

Knowledge And Self-Efficacy Of Teachers And Parents In Giving First Aid To Children When Choking In Paud Banjarmasin

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ABSTRACT

Choking causes children to have difficulty breathing, which, if left too long, the body can experience a lack of oxygen, resulting in death. Knowledge and skills are needed for teachers and parents, especially those with early childhood, in the proper handling of choking to increase success and survival rates. Good knowledge makes individuals more confident in the actions they will take. *Self-efficacy* influences the steps a person will take. This study aimed to determine the relationship between teachers' and parents' knowledge and self-efficacy in providing children first aid when they choke at Kindergarten Pembina Banjarmasin. This study used an observational research method with a *cross-sectional approach*. Data collection tool in the form of a questionnaire. The sample used in this study was 83 respondents (consisting of 12 teachers and 71 parents of students). Data analysis will be carried out using univariate analysis with a frequency distribution to see the demographics of respondents and bivariate analysis with *chi-square*. The results obtained were that the majority of 78.3% of respondents had good knowledge, 80.7% of the majority of respondents had high *self-efficacy*, and there was a significant relationship between Knowledge and *Self-efficacy* of teachers and parents in providing first aid for children when choking (p-value 0.000; α 0.05). It is vital to increase knowledge which can later increase *self-efficacy* for teachers and parents in providing choking treatment for children.

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1. INTRODUCTION

Choking is a public health problem and the most common cause of morbidity and mortality in the pediatric population. Choking is one of the leading causes of death in children from 1 to 19 years old (Chang, 2021). If not treated immediately, it can cause loss of consciousness because the body experiences hypoxia and brain ischemia within 3-5 minutes which can later cause death. This condition is a life-threatening emergency where anyone around the victim requires immediate action to save lives. Children are especially at high risk of choking because they have minimal and immature abilities to chew and swallow and have a smaller airway diameter than adults (Bentivegna, 2018). They also have the less cognitive ability to identify and distinguish between edible and choking objects. Children are in the oral phase, where they like to put things they find in their mouths. Food and non-food foreign objects pose a choking threat to children. Children choke on foods such as peanuts, grapes, and candy and small things such as toys, coins, batteries, safety pins, and pins.

The Centers for Disease Control (CDC) 2018 estimated that in 2016 around 255 children aged 0 to 19 years died due to respiratory obstruction caused by food or other foreign objects (Chang, 2021). It was even recorded that more children visited the emergency department because of choking cases at a rate of 20.4 (95% CI: 15.4-25.3) per 100,000 visits from 2001 to 2009, and there was an increase in public health and economic burden due to cases of choking on objects. Foreign. And the actual incidence of choking is likely higher, considering there were underreported cases of not seeking medical care between 2001 and 2016. There were 305,814 non-fatal injuries and 2,347 deaths from choking in children from 0 to 19 years. Children under five account for 73% of deaths from non-fatal injuries and 75% of choking (Bentivegna, 2018). The results of Sidell's study, 2012 showed that the majority of choking cases were male (87%) and aged <5 years (95%), and food was the factor most often associated

with choking (94%), while partially aspirated foreign bodies A significant volume was detected in the right main bronchus (72%).

Prompt administration of first aid in response to choking by teachers and parents will help to reduce the risk of life-threatening complications, length of hospital stay, medical expenses, and death. Issack's research in 2021 showed that there were 224 kindergarten teachers involved in the study. Only 83 (37%) were knowledgeable, and 97 (43.3%) had faced choking children at school. Of these, only 42 (43.2%) provided first aid to victims. Of most respondents, 95.1% had a positive attitude towards choking first aid and 57.1% agreed that choking needs immediate treatment. Multiple logistic regression analysis showed that kindergarten teachers with prior first aid training were 2.9 times more knowledgeable than those without prior (AOR: 2.902, 95% CI: 1.612, 5.227). Choking cases are still a significant cause of childhood morbidity and mortality, so much attention must be directed to choking prevention.

Emergency cases include choking cases, so knowledge, attitudes, and practices are still shallow (Ganfure, 2018). Dewi's research (2018) revealed that self-efficacy could influence individuals to take action to achieve a goal, including *predicting the events to be faced*. *Self-efficacy* theory argues that individuals will engage in health behaviors when they feel confident (Goodall, 2020). And increasing knowledge can increase one's *self-efficacy*. Most parents are unaware of the dangers and effects of choking on children. So it is necessary to do first aid in plugging—lack of knowledge and skills in providing first aid to blocking children among teachers and parents. First aid is an assessment and intervention that can be carried out by the people closest to the child, namely parents and teachers, directly with minimal use and without medical equipment before the victim is taken to the hospital for further treatment. Therefore, it is crucial to have basic knowledge of first aid to stop and prevent the worsening of a choking child. Incorrect handling of choking will worsen the victim's condition and further treatment, such as directing foreign objects or food that causes choking deeper into the respiratory tract so that it is increasingly difficult to retrieve it. Lack of knowledge and the inability of parents to perform first aid is reported as one of the most important causes of focus and death in children with choking (Behboudi, 2021).

2. METHODS

The cross-sectional analytic research approach for 1 month, namely August 2022. The research was conducted at the Pembina State Integrated PAUD Banjarmasin, South Kalimantan. The population in this study were all PAUD teachers and parents of students at the Pembina Negeri Banjarmasin Integrated PAUD. In contrast, the sample used in this study was 83 people (12 teachers and 71 parents of students) taken by total sampling technique. Data was collected using a questionnaire consisting of 2 questionnaires to measure knowledge and *self-efficacy*. A questionnaire to measure *self-efficacy* uses *the General Self-Efficacy Scale* (GSES). The researcher invited all teachers and parents of students and gathered them in the Banjarmasin Pembina State Integrated PAUD Hall, explained the research procedure, and provided an informed consent sheet to be filled out and signed. Respondents were given about 20 minutes to fill out the research questionnaire. The data in the study were analyzed by univariate analysis and bivariate analysis. Univariate analysis shows the proportion of respondents' characteristics, knowledge, and *self-efficacy* in handling choking. Meanwhile, the bivariate analysis uses *chi-square* to determine the relationship between variables.

The research received ethical approval from the Muhammadiyah University of Banjarmasin on September 2, 2022, with the number 277/UMB/KE/IX/2022.

3. RESULTS AND DISCUSSION

Characteristics of respondents based on job category, gender, age, last education, years of service, and Experience in handling choking cases in children at the Integrated State PAUD Pembina Banjarmasin are shown in Table.1. shows that the respondents came from the Pembina Negeri Banjarmasin Integrated PAUD teaching profession, as much as 14.5% (12 people) and parents of students as many as 85.5 (71 people). The sex of the majority of respondents was female, namely 93.9% (78 people), with an average respondent in the age range of 26-35 years of 66.2% (55 people), the highest level of education was tertiary education (D3, S1, S2) as many as 72.3% (60 people), the highest

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number of working years for teacher respondents ranged from > 20 years as many as 83.3% (10 people) and Experience in handling choking cases the majority of respondents had never assisted in choking cases to children as many as 54, 2% (45 people). Most of the respondents, namely 78.3% (65 people), had good knowledge, and most of the respondents had high self-efficacy, namely 80.7% (67 people) (Table.2.). Table.3. showed that as many as 13 respondents (15.7%) with less knowledge had low self-efficacy, and 5 respondents (6.0%) had high self-efficacy. Meanwhile, with good knowledge, three respondents (3.6%) had low self-efficacy, and 62 respondents (74.7) had high self-efficacy. Statistical test results showed a relationship between respondents' knowledge and self-efficacy in providing first aid for children when choking at the Pembina Negeri Banjarmasin Integrated PAUD (p -value = 0.00; α = 0.05). Choking refers to blockage of the upper airway by food or other foreign objects resulting in respiratory distress. Foreign bodies in the upper airway can cause acute obstruction leading to respiratory distress. Carrying out proper handling when choking occurs is an important matter that must be done by parents and teachers as the closest people to children while at school. Knowledge related to first aid is the methods and techniques used to carry out practices related to the prevention and immediate treatment of health emergencies such as choking (Ganfure, 2018). Teachers and parents must be prepared with adequate knowledge to identify cases of choking and provide treatment. Educating teachers and parents is an important component of a public health approach to choking prevention. The importance of parental knowledge about choking hazards is proven to protect children from exposure to choking hazards.

The results of Ganfure's research (2018) show that knowledge, attitudes, and practices are factors that are related to providing first aid to kindergarten teachers in cases of choking, and there is still common knowledge in helping the first case of choking among kindergarten teachers is only reaching (40%). Factors causing an inability to treat emergency patients are failure to recognize risks, referral delays, and lack of adequate means of knowledge and skills to recognize high-risk conditions early (Agustini et al., 2017, Al Mahdi, 2020). Knowledge itself is the most important part for individuals to take action. Based on Experience and research, behavior based on knowledge will last longer than behavior without knowledge (Thalib & Asia, 2020). Good knowledge makes individuals more confident in the actions they will take. Good knowledge can make someone do an action as much as possible. So that it is necessary to increase the knowledge and skills of the community in the effort to provide prehospital first aid by conducting training, counseling, and health education. Wawan & Dewi (2010) said that knowledge has two aspects of one's view of an object: positive and negative. This can determine a person's behavior and attitude. The more positive aspects of the known object or information can direct the individual to a positive attitude toward the object or information. Knowledge of various aspects of the disease is an important part of creating confidence in managing the disease. The level of self-confidence that is felt to complete a task, such as managing an illness, is known as self-efficacy (Mehta et al., 2016, Servant, 2022). Research in India on health education interventions related to knowledge and self-efficacy in the general population applies the Health Belief Model. This psychosocial model focuses on individual attitudes and beliefs to explain and predict health behavior.

Using insights from the Health Belief Model in practical studies has inspired at-risk populations to practice positive health-seeking behaviors. Knowledge helps increase *self-efficacy*, promoting better health practices and health-seeking behavior (Mehta *et al.*, 2016, Rivai, 2018). Increased knowledge through the health belief model can help facilitate increased *community self-efficacy*, *awareness*, and *decision-making*. Dewi (2018) revealed that self-efficacy could influence individuals in taking action to achieve a goal, including *predicting the events that will be encountered*. *Self-efficacy* has factors that can influence it, such as the nature of the tasks faced by individuals, *rewards* given by others, individual status or role in the environment, and information obtained by individuals (Mafrudo, 2015). Patricia (2022.) says individuals with high self-efficacy can solve problems effectively, maximize available opportunities and continue to learn to add information to *be more confident in taking action*. Ghufron and Rini (2014) said *self-efficacy* is one knowledge aspect that most influence everyday life. Gilissen (2020) says individuals with good knowledge with self-efficacy will not easily give up or avoid the tasks or problems they face only if they have tried hard, but the problem cannot be solved. Then they give up; in other words, Individuals are not too anxious and not too optimistic or confident. It's just that they are still in a calm state. Bert Avau's research (2022) examined the impact of stimulation in basic

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life support training on knowledge, skills, and *self-efficacy*. In this study, most nurses with good knowledge had moderate *self-efficacy*. Researchers say good knowledge can encourage nurses to perform cardiac resuscitation actions more confidently. Someone with high self-efficacy will prefer to face the difficulties or problems in front of him and try to solve them well. Whereas someone who has low *self-efficacy* will tend to give up on the problem he is facing. Someone with high *self-efficacy* can encourage someone to be more confident in taking the action that will be given. Whereas someone with low self-efficacy will hesitate to take action (Wu, 2021). Factors driving a person to become more confident with the actions that will be taken are strongly influenced by good knowledge so that individual *self-efficacy* can increase. The better the knowledge, the higher the individual's *self-efficacy* (Desiani, 2017, Yuseran, 2022).

4. CONCLUSION

There is a significant relationship between teachers' and parents' knowledge and self-efficacy in providing children first aid when choking in the Pembina Negeri Banjarmasin Integrated PAUD (p-value 0.000; α 0.05). Most respondents' knowledge of providing children foremost support when plugging at Pembina Negeri Banjarmasin Integrated PAUD was in a suitable category, namely 78.3% (65 people). Most respondents' *self-efficacy* in providing first aid for children when choking at Pembina Negeri Banjarmasin Integrated PAUD had high *self-efficacy*, namely 80.7% (67 people). The results of this research can be used as a guideline for providing knowledge related to first aid through programs providing information and skills with health education lectures and demonstration methods and training related to handling choking cases because teachers and parents must be prepared with adequate knowledge to identify factors that can pose a choking threat and can minimize the occurrence of choking incidents in children. Good knowledge makes individuals more confident with the actions to be taken. The individual's *self-efficacy can influence the individual in taking action to achieve a goal, including in predicting the events to be faced, including providing first aid in cases of choking.*

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