



The Effectiveness of Posters and Videos About Prevention of Dengue Hemorrhagic Fever (DHF) on Community Knowledge and Attitudes in The Working Area of Paal V Puskesmas Jambi

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Abstract. Background: The Ministry of Health reported that in 2022 there were approximately 143,000 cases of dengue fever in Indonesia. According to data from the Jambi Provincial Health Profile in 2022, there were 1,381 cases of DHF, which caused 9 deaths, based on data from the Jambi City Health Office, the highest number of DHF cases in Jambi City in 2022 was 36 cases at the Paal V Health Center. The Paal V Health Center has made efforts to eradicate DHF, but cases still appear high, this is influenced by several factors such as knowledge and attitudes. The purpose of this study was to determine the effectiveness of posters and videos on dengue prevention on the knowledge and attitudes of the community in the working area of Puskesmas Paal V, Jambi City. Methods: Quantitative research design with an experimental approach. Total samples of 30 poster media and 30 video media were selected using accidental sampling technique. The variables in this study are poster media, videos, knowledge and attitudes. Data collection using questionnaires and data processing in the form of bivariate and univariate analysis. The test used in this study is the Wilcoxon test if the data is not normally distributed and the paired t-test if the data is normally distributed. Results: There is an effect of posters and videos on knowledge with a p-value of poster media (p-value=0.001) and video media (p-value=0.001). There is an effect of poster and video media on attitude with a p-value of poster media (p-value=0.049) and video media (p-value=0.041). Conclusion: Based on the results of the research that has been done, video media is more effective than poster media on knowledge and attitudes about the prevention of dengue hemorrhagic fever (DHF). Therefore, in order to use video media as a medium in conducting counseling about dengue hemorrhagic fever (DHF).

Keywords: Poster, Video, Knowledge, Attitude, Dengue Hemorrhagic Fever (DHF)

1. INTRODUCTION

The World Health Organization (WHO) in 2023 defines dengue hemorrhagic fever (DHF) as a pathological condition resulting from a viral infection, caused by dengue virus (DENV). WHO (2023) states that currently, about half of the world's population is at risk of dengue fever, with an estimated 100-400 million infections each year. The incidence of dengue fever has seen a marked increase globally in the last few decades. The highest recorded cases of dengue fever globally occurred in 2019 (World Health Organization, 2023).

The Ministry of Health of the Republic of Indonesia in the 2022 Annual Report on Dengue Fever said that by the end of 2022, there were around 143,000 cases, with the highest incidence occurring in the provinces of West Java, East Java, and Central Java. In the same year, larva testing was conducted in 23,829 out of 84,502 villages (28%) in Indonesia, and the results showed that most (14,936 villages, 63%) were declared at risk of DHF. So even though 94.6% of >46 million houses were declared free of mosquito

larvae, the incidence of dengue hemorrhagic fever remains high (Samad I, Handito A, Sugiarto A, Setiani E, Gunawan D, Silalahi FSM, 2022).

According to data obtained from the Jambi Province Health Profile in 2022, there were 1,381 cases of dengue hemorrhagic fever (DHF), which caused 9 deaths. Based on data from the Jambi Provincial Health Profile, Jambi City has the highest Dengue Fever cases out of 20 Puskesmas, which is 298 cases. Data from the Jambi City Health Office, which is contained in the data on the number of dengue hemorrhagic fever (DHF) cases in Jambi City in 2022, shows that the Paal V health center has the highest incidence of dengue fever, namely 36 cases (Dinkes Provinsi Jambi, 2022).

DHF prevention efforts carried out by the Indonesian Ministry of Health focus on vector control which requires direct community involvement. DHF prevention can be done by conducting fogging, mosquito nest eradication efforts that involve strategies from “3M Plus” (Draining, Closing, and Recycling), larva monitors (Jumantik), and the implementation of the 1 house 1 jumantik movement (Kementerian Kesehatan RI, 2019). However, dengue cases are still relatively high and the community is still difficult to implement and carry out dengue prevention independently. This occurs due to several factors, one of which is behavioral factors, where these behavioral factors are influenced by knowledge and attitudes. This study aims to determine the effectiveness of posters and videos on the prevention of dengue hemorrhagic fever (DHF) on the knowledge and attitudes of the community in the Paal V PHC working area of Jambi City (Dawe, Romeo, & Ndoen, 2020).

2. LITERATURE REVIEW

Knowledge is defined as the term for when someone recognizes something (Nurmala et al., 2018). Knowledge involves elements consisting of the knowledge itself, namely the subject who has the awareness to know something, as well as the object which is the thing that is the focus of knowledge (Rachmawati, 2019). According to Sudarminta (2012), there are aspects that can affect knowledge, namely aspects of memory, experience, interest, curiosity, thought processes and reasoning, logic, language and human needs (Sudarminta, 2012). Notoatmodjo (2002) states that there are variables that affect knowledge, namely level of education, sources of information, culture and experience. (S. Notoatmodjo, 2002). Broadly speaking, there are 6 levels of knowledge,

namely knowing, understanding, application, analysis, synthesis, and evaluation. (Mahendra, Jaya, & Lumban, 2019).

Attitudes are responses or reactions that arise in response to certain objects or stimuli, attitudes that arise in the form of emotional responses to social stimuli. In the context of everyday life, attitudes do not involve concrete actions or activities, but rather a basic tendency or orientation towards a behavior (Mahendra et al., 2019). Attitude formation is influenced by several factors, including complex personal experiences, the influence of others, cultural factors, mass media, educational or religious institutions, and emotional factors (Rachmawati, 2019). Attitude consists of 4 levels, namely accepting, responding, appreciating, and being responsible (Mahendra et al., 2019).

Knowledge and attitudes are influenced by several factors such as education and information media. Both factors can be pursued through health promotion as an effort to improve knowledge and attitudes.⁷ Health promotion is an effort to empower the community to improve health status (Jatmika, Maulana, Kuntoro, & Martini, 2019). Notoatmodjo (2005) states that health promotion can be carried out in several ways, one of which is by using health promotion media as an alternative in delivering health messages that are attractively packaged so that targets can easily understand the information provided (Soekidjo Notoatmodjo, 2005). Health promotion media includes various forms, including print media such as posters, leaflets, brochures, magazines, and electronic media such as movies, videos, CDs, and others (Jatmika et al., 2019).

Media acts as a tool to communicate messages to the target so that they can be understood easily. Media in health promotion efforts involves any form of means or effort to convey the message or information desired by the communicator. This media includes various platforms, including print media, electronic media, and outdoor media. It aims to increase the understanding of the target, with the hope of changing their behavior to be more positive. (Mahendra et al., 2019).

Based on Indah and Junaidi's research (2021) which measures the effectiveness of using posters and videos in increasing knowledge and attitudes about fruits and vegetables in Dayah Terpadu Inshafuddin students, it proves that the use of poster and video media can increase students' knowledge and attitudes, and using video media is more effective than posters in increasing knowledge and attitudes about vegetable and fruit consumption. (Indah & Junaidi, 2021).

In the research of Latipatul et al (2023) on efforts to improve the knowledge of the people of Jelebo village, Klaten Regency about dengue hemorrhagic fever also showed the results that after health promotion interventions using posters and videos disseminated using Whatsapp Group (WAG) there was an increase in public knowledge (Masruroh et al., 2023).

Research conducted by Azzahra et al (2022) on the effectiveness of poster and video media on the level of knowledge of anemia in adolescent girls of SMAN 3 Banjarbaru shows that there is an increase in knowledge, but videos have a greater influence than other media because they can foster enthusiasm and motivation. (Azzahra, Eka, & Endang, 2022).

3. METHODS

This research is quantitative and adopts an experimental approach. The experimental approach applied is pre-experiment, by applying a one-group pretest-posttest design. The population of this study is people who live in the Paal V Health Center working area in 2023. The technique used in sampling is accidental sampling technique, with a total sample of 60 people where 30 people will be tested on poster media and 30 people will be tested on video media. The test that will be used is the Wilcoxon test if the data is not normally distributed and the T test if the data is normally distributed. This test is to see the relationship between two variables based on the mean or median value of two groups

4. RESULTS

Distribution of Knowledge Level of Poster Media Respondents

Table 1. Distribution of respondents' knowledge level on posters

Knowledge	Pre-Test		Post-Test	
	n	%	n	%
Good	16	53,3	20	66,7
Less Good	14	46,7	10	33,3

Based on the results of the study in table 1, regarding the distribution of the level of knowledge of poster media, there was an increase, knowledge in the good category at the time of the pre-test amounted to 16 (53.3%) rose to 20 (66.7%) at the time of the post-

test. While knowledge in the poor category decreased from 14 (46.7%) at the pre-test down to 10 (33.3%) at the post-test.

Distribution of Knowledge Level of Video Media Respondents

Table 2. Distribution of respondents' knowledge level on video

Knowledge	<i>Pre-Test</i>		<i>Post-Test</i>	
	n	%	n	%
Good	15	50	21	70
Less Good	15	50	9	30

Based on table 2, regarding the distribution of the level of knowledge of video media, there was an increase, knowledge in the good category at the time of the pre-test amounted to 15 (50%) rose to 21 (70%) at the time of the post-test. While knowledge in the poor category decreased from 15 (50%) at the pre-test down to 9 (30%) at the post-test.

Distribution of Respondents' Attitudes on Poster Media

Tabel 3. Distribution of respondents' attitudes on posters

Attitudes	<i>Pre-Test</i>		<i>Post-Test</i>	
	n	%	n	%
Negative	13	43,3	7	23,3
Positive	17	56,7	23	76,7

Based on table 3, respondents who had a negative attitude at the pre-test amounted to 13 (43.3%) decreased to 7 (23.3%) at the post-test and respondents who had a positive attitude at the pre-test amounted to 17 (56.7%) increased to 23 (76.7%) at the post-test.

Distribution of Respondents' Attitudes on Video Media

Tabel 4. Distribution of respondents' attitudes on video

Attitudes	<i>Pre-Test</i>		<i>Post-Test</i>	
	n	%	n	%
Negative	15	50	10	33,3
Positive	15	50	20	66,7

Based on table 4, regarding the distribution of attitudes on video media, the results showed that respondents who had a negative attitude amounted to 15 (50%) at the time of the pre-test and amounted to 10 (33.3%) at the time of the post-test. Meanwhile, respondents who had a positive attitude at the time of the pre-test amounted to 15 (50%) and at the time of the post-test amounted to 20 (66.7%).

The Effect of Posters on the Prevention of Dengue Fever (DHF) on Knowledge

Tabel 5. The effect of posters on dengue prevention on knowledge

<i>Wilcoxon Signed Ranks</i>					
Knowledge Variable	Ranks	N	Mean Rank	Sum of Ranks	P
Poster					
Knowledge Post-Test-Knowledge Pre-Test	<i>Negative Ranks</i>	4 ^a	8,38	33,50	0,001
	<i>Positive Ranks</i>	20 ^b	13,33	266,50	
	<i>Ties</i>	6 ^c			
	Total	30			

Based on Table 5, regarding the effect of posters on dengue prevention on knowledge, it was found that after the normality test was carried out, it was known that the data was not normally distributed, so the knowledge variable test used the Wilcoxon test. Based on the results of the Wilcoxon test, it was found that the value of negative ranks was 4, positive ranks 20 and ties 6 with a value of (p=0.001) so it can be stated that there is an effect of poster media on knowledge.

The Effect of Video on Prevention of Dengue Fever (DHF) on Knowledge

Tabel 6. Effect of video on dengue prevention on knowledge

<i>Wilcoxon Signed Ranks</i>					
Knowledge Variable	Ranks	N	Mean Rank	Sum of Ranks	P
Video					
Knowledge Post-Test - Knowledge Pre-Test	<i>Negative Ranks</i>	3 ^a	9,33	28,00	0,001
	<i>Positive Ranks</i>	20 ^b	12,40	248,00	
	<i>Ties</i>	7 ^c			
	Total	30			

Based on Table 6, regarding the effect of videos on dengue prevention on knowledge, it was found that after the normality test was carried out, it was found that the data was not normally distributed, so the knowledge variable test used the Wilcoxon test. Based on the Wilcoxon test results, the negative ranks value is 3, positive ranks 20 and ties 7 with a value of (p=0.001) so it can be stated that there is an effect of video media on knowledge.

The Effect of Posters on the Prevention of Dengue Fever (DHF) on Attitude

Tabel 7. The effect of posters on dengue prevention on attitudes

Variable	Group	n	Mean	SD	Beda Mean	t	p-value	95% CI
Attitude	Poster Media							
	Pre-test	30	30,17	2,679	1,167	2,056	0,049	(-2,327)- (-0,006)
	Post-test	30	31,33	2,339				

Based on table 7, regarding the effect of posters on dengue prevention on attitudes, it can be stated that, after the normality test, it is known that the data is normally distributed, so the attitude variable test uses a paired t-test. Based on the results of the paired t-test, it is known that the p-value on the poster media is <0.05 ($p = 0.049$) with a mean pre-test value of 30.17 and a mean post-test value of 31.33 and the t value is 2,056, so it can be said that there is an effect of poster media on attitudes.

The Effect of Video on Prevention of Dengue Fever (DHF) on Attitude

Tabel 8. The effect of video on dengue prevention on attitude

Variable	Group	n	Mean	SD	Beda Mean	t	p-value	95% CI
Attitude	Video Media							
	Pre-test	30	28,83	2,601	1,600	2,138	0,041	(-3,131)- (-0,069)
	Post-test	30	30,43	3,936				

Based on table 8, regarding the effect of videos on dengue prevention on attitudes, it can be stated that, after the normality test, it is known that the data is normally distributed, so the attitude variable test uses a paired t-test. Based on the results of the paired t-test, it is known that the p-value on video media is <0.05 ($p = 0.041$) with a mean pre-test value of 28.83 and a mean post-test value of 30.43 and a t value of 2.138, so it can be said that there is an effect of video media on attitude.

Differences in the Effect of Posters and Videos on the Prevention of Dengue Fever (DHF) on Knowledge

Tabel 9. Differences in the Effect of Posters and Videos on DHF Prevention on Knowledge

Wilcoxon Signed Ranks					
Knowledge Variable	Ranks	N	Mean Rank	Sum of Ranks	P

Poster					
Knowledge Post-Test -Knowledge Pre-Test	<i>Negative Ranks</i>	4 ^a	8,38	33,50	0,001
	<i>Positive Ranks</i>	20 ^b	13,33	266,50	
	<i>Ties</i>	6 ^c			
	Total	30			
Video					
Knowledge Post-Test -Knowledge Pre-Test	<i>Negative Ranks</i>	3 ^a	9,33	28,00	0,001
	<i>Positive Ranks</i>	20 ^b	12,40	248,00	
	<i>Ties</i>	7 ^c			
	Total	30			

Based on Table 9, regarding the difference in the effect of posters and videos on dengue prevention on knowledge, after the normality test, it is known that the data is not normally distributed, so the knowledge variable test uses the Wilcoxon test. Based on the results of the Wilcoxon test, it was found that the negative ranks value on poster media amounted to 4 while on video media amounted to 3 so it can be concluded that video media has more influence on respondents' knowledge. The p-value of pre-test and post-test knowledge variables on poster and video media is 0.001, so it can be said that there is a difference in the effect of poster and video media on knowledge about dengue prevention.

Differences in the Effect of Posters and Videos on the Prevention of Dengue Fever (DHF) on Attitude

Tabel 10. Differences in the Effect of Posters and Videos on the Prevention of DHF on Attitude

Variable	Groups	n	Mean	SD	Beda Mean	t	p-value	95% CI
Attitude	Poster Media							
	Pre-test	30	30,17	2,679	1,167	2,056	0,049	(-2,327)- (-0,006)
	Post-test	30	31,33	2,339				
	Media Video							
	Pre-test	30	28,83	2,601	1,600	2,138	0,041	(-3,131)- (-0,069)
	Post-test	30	30,43	3,936				

Based on Table 10, regarding the difference in the effect of posters and videos on dengue prevention on attitudes after the normality test, it is known that the data is normally distributed, so the test of attitude variables uses paired t-test. Based on the

results of the paired t-test, it is known that the p-value on poster and video media is <0.05 , which indicates that there is a difference in the effect of poster and video media on attitudes about dengue prevention. It can be seen in poster and video media that the more influential in improving attitudes about dengue prevention is video media. This is measured based on the difference in the mean value of the pre-test and post-test where in the poster media the mean pre-test value is 30.17 and the post-test value is 31.33. While in the video media the mean pre-test value of 28.83 rose to 30.43 in the post-test.

5. DISCUSSION

Effectiveness of Poster and Video Media on Knowledge about Dengue Fever Prevention

Based on the results of research on the effectiveness of poster and video media on knowledge, the following results were obtained. The results of research on poster media have increased, the knowledge of 30 respondents at the time of the pre-test was categorized as good, totaling 16 people (53.3%) and 14 people (46.7%), while at the time of the post-test it increased to 20 people (66.7%) with good categories and less good down to 10 people (33.3%). This indicates that there is a change in respondents' knowledge in the good category after being given treatment using poster media which is characterized by an increase in the number of respondents from pre-test to post-test.

Based on the results of research on video media from 30 respondents, at the time of the pre-test as many as 15 people (50%) had good knowledge and as many as 15 people (50%) were less good, while at the time of the post-test respondents with good knowledge amounted to 21 people (70%) and 7 people (30%) were less good. This shows that there has been a change in the knowledge of respondents after being given treatment using video media.

Based on the results of the analysis using the Wilcoxon test, it can be seen that the value of Asymp.Sig. (2-tailed) in the pre-test and post-test of poster media p-value 0.001 (<0.05) with negative rank 4 and positive rank 20 so that there is a difference in knowledge. Asymp.Sig. (2-tailed) on the pre-test and post-test of video media p-value = 0.001 (p-value <0.05) with negative rank 3 and positive rank 20. This indicates that there is a difference in knowledge.

From the explanation above, it can be concluded that video media is more effective than poster media in increasing respondents' knowledge about dengue

hemorrhagic fever (DHF) prevention. This can be seen from the number of video media respondents who were well informed at the time of the pre-test of 15 people experienced a greater increase at the time of the post-test to 21 people compared to the poster media where on the poster media the respondents who were well informed at the time of the pre-test amounted to 16 people increasing to 20 people at the time of the post-test.

This is based on observations made by researchers during the study that when giving poster media, respondents tended to read posters in a hurry, while when giving video media, respondents were more interested in the information in the video and indirectly motivated respondents to pay attention to the video more seriously than reading posters whose information was monotonous.

This study is in line with research conducted by Agustin, et al (2023) who conducted research on the effect of poster media, videos and podcasts on knowledge and attitudes regarding the contents of my plate on non-health students who stated that video media is more effective in increasing knowledge in respondents because videos are not only seen or heard, so that the messages conveyed can attract attention, increase the imagination of respondents and can accelerate understanding of a message comprehensively. When referring to the p-value, the most influential media in increasing knowledge is video media with a p-value (0.001) (Agustin, Kurniasari, & Perihatini, 2023).

This is also in line with research conducted by Chifdillah, et al (2021), which examined the difference in the effect of health education with audiovisual media (video) and visual media on students' knowledge of Covid-19. Based on the results of statistical analysis with the One Way Anova test, it shows that there is a difference in the average knowledge score of the visual and audiovisual media groups with a p-value = 0.000. In the visual media group, the average knowledge score increased by 6.50. While in the audiovisual media group by 8.50. This result shows that the increase in the average knowledge score of the audiovisual media group is higher than the visual media group, because audiovisual media is able to attract the attention of the target to be more focused in following the information transfer process (Chifdillah & Hazanah, 2021).

Research conducted by Niruri, et al (2023) on the effectiveness of media for increasing knowledge and attitudes on clean-healthy living behavior of elementary school students during the adaptation of new habits of the Covid-19 era is also in line with this study which concluded that the highest increase in knowledge and attitudes

was in learning video media ($p < 0.05$), and successively followed by animated video media and electronic poster media. This is because learning video media is easy to use and can explain the material more realistically (Niruri, Rakhmawati, Nurindah, & Farida, 2023).

This study is not in line with research conducted by Fety, et al (2023) regarding the comparison of the effectiveness of health education through poster and video media on increasing the knowledge of climacteric mothers in facing menopause which states that after being given counseling through poster and video media, the use of poster media is more effective. Respondents are more interested in reading, simpler, motivated, and can be enjoyed individually compared to watching videos with a very long duration so that respondents do not understand the material from the video display. The results of paired sample-test statistics for the respondent group before and after counseling through poster media obtained $p: 0.000$ with $p < 0.05$, and for the respondent group before and after counseling through video media obtained $p: 0.31$ with $p < 0.05$ (Fety et al., 2023).

According to Nursalam (2012) knowledge is a very important domain for the formation of a person's actions. Behavior based on knowledge will be more lasting than behavior that is not based on knowledge. Notoatmodjo (2002) says that there are 5 factors that can influence knowledge, namely education, information, culture and experience. One of the factors that cause a person's knowledge about dengue hemorrhagic fever prevention is poor, namely lack of information. For this reason, it is necessary to provide sufficient information for the community regarding the prevention of dengue hemorrhagic fever, especially for people who find it difficult to get information. The information can be obtained through health media (Rachmawati, 2019).

According to Notoatmodjo (2010) health media are all means or efforts to display information messages that the communicator wants to convey so that the target can increase its knowledge which is ultimately expected and change its behavior in a positive direction towards health. Media is divided into print media (booklets, leaflets and posters) and electronic media (television, radio, and video). Video is an electronic media that displays moving images and sound simultaneously to convey information. The advantages of video include its ability to convey messages more interestingly and

effectively through a combination of visuals and audio, as well as facilitating understanding with live demonstrations (Pakpahan, 2021).

Effectiveness of Poster and Video Media on Attitudes About Dengue Fever Prevention

Based on the results of research on the effectiveness of poster and video media on attitudes about dengue prevention can be described as follows. In the results of research using poster media there was a change, namely at the time of the pre-test respondents who had a negative attitude amounted to 13 people (43.3%) down to 7 people (23.3%) at the time of the post-test. The same thing happened to video media respondents, at the time of the pre-test respondents with negative attitudes amounted to 15 people (50%) down to 10 people (33.3%) at the time of the post-test. So it can be said that there is a difference between the pre-test and post-test on both media.

Based on the results of the analysis using the paired t test, in the poster media the mean pre-test was 30.17 and the mean post-test was 31.33 with a p value = 0.049 < 0.05 and a t value of 2.056, while in the video media the mean pre-test was 28.83 and the mean post-test was 30.43 with a p value = 0.041 < 0.05 with a t value of 2.138. This indicates that there is a difference between the pre-test and post-test so that it can be stated that there is a difference in attitude after the pre-test and post-test.

Based on the explanation above, it can be stated that video media is more effective than poster media, this is based on the results of the paired t test where the p value of video media (0.041) is smaller than the p value of poster media (0.049) and the difference in mean pre-test and post-test video media is greater than poster media so that it can be said that video media is more effective than poster media which is statistically proven even though the difference in negative attitude changes from pre-test to post-test is greater in poster media.

This is based on the results of observations that have been made by researchers during the research that when giving poster media, respondents tend to read posters in a hurry, while when giving video media, respondents are more interested in the information in the video and indirectly motivate respondents to pay attention to the video more seriously than reading posters whose information is monotonous.

The study is in line with research conducted by Achjar, et al (2023) on the difference in providing education using poster media and audiovisual media on preventing rabies bites. The researcher said that audiovisual media (video) is more

effective in improving attitudes than poster media because audiovisual media involves all senses of learning, including the senses of hearing and vision. The results of the study before and after education using poster media, the majority of respondents had a moderate attitude (44.2%) to the majority had a good attitude (65.1%). With a p value of 0.000 ($p < 0.05$), it means that there is a difference in value before and after being given education using poster media. However, the results of the study before and after being given education with audiovisual media showed that the majority of respondents had a moderate attitude (53.5%) to the majority had a good attitude (86.0%). With a p value of 0.000 ($p < 0.05$), it means that there is a difference in value before and after being given education with audiovisual media (Achjar, Asih, Lestari, Gama, & Ribek, 2023).

Research conducted by Niruri, et al (2023) which examines the effectiveness of media for increasing knowledge and attitudes on clean-healthy living behavior of elementary school students during the adaptation of new habits of the Covid-19 era. All three educational media are effective in increasing students' knowledge and attitudes significantly ($p < 0.05$). This study concluded that the highest increase in knowledge and attitudes was in learning video media, and successively followed by animated video media and electronic poster media. this can occur because learning video media is easy to use and can explain the material more realistically (Niruri et al., 2023).

Research by Rahmadhayanti, et al (2023) on the effect of using video media on knowledge and attitudes towards choosing snacks in school children also concluded that there was an effect of counseling with the lecture method and video viewing on students' knowledge and attitudes. As well as a p-value of 0.000 and 0.004 or there is an effect of video viewing on student knowledge and attitudes. This can occur because video media is easy to understand and involves all five senses, is more interesting because there are sounds and images, face-to-face, presentation can be controlled and a relatively wider range and can be repeated (Rahmadhayanti, Fathurrahman, & Mas'odah, 2023).

This study is not in line with research conducted by Nurfiriani, et al (2023) which examines nutrition education using animated video media and posters on increasing knowledge of balanced nutrition in adolescents. The study concluded that providing nutrition education with animated video media and posters can have an effect on increasing knowledge related to balanced nutrition in high school / equivalent students in Purwakarta City. However, in poster media there is a high value of knowledge than animated video media. This can be seen from the average value of nutritional knowledge

before giving education with animated video media is 54.80 increased to 86.80 with a p value of 0.000 ($p < 0.05$). While the average value of knowledge before giving with poster media was 45.20 and increased to 91.80 with a p value of 0.000 ($p < 0.05$) (Nurfiriani & Kurniasari, 2023).

According to Notoatmodjo (2012), attitude is a preparation to act or react to objects in a certain environment as an appreciation of the object. Attitude is said to be a response that only arises when individuals are faced with a stimulus. A person's attitude towards an object is a feeling of supporting or favoring (favorable) or feeling unsupportive or impartial (unfavorable) to a particular object. Attitude is a response to respond to an object that is organized through experiences that can influence directly and indirectly on actions or practices (Rachmawati, 2019).

According to Kristina (2007), attitudes are influenced by personal experiences, other people, culture, media, educational institutions and religious institutions, as well as emotional factors. One of these factors, namely the media as a means of communication, such as television, newspapers and videos, is one of several factors above that form the basis for forming attitudes. Video media is a media format that combines moving images and sound to convey information. With its advantages of being able to present content dynamically and interactively, video is able to attract audience attention more effectively than text or static images. Video media is a multisensory media that combines visual and auditory elements that involve various senses so that it can be effective in conveying strong and in-depth messages, besides that video media can upload emotions with strong visuals so that it can affect knowledge, attitudes and behavior (Rachmawati, 2019).

6. CONCLUSION

Based on the results of the study, it can be concluded that poster and video media have an effect on knowledge and attitudes about the prevention of dengue hemorrhagic fever (DHF). There is a difference in the effect of posters and videos on the prevention of dengue hemorrhagic fever (DHF) on knowledge and attitudes and it can be concluded that video media is more effective than poster media.

7. LIMITATION

In this study there are shortcomings or weaknesses, so the researcher realizes that there are limitations during this research, including:

1. At the time of the research, researchers had difficulty finding the right time to conduct interviews with respondents because respondents in this study were dominated by adults (19-59 years old) who had jobs, making it difficult to conduct interviews.
2. Respondents who still have difficulty understanding the questions and statements in the questionnaire.
3. When conducting research, there were still respondents who refused to be interviewed on the grounds of fear, embarrassment and privacy reasons.

8. REFERENCES

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