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The Effect Of The "Healthy Touch" Educational Video On Adolescents' Knowledge And Attitudes Regarding Breast Self-Examination (BSE)

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ABSTRACT

Breast self-examination (BSE), known in Indonesia as SADARI, is an approach for helping women become familiar with breast changes and supporting early awareness of breast health. Adolescents need accessible and understandable health information, and audiovisual education may help communicate this information. This study aimed to determine the effect of the "Sentuh Sehat" educational video on adolescents' knowledge and attitudes regarding SADARI at SMA Negeri 2 Bukittinggi. A pre-experimental study using a one-group pretest–posttest design was conducted from April to July 2026. Thirty female students from grades X and XI were selected through purposive sampling. Data were collected using knowledge and attitude questionnaires that had undergone validity and reliability testing. Because the data were not normally distributed, paired comparisons

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were analyzed using the Wilcoxon Signed-Rank Test at a significance level of 0.05. The mean knowledge score increased from 3.23 before the intervention to 9.67 after the intervention. The mean attitude score increased from 30.37 to 34.33. All 30 respondents showed increased knowledge scores; for attitude, 26 respondents showed an increase, one showed a decrease, and three had unchanged scores. The Wilcoxon test results reported in the thesis were significant for knowledge and attitude ($p < 0.001$). These findings suggest that the "Sentuh Sehat" video was associated with improved knowledge and more positive attitudes toward SADARI among the participating students. The findings should be interpreted in light of the one-group design and the small sample from a single school.

INTRODUCTION

Breast cancer is an important public health issue, and awareness of breast health should be developed through age-appropriate education. Breast self-examination (SADARI) is commonly introduced as a way for women to become familiar with the usual appearance and feel of their breasts and to recognize changes that may require consultation with a health professional. The thesis underlying this article identifies limited knowledge and attitudes regarding SADARI among adolescent girls as the main concern addressed by the intervention.

Adolescence is a relevant period for health promotion because young people are developing knowledge, attitudes, and health-related habits. However, information about breast health may be

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unfamiliar or uncomfortable to discuss. Education should therefore be delivered in a clear, respectful, and accessible format. Health education media can support the communication of health messages and provide learners with information that can be reviewed in a structured way.

Audiovisual media combine spoken information and visual elements, which may help explain health topics in a format familiar to students. The "Sentuh Sehat" educational video was used in this study to provide information about SADARI. The intervention focused on two outcomes: knowledge, measured through a questionnaire, and attitude toward SADARI, also measured through a questionnaire.

The study was conducted at SMA Negeri 2 Bukittinggi, where preliminary information described in the thesis indicated that students' knowledge and attitudes concerning SADARI required attention. The activity was intended to assess whether the educational video was followed by changes in students' questionnaire scores. The expected output was improved knowledge and attitude scores that could inform the use of educational media in school-based health promotion. Because the source document reports a research intervention rather than a separate community-service program, this article presents the intervention and its measured outcomes without claiming broader community-level impacts.

METHODS AND IMPLEMENTATION

This study used a quantitative pre-experimental design with one group measured before and after an educational intervention (one-group pretest–posttest design). The study was conducted at SMA Negeri 2 Bukittinggi during April–July 2026. The participants were 30 female students selected using purposive sampling from grades X and XI. The source thesis reports that 15 respondents were aged 16 years and 15 were aged 17 years.

Data were collected using knowledge and attitude questionnaires that had been tested for validity and reliability, as reported in the thesis. Respondents completed the pretest, received the "Sentuh Sehat" educational video intervention, and then completed the posttest. Knowledge and attitude scores before and after the intervention were summarized using descriptive statistics. The Shapiro–

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Wilk normality test indicated that the data were not normally distributed; therefore, the Wilcoxon Signed-Rank Test was used for paired comparisons with a signisficance level of $\alpha = 0.05$.

The article uses the outcome values reported in the source thesis. Detailed video duration, exact session procedures, and participant feedback beyond the reported questionnaire outcomes were not fully specified in the material used to prepare this article and are therefore not added here.

RESULTS AND DISCUSSION

A total of 30 students participated. The age distribution was balanced: 15 respondents (50%) were aged 16 and 15 (50%) were aged 17. The thesis also reports equal representation from grades X and XI.

Table 1. Respondent distribution by age

Characteristic	n	%
Age 16 years	15	50.0
Age 17 years	15	50.0
Total	30	100.0

The average knowledge score increased from 3.23 before the video intervention (SD = 1.794) to 9.67 after the intervention (SD = 4.79). This represents an increase of 6.44 points in the reported mean score. The increase indicates that respondents answered more knowledge items correctly after viewing the educational video.

Table 2. Mean knowledge and attitude scores before and after the intervention

Outcome	n	Mean before	SD before	Mean after	SD after
Knowledge	30	3.23	1.794	9.67	4.79
Attitude	30	30.37	3.810	34.33	2.796

The mean attitude score increased from 30.37 before the intervention (SD = 3.810) to 34.33 afterward (SD = 2.796), a mean increase of 3.96 points. According to the thesis, the Wilcoxon test showed a statistically significant difference for knowledge and attitude, reported as p = 0.000 in the

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statistical output. This is conventionally expressed as $p < 0.001$ rather than a probability of exactly zero.

Table 3. Wilcoxon Signed-Rank Test summary reported in the thesis

Outcome	Negative ranks	Positif ranks	Ties	Reported significance
Knowledge	0	30	0	P < 0.001
Attitude	1	26	3	P < 0.001

For knowledge, all 30 respondents had higher posttest scores, with no negative ranks and no ties. For attitude, 26 respondents had higher scores, one had a lower score, and three had unchanged scores. These results are consistent with the increase in the mean scores and indicate that the observed change was not identical for every participant.

The findings support the potential usefulness of the "Sentuh Sehat" video as a school health-promotion medium for delivering information about SADARI. An audiovisual format may help organize information and make key messages easier to follow. However, the study design had no comparison group, included only 30 participants from one school, and measured outcomes immediately around the intervention. Consequently, the results show changes among the participating students but cannot establish that the video alone caused the changes or that improvements persisted over time.

The source thesis did not report a separate structured assessment of implementation barriers, student satisfaction, or longer-term behavior. These factors should be considered in future implementation and evaluation. A subsequent program could combine video education with a question-and-answer session, provide opportunities to clarify misconceptions, and evaluate retention of knowledge after a follow-up period. Any health message should also clarify that noticing a breast change is a reason to

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seek advice from a qualified health professional and that education is not a substitute for clinical assessment.

CONCLUSION

Among 30 female students at SMA Negeri 2 Bukittinggi, mean knowledge scores about SADARI increased from 3.23 to 9.67 after the "Sentuh Sehat" educational video, while mean attitude scores increased from 30.37 to 34.33. The thesis reports statistically significant pretest–posttest differences for both outcomes ($p < 0.001$). The results suggest that the video was associated with improved knowledge and attitude in this group. Future use should be accompanied by evaluation in larger and more diverse groups, a comparison group where feasible, and follow-up measurement to assess whether changes are maintained.

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