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Educational Demonstration of Eye Exercises Video Based Affected Knowledge, Anxiety, Self-Resilience of Cataract Patients

[CA]Lie Liana Fuadiati, Desy Rinawaty, Nadhifah Rahmawati, Afiatur Rohimah
Sekolah Tinggi Ilmu Kesehatan Kendedes Malang, Indonesia
[CA]Corresponding Author

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Abstract

Cataracts are the main cause of blindness throughout the world which can actually be prevented. Lack of knowledge, increased anxiety and lack of self-resilience in cataract patients cause patients to be afraid to seek treatment from health services. The research design used Quasi Experimental Pre-Post Test with One Group Design. The sample in this research was 42 cataract patients. The instrument for this research was the Knowledge, Anxiety and Self-Resilience Questionnaire. Data analysis in this research used the Wilcoxon Test statistical test. The results of the Wilcoxon Test of knowledge in the experimental group showed that Sig. equal to 0.000 or <0.05 (error level), meant that there was a difference in knowledge results before and after treatment. Meanwhile, the results of the Wilcoxon test for anxiety in the experimental group showed that Sig. equal to 0.008 or <0.05 (error level), it could be concluded that there was a difference in anxiety results before and after treatment. And the results of the Wilcoxon Test of self-reliance in the experimental group showed that Sig. equal to 0.000 or <0.05 (error level), meant that there was a difference in the results of self-resilience before and after being given treatment. Video-based Educational Demonstration Of Eye Exercises is effective for increasing knowledge, reducing anxiety and increasing self-resilience in cataract patients. Health workers can increase knowledge about cataracts and non-pharmacological therapy independently to increase personal resilience and reduce anxiety in cataract patients, as an effort to improve optimal health services.

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✉Correspondence Address:
Sekolah Tinggi Ilmu Kesehatan Kendedes Malang - Indonesia
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INTRODUCTION

Cataracts are the main preventable cause of blindness worldwide. The definitive treatment for cataracts is surgery. Several cataract surgery techniques are increasingly developing with smaller incisions, fast healing, and low complication rates. Periodic examinations after cataract surgery are very important to detect complications (Astari, 2018). Cataract is a clouding or opacification of the normally clear lens of the eye or its capsule (surrounding transparent membrane) that obscures the passage of light through the lens o the retina of the eye (Aa et al., 2024).

WHO explained that cataracts are the main cause of visual impairment and contribute to more than half of blindness (51%) almost throughout the world. Cataracts that are often found in patients over 40 years of age are senile cataracts, which are caused by the process of lens degeneration. The diagnosis of cataracts is made through an ophthalmological physical examination with the results of decreased visual acuity, pupillary reflexes, normal intra-ocular pressure (IOP), no cloudiness in the cornea, lens cloudiness which appears clearer after dilating the pupil with 0.5% tropicamide eye drops, and examination of the iris. shadow test shows positive results (WHO, 2012).

Based on data from the Director General of Disease Prevention and Control, cataracts are the highest cause of blindness at around 81%. Results of the Rapid Assessment of Avoidable Blindness (RAAB) survey by the *Perhimpunan Dokter Spesialis Mata Indonesia (Perdami) and Balitbangkes* in 15 provinces, namely in West Sumatra, North Sumatra, South Sumatra, DKI Jakarta, West Java, Central Java, East Java, South Kalimantan, Bali, NTT, NTB, North Sulawesi, South Sulawesi, Maluku and Papua with a target population aged over 50 years are known to have a blindness rate of up to 3 percent (Kemenkes RI, 2020).

One of the treatments for cataracts is surgery or surgery which is most often performed on people aged over 65 years. The decision to undergo surgery is very individual. Surgery or operations often cause anxiety. Anxiety is a vague and diffuse worry, which is related to feelings of uncertainty and helplessness and this emotional state has no specific object. The client's anxiety arises from a feeling of unclear and diffuse worry related to feelings of uncertainty, helplessness, and unspecific objects. This anxiety is manifested directly through physiological changes such as (shaking, sweating, increased heart rate, abdominal pain, shortness of breath) and behavioral changes such as (restlessness, rapid speech, startled reactions) and indirectly through the emergence of symptoms as an effort to fight anxiety (Ristanti et al., 2024).

One action to reduce anxiety levels is to mentally prepare the patient. One of the ways that mental preparation can be done is through health education. The nursing ability to listen actively to both verbal and nonverbal messages is critical to building a trusting relationship with the patient and family. Health education can help clients and families increase knowledge, identify concerns, and increase the self-resilience of cataract patients, as an effort to plan nursing interventions and supportive care to reduce the patient's anxiety level (Sulistiawan et al., 2023). Health education is essentially an activity to convey health messages to the community, groups or individuals to gain knowledge about good health. So, it is hoped that this knowledge can influence behavior changes for the better (Notoatmodjo S, 2007).

Increasing the knowledge of cataract patients is very important as an effort to increase knowledge, reduce anxiety and increase self-resilience in cataract patients to survive in overcoming the health problems they experience. Video-based combination of Eye Exercise Demonstration Education with video learning media as an effort to increase knowledge, reduce anxiety and increase self-resilience in cataract patients. Learning using the lecture method tends to be boring for respondents, with the lecture method respondents tend to be passive in learning, lack focus and quickly feel bored. Meanwhile, learning using the demonstration method tends to make respondents active in health education activities (Deviani et al., 2018).

Health education using a combination of lecture and demonstration methods is more effective in improving knowledge, attitudes and health behavior in school students than health education using the lecture method alone (Mufliha et al., 2024). The demonstration method can increase the level of respondents' learning participation. A conducive demonstration atmosphere and the availability of video learning media also support increasing training abilities (Magfiroh et al., 2019). health education using a combination of lecture and demonstration methods is more effective in improving knowledge, attitudes and health behavior in school students than health education using the lecture method alone. The demonstration method can increase the level of respondents' learning participation. A conducive demonstration atmosphere and the availability of video learning media also support increasing training abilities (Aeni & Yuhandini, 2018).

Easy steps to reduce the risk of eye fatigue, including using appropriate lighting, blinking frequently, taking breaks, and exercising the eyes (gymnastics), namely turning away from the work object and staring at a distant object for a few moments. One of the eye exercises that can be done to reduce complaints of eye fatigue is Yoga Eye Exercises (Sucipto et al., 2020). Eye exercises provide easy steps to reduce the risk of eye fatigue, including using appropriate lighting, blinking frequently, using rest periods, and eye exercises (eye exercises), namely turning away from the work object and staring at a distant object for a few moments (Istonia Hermolinda Waang et al., 2024). Eye exercises have physical and mental health benefits through down-regulation of the action of the hypothalamus-pituitary-adrenal and sympathetic nervous systems. Yoga exercises can relax you better and can reduce stress levels. In his research, Sang-Dol Kim also said that Eye Yoga Exercises can increase the sensitivity of visual perception and the ability to distinguish flashing stimuli by increasing the frequency of flashes, which reduces the magnitude of the optical illusion that the flicker is stable (Lin et al., 2023). (Suresh et al., 2022) also explained that eye exercises can make the eye muscles and surrounding areas elastic and strong, reduce eye strain and can sharpen vision.

METHODS

The research method used was Quasi Experimental Pre-Post Test with One Group Design, by providing health education and eye exercise demonstrations to cataract patients. Total sampling 42. In the initial research activities, respondents measured scores of knowledge, anxiety and self-resilience. The variables of knowledge, anxiety and self-resilience were measured using a questionnaire. The research was carried out in February – March 2024 in Enggal Village, Lawang. The data from this research were analyzed using Wilcoxon in SPSS. Respondent characteristics were analyzed univariately by adjusting the data type. To determine the effect of the effectiveness of video-based educational demonstration of eye exercises on knowledge, anxiety and self-resilience in cataract patients, bivariate data analysis was carried out using independent t test and paired t test. The results of this analysis are then used to conclude a hypothesis which has been approved by the health research ethics commission with letter number 003.2/VI/EC/KEPK/LC/2024.

RESULTS

Univariate Analysis

Distribution of Respondent Characteristics

Table 1. Distribution of Respondent Characteristics Based on Gender, Education, Age, Diabetes Mellitus, Blood Pressure, Type of Trauma in Enggal Village, Lawang (n=42)

Characteristics	Frequency	Percentage
Gender		
Man	14	33%
Woman	28	67%

Education		
No school	5	12%
Elementary School	10	24%
Junior High School	8	19%
Senior High School	16	38%
Bachelor	3	7%
Age		
< 50 years	9	21%
≥ 50 years old	33	79%
Diabetes mellitus		
Without Diabetes Mellitus	32	76%
Diabetes mellitus	10	24%
Blood pressure		
Hypertension	28	67%
Normal	14	33%
Types of Trauma		
Non-Traumatic	37	88%
Trauma	5	12%
Amount	42	100%

Source: 2024 Research Data

Based on Table 1, it shows that the distribution of respondents' characteristics based on gender is mostly female, totaling 28 people (67%). The majority of respondents' education levels were high school education, amounting to 16 respondents (38%). The majority of respondents were ≥ 50 years old, amounting to 33 respondents (79%). The majority of respondents without diabetes mellitus had a medical history of patients with diabetes mellitus, amounting to 32 respondents (76%). The majority of respondents had hypertension in their blood pressure history, amounting to 28 respondents (67%). Based on the type of trauma, the majority of non-trauma respondents were 37 respondents (88%).

Average Distribution of Respondents' Knowledge, Anxiety and Self-Resilience

Table 2. Average Distribution of Knowledge, Anxiety and Self-Resilience About Cataracts Before and After Video-Based Educational Demonstration of Eye Exercises Intervention (n=42)

Knowledge About Cataracts	**Pre-test**		**Post-test**	
	Frequency (n)	**Percentage (%)**	**Frequency (n)**	**Percentage (%)**
Good	2	5%	15	36%
Enough	9	21%	22	52%
Not enough	31	74%	5	12%
Anxiety				
No Anxiety	5	12%	5	12%
Mild Anxiety	14	33%	21	50%
Moderate Anxiety	19	45%	15	36%
Severe Anxiety	4	10%	1	2%
Self-Resilience				

Low	30	71%	11	26%
Normal	10	24%	19	45%
Tall	2	5%	12	29%
Amount	**42**	**100%**	**42**	**100%**

Based on Table 2, it shows that the majority of respondents had insufficient knowledge about cataracts before intervention, as many as 31 respondents (74%). And the majority of respondents' knowledge about cataracts after intervention had sufficient knowledge, as many as 22 respondents (52%). Majority of respondents' anxiety before the intervention had moderate anxiety, 19 respondents (45%). And the majority of respondents' anxiety after the intervention had mild anxiety, 21 respondents (50%). And majority of respondents' self-resilience before the intervention had low self-resilience as many as 30 respondents (71%). And the majority of respondents' self-resilience after the intervention had normal self-resilience, 19 respondents (45%).

Bivariate Analysis

Analysis of Knowledge Before and After being given Educational Demonstration of Eye Exercises Intervention

Table 3. Analysis of the Wilcoxon Test on the Effectiveness Educational Demonstration of Eye Exercises on Knowledge, Anxiety, and Self-Resilience in Cataract Patients

	N	**Sig.**
Pre Test and Post Test Knowledge	42	0,000
Pre Test and Post Test Anxiety	42	0,008
Pre Test and Post Test of Self Resilience	42	0,000

Source: 2024 Research Data

Based on Table 3, the results of the Wilcoxon Test of knowledge in the experimental group show that Sig. equal to 0.000 or <0.05 (error level), it can be concluded that there is a difference in knowledge results before and after treatment. Meanwhile, the results of the Wilcoxon test for anxiety in the experimental group showed that Sig. equal to 0.008 or <0.05 (error level), it can be concluded that there is a difference in anxiety results before and after treatment. And the results of the Wilcoxon Test of self-reliance in the experimental group show that Sig. is 0.000 or <0.05 (error level), then it can be concluded that there is a difference in the results of self-resilience before and after being given treatment.

DISCUSSION

Level of Knowledge before and after being given the Video-Based Educational Demonstration of Eye Exercises intervention

Knowledge is one of the important factors in forming a person's actions in behavior (Gustini & Wartana, 2022). Knowledge is obtained one way through education. Education itself has many methods, based on research conducted, education is done on a video basis. The research results show that the Sig. equal to 0.000 or <0.05 (error level), it can be concluded that there is a difference in knowledge results before and after being given treatment. In line with research conducted by (Sulistiawan et al., 2023), it was found the results of the study from 14 respondents before being given IEC post-operative care, the majority had a low level of knowledge, namely 7 respondents (50%) and after being given IEC post-operative care, the majority of knowledge levels experienced an increase to good results, namely 11 respondents

(78.6%). Another study conducted by Ellis Wisley et al found that of 101 patients, 58 people watched educational videos. Patients who watched the videos showed stronger learning outcomes; Specifically, patients who watched the video scored higher on the cataract surgery education assessment than those who did not (83% vs. 76%, p=0.032), especially on the assessment of postoperative visual expectations (98% vs. 80% p=0.003).

In this research, a video was developed which aims to increase the knowledge of cataract patients, so that by providing education it is hoped that patients will understand and understand cataract disease itself and will also be able to understand the actions that can be used to avoid making the condition worse. With this educational video, it is hoped that patients can more easily understand and capture the education that has been provided.

Self-Resilience Level before and after being given the Video-Based Educational Demonstration of Eye Exercises intervention

Self-resilience is the ability to overcome and adapt to difficult events or problems that occur in life. Resilience is a description of the process and results of successfully adapting to difficult circumstances or life experiences that trigger stress and even deep trauma (Tarigan et al., 2020).

The research results show that Sig. equal to 0.000 or <0.05 (error level), it can be concluded that there is a difference in the results of self-resilience before and after being given treatment. In line with research conducted by (Hadiyah, 2021) it was found that there was an influence of self-efficacy on resilience among aids patient in the Turen Community Health Center working area. Other research also conducted by (Tarigan et al., 2020) It was found that this video has been tested by material and media experts. As a result, this video material received the title Decent with a score of 68%. Meanwhile, media experts stated that it was very worthy by giving a score of 86%.

Resilience in Health Education or health education that can help clients and families increase the self-resilience of cataract patients, as an effort to plan nursing interventions and supportive care to reduce the patient's anxiety level. Resilience is the ability to bounce back from negative experiences which reflects the innate qualities of an individual or is the result of learning and experience. Resilience is a universal capacity and with this capacity, individuals, groups or communities are able to prevent or minimize or resist influences that can damage when they experience disaster or misfortune. Resilience increases an individual's ability to recover from a stressful situation and is able to adapt and survive this condition.

Anxiety levels before and after being given the Video-Based Educational Demonstration of Eye Exercises intervention

Anxiety or anxiety is a condition and subjective experience of individuals towards objects that are not specifically explained due to anticipation of danger which allows individuals to take action to deal with it (Tim Pokja SDKI DPP PPNI, 2017). The majority of the occurrence of a disease in a person makes the patient feel worried about himself, both potential and actual regarding the person's body, integrity and soul which can trigger anxiety in the client.

The research results show that Sig. equal to 0.008 or <0.05 (error level), it can be concluded that there is a difference in anxiety results before and after treatment. In line with research conducted by (Warouw et al., 2018) it was found that there was a difference in anxiety between before and after education was provided to patients preparing for cataract surgery, with a P-value = 0.000. Other research conducted (Zuryati & Suparto, 2018) it was found that there was an influence of anxiety between before and after being given video-based education to preoperative patients with a P-value of 0.000 (α<0,05).

Educational activities are one of the health education activities that must be emphasized so that patients receive convincing information and do not experience anxiety or worry. It is hoped that the educational video provided can help patients provide knowledge about the disease so that patients understand more about the description of the disease and trigger anxiety.

CONCLUSION

Based on research conducted, it can be concluded that there are differences in knowledge results before and after treatment of video-based Educational Demontration of Eye Exercise, there is a difference in the results of self-resilience before and after treatment, meaning video-based Educational Demonstration of Eye Exercise on self-resilience in cataract patients has effectiveness.

SUGGESTION

Suggestions for health workers can increase knowledge about cataracts and non-pharmacological therapy independently to increase personal resilience and reduce anxiety in cataract patients, as an effort to improve optimal health services.

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CONFLICT OF INTEREST

The author declares that there is no conflict of interest in this research.

AUTHOR CONTRIBUTIONS

The duties of chief researcher was coordinate the process of data collection, data collection, data analysis, preparation of data interpretation, and preparation of research reports. 1st member of the researchers was responsible in the preparation of research instruments, research equipment and support. 2nd member of the researchers coordinated the preparation of progress reports and final research reports, publication of research results in accredited national journals ranked 1-6. 3rd member of the researchers was responsible for the results of research reports starting from daily activities, progress reports, final reports and use of research funds.

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