



## **THE INFLUENCE OF HEALTH EDUCATION IN CHOKING VICTIMS ON CHOKING VICTIMS IN CHILDREN**

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### **ABSTRACT**

Choking is a very dangerous emergency, because in a few minutes there will be a complete lack of oxygen so that in just a few minutes the client will lose his breathing reflex, heart rate and death permanently from the brain stem. To prevent complications arising from choking, the mother's skills are needed in treat choking properly. The purpose of this study was to determine the effect of choking victim management health education on the skills of helping choking victims in children. This research method is Experiment or experiment, with a quasi-experimental research design, namely the one group pretest – posttest design. The research sample of 32 mother respondents who had children aged 0-6 years used the Total Sampling technique. The research instrument is a questionnaire. Univariate and Bivariate analysis with prerequisite tests which are divided into "homogeneity test, normality test and hypothesis test". The pretest-posttest results after being tested with the Wilcoxon test showed that 32 respondents were obtained from the Z results obtained at -4,941 with a P value (Asymp. Sig 2 tailed) of 0.000. Then the value of P value  $\leq 0.05$  (Ho rejected, Ha accepted). There is an influence of health education on choking victim management on skills to help choking victims in children. 000. Then the value of P value  $\leq 0.05$  (Ho rejected, Ha accepted). There is an influence of health education on choking victim management on skills to help choking victims in children. 000. Then the value of P value  $\leq 0.05$  (Ho rejected, Ha accepted). There is an influence of health education on choking victim management on skills to help choking victims in children.

**Keywords: Health Education, Skills, Choking**

### **INTRODUCTION**

Choking is a very dangerous emergency, because in a few minutes there will be a complete lack of oxygen so that in just a few minutes the client will lose his breathing reflex, heart rate and permanent death from the brain stem<sup>1</sup>. Choking cases According to data from the World Health Organization (WHO) in 2011 around 17,537 cases most often occur in children aged toddlers (18-36 months). The cause of choking from this incident was 59.5% due to food, 31.4% choking due to foreign objects, and 9.1% the cause of choking was unknown. In the United States, cases < 1 year were found at 11.6%, cases occurred at the age of 1-2 years at 36.2%, occurred at the age of 2-4 years at 29.4%.

The number of choking cases is rarely reported in the community, in Indonesia itself there is no data or research on the incidence of choking in children, but many choking incidents have occurred including January 27 2018 a 7 year old child living in a place in West Java died because he choked on rambutan seeds. In other news, in May 2012 a 13 year old boy died because he ate meatballs at

school. March 10, 2017 in the city of Bogor a man died as a result of choking, the victim's family said that if the victim ate in a hurry, the family immediately took him to the hospital, then he was declared in a coma for days until he finally died.

The impact of choking, among others, in a few minutes there will be a general or overall lack of oxygen so that in just a matter of minutes the client will lose breathing reflexes, heart rate and death permanently from the brain stem<sup>2</sup>.

Choking must be dealt with comprehensively quickly. First aid if a baby is choking or a foreign object is blocked by a combination of back blows and chest thrusts, while choking aid for children can be done by the hemlich maneuver. However, not all mothers or parents are able and have the skills to perform first aid in handling choking. For this reason, the community must know how to provide first aid to a choking victim, by conducting health education or health promotion by medical personnel who are around them.<sup>3</sup>.

Based on a preliminary study by conducting interviews with 10 mothers to ask whether their child had experienced choking or not. The results of the interview found that 6 out of 10 mothers said their child had experienced choking. When their child choked, 2 mothers gave them a drink, 3 mothers put their fingers in their children's mouths to make them vomit, 1 mother asked a neighbor for help. And 4 out of 10 mothers say their child has never choked.

Based on this background, the authors are interested in conducting research on nursing actions entitled "The Influence of Health Education Management of Choking Victims on the Skills of Helping a Choking Child".

**RESEARCH METHODS**

The type of research used is Experiment or experiment with a quasi-experiment research design, namely the one group pretest – posttest design. The population in this study were all mothers who had children aged 0-6 years, totaling 32 respondents. This sampling technique uses a total sampling technique, where the entire population is sampled in this study as many as 32 respondents. The instrument used is a checklist sheet. Data analysis using univariate, bivariate analysis.

**RESEARCH RESULT**

Table 1  
 Distribution of Mother's Age Frequency

No	Age	Frequency	Percentage (%)
1	<20	7	21.9 %
2	21-35	23	71.9%
3	< 35	2	6.2%
Total		32	100



Based on table 1 above, it is known that of the 32 respondents, the most respondents were aged 21-35 years, namely 23 respondents (71.9%).

Table 2  
 Distribution of Mother's Last Education Frequency

No	Education	Frequency	Percentage
1	Preelemenary School	5	15.6 %
2	Junior High School	9	28.1%
3	Senior High School	13	40.6%
4	Bachelor	5	15.6%
Total		32	100

Based on table 2 above, it is known that of the 32 respondents, it was found that the most respondents had recent high school education, namely 13 respondents (40.6%).

Table 3  
 Frequency Distribution of Experiences in Handling a Choking Child

No	Experience	Frequency	Percentage
1	Never	21	65.6%
2	1 time	11	34.4%
Total		32	100

Based on table 3 above, it is known that of the 32 respondents, the most respondents experienced choking children, namely 21 respondents (65.5%).

Table 4  
 Results of the Mean Value of Helping Choking Children Skills

	N	Means
Pretest	32	21.00
Posttest	32	45,66

Based on table 4 above, it is known that the mean or average results of the skills to help a choking child of all respondents during the pretest was 21.00 and during the posttest it increased to 45.66%



with a total of 32 respondents.

Table 5  
Frequency Distribution of Helping Choking Children Skills During Pretest

No	Skills	freq	Percent
1	Positive	18	56.2%
2	Negative	14	43.8%
Total		32	100

Based on table 5 above, it is known that of the 32 respondents, the frequency distribution of Helping Choking Children Skills during the Pretest was 18 respondents (56.2%). With Positive Choking Child Helping Skills Results.

Table 6  
Frequency Distribution of Helping Choking Children Skills at Posttest

No	Skills	freq	Percent
1	Positive	23	71.9%
2	Negative	9	28.1%
Total		32	100

Based on table 6 above, it is known that out of 35 respondents, the frequency distribution of Skills for Helping a Choking Child during the posttest was 23 respondents (71.9%) with positive Skills for Helping a Choking Child.

#### Prerequisite Test Results

##### 1. Homogeneity Test Results

Table 7. Levene Statistics

Levene Statistics	df1	df2	sig.
1.427	5	18	0.262

Based on the results of table 7 above, it is known that the homogeneity test results use the formula *Levene Statistics* seen from the value of Sig. (Significant) or the probability value is 0.262. So, if the Sig. (significant) or probability value  $> 0.05$ , then the data comes from populations that have the same or homogeneous variance.

## 2. Normality Test Results

Table 8. Shapiro-Wilk

	Pretest	Posttest
N	32	32
Means	21.00	45,66
std. Deviation	1,626	4,315
asypm. Sig. (2-tailed)	0.116	0.002

Based on table 8 above, it is known that the Normality Test Results use the Shapiro-Wilk formula seen from the sig. (Significant) value, namely 0.116 during the Pretest and 0.002 during the Posttest. So if the significant value  $< 0.05$  then the data distribution is not normal.

## 3. Results of Hypothesis Testing

Table 9. Wilcoxon Signed rank test

	Pretest – Posttest
Z	-4,944a
asypm. Sig. (2-tailed)	.000

Based on table 9 above, it is known that if the data is not normally distributed, then the Non-Parametric Wilcoxon signed rank test is used in the table above, which is seen from the sig value. (Significant) is 0.000. So if the P value  $\leq 0.05$  ( $H_0$  is rejected,  $H_a$  is accepted) which means that there is an influence of Health Education on Choking Victim Management on the Skills of Helping Choking Victims in Children.

## DISCUSSION

### 1. Skills for Helping a Choking Child during the Pretest

Based on the results of Table 5 it is known that of the 32 respondents, the frequency distribution of the Skills for Helping a Choking Child during the Pretest was 18 respondents (56.2%) with positive Skills for Helping a Choking Child. These results are supported by the research of Rini Ernawati, Siti Khoiroh, and Marjan Wahyuni with the title "Increasing Knowledge and Skills of Aba Kindergarten Teachers Against Choking Hazards (Choking)". % and at the posttest it became 70.2% after counseling.

Skill level is influenced by9: Level of Education, i.e. the higher a person's level of education, the better the knowledge he has, so it will be easier to accept the information obtained9. Age, that is, the older a person is, the more mature they are in thinking. And Experience is

The experience gained by a person can be used as the basic capital to be better than before.

According to the researcher's analysis, it was concluded that the Skills of Helping Choking Children at the Sindang Barang Health Center, Bogor City, need to be improved in order to prevent deaths from choking.

## **2. Results of Helping Choking Children Skills during the Posttest.**

Based on table 6 it is known that of the 32 respondents, the frequency distribution of Skills for Helping a Choking Child during the posttest was 23 respondents (71.9%) with positive results for helping a choking child.

These results are supported by Ayu Siti Oktavia's research entitled "Effectiveness of Providing Health Education Using the Demonstration Method on Mother's Skills in Handling Choking in Children Aged 2-5 Years at Pembinaan Ngawi State Kindergarten". With a total of 43 respondents and 27 posttest results ( 62.8%).

Skills require basic skills and training that everyone has in order to help produce something more valuable and quickly.<sup>4</sup>Skills are a measure of a person's ability to help or make something happen, both material and non-material in nature, and can be capital in achieving goals and realizing something or its form.<sup>5</sup>after conducting health education through leaflet media, the results of the study increased by 5 people with positive behavior. This means that there are factors that affect skills besides the level of education, age also influences it because, the older a person is, the more mature he is in thinking<sup>9</sup>.

According to the researcher's analysis it was concluded that there was a change in the Skills of Helping a Choking Child which could be influenced by educational factors. Where based on table 4.2 it is known that of the 32 respondents the most respondents had the last high school education, namely 13 respondents (40.6%).

## **3. The Influence of Health Education on Choking Victim Management on the Skills of Helping Choking Victims in Children**

Based on the results of Table 9 it is known that the results of the Hypothesis Test of the Non-Parametric Wilcoxon signed rank test, seen from the sig. value (Significant) is 0.000. So if the P value  $\leq 0.05$  ( $H_0$  is rejected,  $H_a$  is accepted) which means that there is an influence of Health Education on Choking Victim Management on the Skills of Helping Choking Victims in Children.

The results of the above research are in line with the research conducted by Mira Utami Ningsih and Baiq Kirana Kinta Yusari with the title "Improving Mother's Skills in Handling Choking in Infants and Children". The results obtained are that there is an influence on health education with skills to help choking victims with a p value of 0.000.

The effect of health education on skills is the ability to do something well. The process of change in one's skills involves the following, namely perception, readiness, response, mechanism, adjustment and creation<sup>20</sup>.

First aid is the provision of immediate assistance to sick or injured sufferers who require basic medical assistance. The basic medical referred to here is an act of treatment based on medical science that ordinary people can have. This basic medical provision is carried out by



rescuers who first arrive at the scene who have the ability and are trained in medical treatment.

Based on the results of the research and the theory above, the researchers concluded that the provision of health education is a very effective mode of improving skills and changing one's attitude. It was concluded that the importance of the influence of Health Education on Choking Victim Management on the Skills of Helping Choking Victims in Children.

## **CONCLUSION**

Based on the results of the study entitled The Effect of Choking Victim Management Health Education on Helping Skills for Choking Victims in Children, the following conclusions can be drawn:

1. It is known that the results of the frequency distribution of Helping Choking Children Skills during the Pretest out of a total of 32 respondents, as many as 18 respondents (56.2%) with positive Choking Helping Skills results.
2. It is known that the results of the frequency distribution of Skills for Helping Choking Children during the Posttest from a total of 35 respondents were 23 respondents (71.9%) with Positive Skills for Helping Choking Children.
3. There is an influence of health education on choking victim management on skills to help choking victims in children with a p value of 0.000 ( $P \text{ value} \leq 0.05$ ), which means that  $H_0$  is rejected,  $H_a$  is accepted.

## **SUGGESTION**

1. For Educational Institutions  
It is hoped that STIKes Wijaya Husada Bogor can add to the literature on emergencies in children.
2. For Respondents  
It is hoped that respondents will be more willing to find out about the importance of first aid for choking victims which is common in the community. The existence of clear and correct information will increase good knowledge of respondents regarding first aid for handling choking victims, so that cases of choking can be minimized.
3. For Further Researchers  
This research is only on limited variables, so it is necessary to do research to see the relationship of other variables with a larger sample, so as to improve research results.

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