and no AIDS

deaths by implementing the STOP program (Suluh, Temukan, Obati dan Pertahankan) (Sabhita *et al.*, 2022).

Efforts to prevent the spread of HIV/AIDS in adolescents can be done by providing reproductive health knowledge, so that adolescents can have a positive attitude toward preventing the transmission of HIV and AIDS (BKKBN, 2015). Most of the prevention and control programs for HIV/AIDS in adolescents focus on improving cognitive factors, including knowledge, covering issues of sexual knowledge, pregnancy, HIV and other sexually transmitted infections (STIs) including prevention methods, perceptions of HIV and STI risks and attitudes toward people with HIV/AIDS (Kirby, 2011).

This research is supported by research (Yuniartin, 2024) showing that there is a significant decrease in community stigma before and after the intervention, with a p-value of 0.001 (<0.05), which indicates that providing health education through animated videos has an impact on community stigma related to HIV / AIDS.

METHODS

Pre-experiment research is what this study is. One Group Pretest-Posttest Design is the format used in this study. Finding out how video media health promotion affected HIV/AIDS stigma among teenagers in class VIII at SMP Negeri 1 Depok Sleman Regency in 2024 was the aim of this research. This research sample technique uses purposive sampling technique, where sampling is based on certain characteristics. As for the inclusion criteria, these are class VIII students, students who are present at school and who are willing to become respondents while the exclusion criteria are students of the PIK-R Management. According to (Arikunto, 2006), if the population is known and the number of subjects is large or more than 100, it can be taken between 10%-15% or 20%-25% or more depending on the ability of the researcher in terms of time, energy and funds. So that this study uses a minimum sample size of the total population of 192 people, then the sample size to be taken is as much as 20%, so the number of samples in the study was 38 respondents. This research design procedure is carried out by measuring the dependent variable from one group of

subjects (pretest), where the subject is given treatment within a certain time (exposure); the second measurement is carried out (posttest) and the pretest measurement results are compared with the posttest results (Sony, 2017). Respondents were given treatment in the form of video media viewing with a duration of seven minutes. The data collection tool in this study used a questionnaire which was tested for validity and reliability by the researcher. The validity test was conducted on 30 respondents with 18 statement items stating that all statements were valid where r count $\geq r$ table, namely ≥ 0.361 and Cronbach's alpha value of 0.956. Data analysis used Wilcoxon statistical test.

RESULTS AND DISCUSSION

Respondents' Characteristic

Table 1. Characteristics of respondents based on gender and age at SMP Negeri 1 Depok in 2024 (n=38)

No	Characteristics	Respondent (N)	Percentage (%)
1	Gender		
	Male	18	4.37
	Female	20	52.63
	Total	38	100
2	Age		
	13 y. o	18	47.37
	14 y. o	20	52.63
	Total	38	100.0

Source: Primary Data, July 2024

Table 1. shows that the characteristics of the 38 respondents were mostly female, totaling 20 respondents (52.63%) and most of the respondents were 14 years old, totaling 20 respondents (52.63%). Gender is one of the factors that influence stigma. This is because women are more at home than men, making it difficult to get all sources of health information, especially HIV/AIDS (Yuniartin, 2024). This study is in line with research from (Baroya, 2017) that women are twice as likely as men to stigmatize and discriminate against people with HIV/AIDS.

Table 2: Distribution of HIV/AIDS stigma among adolescents before and after intervention with video media at SMP Negeri 1 Depok

No	Category Stigma	Pretest		Posttest	
		N	%	N	%
1	High	10	26.32	0	0.00
2	Medium	22	57.89	4	10.53
3	Low	6	15.79	34	89.47
	Total	38	100.0	38	100.0

Source: Primary Data, July

Based on Table 4.2, stigma in adolescents before and after being given HIV/AIDS video media health promotion has decreased. Pretest research results obtained the highest number in the moderate stigma category totaling 22 respondents (57.89%), while in posttest research the most stigma was low stigma totaling 34 respondents (89.47%).

Stigma is a negative trait attached to a person's personality due to environmental influences. Stigma itself leads to discrimination, which is the assessment of a person based on their HIV status, both certain and estimated, or their health status (Mardhatillah *et al.*, 2024). HIV/AIDS has caused various responses in the community who are afraid of being infected, causing stigma and discrimination, resulting in high cases of HIV and AIDS (Airlangga, 2019).

The lack of knowledge about HIV/AIDS has led to the emergence of bad labeling, resulting in discrimination against ODHA. Stigmatization and discrimination against PLWHA lead to a decrease in the physical and mental quality of ODHA (Syukaisih and Oktaviany, 2022).

Stigma against ODHA among adolescents is caused by the assumption that HIV/AIDS is caused by deviant behavior, promiscuity, and drug abuse. Many people, especially teenagers, act as if they do not want to be friends with people living with HIV because they believe that HIV/AIDS can be transmitted through close contact, even without having sexual intercourse (Sagitha, 2020)

This knowledge can be obtained by adolescents through various channels of information, one of which is through social media. Social media is a useful channel for delivering various information, including health information, disease prevention messages, and health promotion (Budiman *et al.*, 2020). Compared to getting information sources from parents, adolescents generally prefer social media such as types of social networking media (Facebook, Line, WhatsApp, Twitter) sharing media (YouTube, Instagram) and

others as a source of sexual information. This is because they think that social media will provide a more interesting picture of sexual wants and needs than through parents (Solehati et al., 2019).

The right strategy in HIV/AIDS prevention is to provide accurate information about the characteristics of the disease, how it is transmitted, and how one can reduce the risk. Health education media that can be used is video media. In addition to being a medium for entertainment and communication, video media can also be used as an educational medium that is easy for people to understand, from children to adults (Tanof, Manurung and Purnawan, 2021).

Efforts to reduce the rate of spread of HIV/AIDS among adolescents is by providing health promotion. Through

health promotion about HIV/AIDS, adolescents will get the right information about HIV/AIDS. In providing health promotion for adolescents, the selection of appropriate methods and media is needed. The media to be used in this health promotion is audiovisual media in the form of videos (Maya et al., 2024). The use of video media has an impact on education and health by using the target's sense of hearing and vision. Then the message conveyed through the video is fast and easy to remember and can develop the imagination of adolescents (Yuandari and Rahman, 2022).

Table 3. Wilcoxon test analysis of the effect of video media health promotion on HIV/AIDS stigma in Class VIII adolescents at SMP Negeri 1 Depok

		Ranks		
		N	Mean Rank	Sum of Ranks
Posttest - Pretest	Negative Ranks	0 ^a	.00	.00
	Positive Ranks	38 ^b	19.50	741.00
	Ties	0 ^c		
	Total	38		

Source: Primary Data, July 2024

Test Statistics^a

	Posttest - Pretest
Z	-5.374 ^b
Asymp. Sig. (2-tailed)	.000

Based on Table 3. above, it can be explained that the results of the rank data analysis are that all respondents experienced an increase in the posttest score. The results of the statistical analysis of the Wilcoxon signed-rank test show the results of the p value <0.000, α <0.05 so that H_a is accepted. This shows that there is an effect of video media health promotion on HIV/AIDS stigma among adolescents in Class VIII SMP Negeri 1 Depok.

Video media is one of the preferred media when delivering information about the prevention and transmission of HIV/AIDS. The advantage and effectiveness of using this electronic media is an interesting presentation, so that people will be more focused on paying attention to the delivery of information (health promotion). (Widyaningtyas, 2019) Video media is more effective when used as a

health promotion tool in various aspects of the health sector.

Educational media with video has its own advantages, namely being able to display moving images that other learning media do not have, the concept of the story is packaged as a subject matter in learning and the material used, can be long and difficult to convey orally. But presented in the form of films and videos, it is easy for students to understand (Stüwe and Wegner, 2020). This was evident in this study when health education delivered through video media could be accepted more easily, resulting in a significant increase in knowledge. As a health worker, it is important to be able to see the opportunities of health education videos as an appropriate intervention in increasing public knowledge about health in various age groups (Aisah et al, 2021).

This study is in line with research (Putri et al., 2022) that video is one of the

preferred media when delivering information about HIV/AIDS prevention and transmission.

CONCLUSION

The stigma of Class VIII adolescents at SMP Negeri 1 Depok before being given video media health promotion on HIV/AIDS was mostly in the moderate stigma category as many as 22 respondents (57.89%).

The stigma of Class VIII adolescents at SMP Negeri 1 Depok after being given video media health promotion on HIV/AIDS is mostly stigma in the low stigma category as many as 34 respondents (89.47%) which shows that there is a change and decrease in adolescent stigma after being given HIV/AIDS video media health promotion.

There is an effect of video media health promotion on HIV/AIDS stigma among adolescents in Class VIII SMP Negeri 1 Depok in 2024 with a p value = 0.000, $\alpha < 0.05$ so that H_a is accepted and H_0 is rejected.

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