

Efektivitas Edukasi dengan Video dan Permainan Interaktif Terhadap Peningkatan Pengetahuan, Sikap dan Praktik Kesehatan Gigi dan Mulut Anak Disabilitas Rungu = Effectiveness of Education with Video and Interactive Games on Increasing Oral Health Knowledge, Attitude and Practice of Children with Hearing Disability

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Abstrak

Latar Belakang: Kesehatan gigi dan mulut merupakan salah satu hal yang perlu diperhatikan pada dengan keterbatasan pendengaran. Untuk meningkatkan kemandirian dalam menjaga kesehatan gigi dan mulut, diperlukan sebuah metode edukasi kesehatan gigi yang efektif. Penelitian bertujuan untuk menguji metode edukasi penayangan video bahasa isyarat dan permainan kartu interaktif terhadap pengetahuan, sikap dan praktik kesehatan gigi dan mulut anak disabilitas rungu.

Metode: 40 anak disabilitas rungu pada sebuah sekolah khusus tunarungu dibagi secara acak ke dalam dua kelompok. Kelompok 1 mendapatkan intervensi edukasi penayangan video bahasa isyarat dan kelompok 2 mendapatkan intervensi edukasi permainan kartu interaktif. Pengetahuan, sikap dan praktik kesehatan gigi dan mulut anak disabilitas rungu dinilai dengan kuesioner, dan status kebersihan gigi dan mulut dinilai dengan indeks Oral Hygiene Index-Simplified (OHI-S) sebelum dan sesudah intervensi dilakukan.

Hasil: Terdapat hasil signifikan pada peningkatan sikap dan praktik pada kelompok penayangan video, dan hasil signifikan pada peningkatan pengetahuan, sikap, praktik dan penurunan skor OHI-S pada kelompok permainan kartu dalam interval 1 bulan.

Kesimpulan: Kedua jenis intervensi dapat digunakan sebagai metode edukasi pada anak disabilitas rungu. Edukasi interaktif lebih signifikan dalam meningkatkan pengetahuan, sikap, praktik kesehatan gigi dan mulut serta menurunkan skor OHI-S.

.....Background: Oral health is one thing that needs to be considered in children with hearing impairments. To increase independence in maintaining oral and dental health, an effective dental health education method is needed. The aim of the study was to test education with video and interactive games method on the increase of oral health knowledge, attitudes and practices of children with hearing disabilities.

Method: 40 children with hearing disabilities in a special school were randomly divided into two groups. Group 1 received a one-way educational intervention by showing video with sign language and group 2 received an interactive educational intervention by playing cards game. Oral health knowledge, attitudes practices of children with hearing disabilities were assessed by a Knowledge-Attitude-Practice questionnaire, and oral hygiene status was assessed by the Oral Hygiene Index-Simplified (OHI-S) index before and after the intervention was carried out.

Results: There were significant results in increasing attitudes and practices in the video group, and significant results in increasing knowledge, attitudes, practices and decreasing OHI-S scores in the interactive card game group after 1 month interval.

Conclusion: Both type of interventions can be used as educational methods for children with hearing disabilities. Interactive education is more significant in increasing knowledge, attitudes, dental and oral health practices and decreasing OHI-S scores.