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Educational Videos on Local Wisdom "*Topeng Dance and Basa Walikan*" to Motivate the New Culture Clean and Healthy Living Behavior

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Abstract

Environmental and behavioral factors influence health, so community empowerment is very important to achieve a healthy paradigm. The lack of clean and healthy living behavior in minimizing the risk of disease is due to lack of socialization, availability of facilities, and strong local culture. Further efforts are needed to achieve optimal results. The research aimed to determine the effectiveness of educational video local wisdom "*Topeng Dance and Basa Walikan*" on clean and healthy living behavior cultural motivation in preventing disease at the Mojolangu Malang Community Health Center. This was quantitative research with quasi-experimental design, pre-post test with control group design. Simple random sampling was used as the sampling technique. The population was 150 people who sought outpatient treatment at the Mojolangu Community Health Center. The get sample size software divides the sample into two groups; margin of error 5% for 110 samples. The intervention group was given five educational videos in stages over 15-30 minutes. The control group used the available brochures. The data collection used questionnaires. The data analysis used the Wilcoxon sign rank test and the Mann-Whitney test. The data analysis showed that the intervention affected the perceptions of vulnerability (p-value=0.000), Perception of Severity (p-value=0.000), Perception of Barriers (p-value=0.000), Perception of Benefits (p-value=0.000), cues to action (p-value=0.017), self-efficacy (p-value=0.000), and motivation (p-value=0.000). Meanwhile, in the control group there were no differences in pre-post-test. Health promotion needs to be increased to encourage sustainable healthy living behavior activities so that people can achieve the highest level of health.

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INTRODUCTION

Healthy living behavior is all health behavior carried out out of personal awareness so that the family and all its members can help themselves in the health sector and actively participate in community activities. The clean and healthy living behavior program in the household is a form of training family members to know, be willing, and be able to implement clean and healthy living behaviors and play an active role in the healthy community movement (Misrah et al., 2022). Clean and healthy living behavior is a social engineering program that aims to make as many members of society agents of change as possible to improve the quality of daily behavior and live a clean and healthy life. The clean and healthy living behavior movement's main aim is to improve health quality through an awareness process, which is the beginning of individual contributions to living clean and healthy daily life behavior. The most crucial benefit of clean and healthy living behavior is creating health-conscious people with the knowledge and awareness to live a behavior that maintains cleanliness and meets health standards. Some clean and healthy living behavior arrangements include clean and healthy living behavior in households, schools, workplaces, health facilities and public places.

The healthy lifestyle movement in society is being enhanced through various government-run programs. One of these programs is Clean and Healthy Living Behavior. Clean and healthy living behavior is a set of behaviors that are practiced based on awareness as a result of learning, which makes a person a family, group, or community. The clean and healthy living behavior movement aims to improve knowledge, attitudes, and behavior by applying healthy living methods to maintain and improve health, help themselves in the health sector, and actively realize public health. Clean and healthy living behavior in the household empowers household members to know, be willing, and be able to practice clean and healthy living behavior education in the household is crucial in creating a healthier society that is aware of the importance of clean and healthy living (Nuryana et al., 2022).

Changes occurred in the definition and categories of indicators that form clean and healthy living behavior. This is done by considering the presence of different compositions of household members for each indicator, namely toddlers, toddlers and adults. Model development is also carried out by assessing or calculating indicators, namely by assessing individual level and household level. Nationally, the proportion of individuals who have good clean and healthy living behavior has not yet reached half (41.3%), and households that have good clean and healthy living behavior are 37.3%. The benefit of clean and healthy living behavior in the household is that every family member becomes accustomed to implementing a healthy lifestyle, thereby minimizing health problems and not easily getting sick. Implementing clean and healthy living behavior in households will create healthy families so that they can increase family welfare and productivity. A healthy family can increase the productivity and welfare of household members. The criteria for a healthy household are there is a mother giving birth, the birth is assisted by a health worker (doctor, midwife), if there is a toddler in the household, give exclusive breast milk to the baby and weigh the baby and toddler every month, use clean water, wash your hands using soap and clean running water, use a toilet, eradicate larvae at home, eat vegetables and fruit every day, do physical activity every day, and do not smoke in the house. Households play an important role in the initial process of forming behavior that is obtained through the process of communication and interaction between family members (Mubasyiroh et al., 2021).

Based on data from the 2023 Indonesian Health Survey, in East Java 2.6% defecate outside the yard, 13.3% in the yard, and 84.2% inside the house. Based on the proportion of household handwashing facilities available by province, 79.4% are inside the house, 10.4% are outside the house, 10.1% are without handwashing facilities. Based on the availability of soap in hand washing places, in East Java 93.9% have it, 6.1% don't have it. Prevalence of smokers in the population ≥10 years, smoking daily is 22.8%, smoking occasionally 4.2%. The proportion of smoking in

buildings/rooms for residents >10 years in East Java is 83.5%. the proportion of consumption of fresh fruit or vegetables per day in a week among residents ≥ 5 years old in East Java is 7.4% not consumed, 1-2 portions 63.6%, 3-4 portions 24.6%, ≥ 5 portions as much as 4.3%. Some reasons for not eating fruit are because they don't like it 28.6%, can't afford it 31.8%, fruit is not in stock 55.8%, bored or lazy 8.9%, no perceived benefit 1.9% (Kemenkes RI, 2023). Implementing clean and healthy living behavior, especially when it comes to smoking inside the home and rarely eating fruit and vegetables in society, is still low. One of the Efforts that can be made by carrying out health promotion regarding clean and healthy living behavior (Yunita et al., 2023). Despite awareness society regarding the importance of healthy living is growing, a number of problems still exist hamper these efforts, especially those related to limited infrastructure, health education that is not yet optimal, as well as traditional lifestyle patterns that still persist (Br Tarigan & Usiono, 2025).

Creating a new culture of Clean and Healthy Living Behavior is often considered more effective than other behavior change methods for several reasons: community approach: clean and healthy living behavior creates change at the community level, making it easier to internalize healthy habits as applicable social norms, focuses on Prevention: clean and healthy living behavior culture emphasizes disease prevention rather than treatment after illness, which has a more long-term impact, active Individual Involvement: Individuals feel responsible for their health and the environment when it becomes a culture, accelerating collective behavioral change, consistency and Sustainability: an established culture is challenging to lose and is more long-lasting than short-term behavior change through one-time campaigns or interventions, social support: culture creates social support, effectively maintaining healthy behavior. Other behavior change methods are based on one-way campaigns or education, the results of which are not always long-lasting. Local wisdom can be interpreted as a system that exists in the order of political, social, economic, environmental, and culture that is integrated with the life of the local community. Local wisdom considered very valuable and has its own benefits in life public. In other words, local wisdom becomes part of their way of life to solve all the life problems they face. Thanks to wisdom Local communities can continue their lives, and can even develop economically sustainable (Putri Novrialni & Indrayuda Indrayuda, 2024).

Diverse cultures serve as guidelines for shaping a person's character. Behind Indonesia's cultural diversity, there are also challenges. One such challenge is the preservation of the Malangan "*Topeng Dance*". A key issue is the lack of interest among younger generations due to misconceptions—many see the Malangan "*Topeng Dance*" merely as a decorative art piece rather than a cultural heritage that needs to be preserved. Based on its name, the Malangan "*Topeng Dance*" uses masks as a tool for performing dances in accordance with proper rules and without offense. Although masks serve as props in Malangan "*Topeng Dance*" performances, this cultural tradition has functions beyond dance (Afriansyah et al., 2023). The cultural background inherent in society serves as social capital and a key asset for promoting education about environmental cleanliness through dance (Nursyam et al., 2023). The combination of art and technology is proven effective and can be openly accepted by public. Health education media, such as videos, can be used as a tool to provide health education.

A preliminary study on ten people who sought outpatient treatment at the Mojolangu Malang Community Health Center in March 2024 showed that 80% still needed to implement optimal clean and healthy living behavior. Based on media preferences, they find it easier to receive information using engaging, short, concise, clear, and entertaining media. Video can have an impact faster than other media (Balqis, 2022). Using video media for health education is considered highly effective in delivering health messages to the public (Luna & Dinatha, 2024).

The problem identified was health promotion media for clean and healthy living behavior educational videos that elaborate on Health Belief Model (HBM) theory and local wisdom and are attractive, practical, and efficient. The research aims to determine the effectiveness of the local wisdom educational video "*Topeng Dance and Basa Walikan*" on Motivating the New Culture of clean and healthy living behavior in Disease Prevention at the Mojolangu Community Health Center. The specific aim is to identify factors bases on HBM and motivation clean and healthy living behavior before and after the intervention, analyzing the influence of the local wisdom educational video "*Topeng Dance and Basa Walikan*" on Motivation for the New Culture of clean and healthy living behavior in Disease Prevention in the era of digitalization at the Mojolangu Community Health Center, Malang City.

METHODS

This was a quantitative research with quasi-experimental design, pre-posttest with control group approach. Simple random sampling was used as the sampling technique. The population was 150 outpatient treatment at the Mojolangu Community Health Center. In order to get the sample size, researchers divided the sample size into two groups; a margin of error of 5% was 110 samples. The intervention group was given five educational videos in stages over 15-30 minutes. The control group used the available leaflets. Data were collected using questionnaires before and after the intervention. The data analysis used the Wilcoxon signed rank test and Mann-Whitney test. This research has been declared ethically appropriate by the health research ethics committee of the Patria Husada School of Health Sciences with number: 06/PHB/KEPK/241/08.24.

RESULTS

Table 1. Characteristics Respondent

No	Data	Intervention Group		Control Group	
		Frequency	Prosentage (%)	Frequency	Prosentage (%)
1	Age				
	Early Adulthood	8	14.5	4	7.3
	Late Adulthood	28	50,9	25	45.5
	Early Elderly	13	23,6	22	40.0
	Late Elderly	6	10,9	3	5.5
	Seniors			1	1.8
2	Gender				
	Man	23	41,8	27	49,1
	Woman	32	58,2	28	50,9
3	Education				
	Elementary	2	3,6	1	1,8
	Middle school	8	14,5	20	36,4
	High school	33	60	22	40
	Diploma/ S1	11	20	12	21,8
	Magister	1	1,8		
4	Family Income				
	<1 million	5	9,1	0	0
	1-3 million	15	27,3	37	67,3
	>3 million	35	63,6	18	32,7
5	Job				
	Government employees	1	1,8	3	5,5

No	Data	Intervention Group		Control Group	
		Frequency	Prosentage (%)	Frequency	Prosentage (%)
	Private job	3	23,6	8	14,5
	Trader	5	5,5	11	20
	Farmer	0	0	9	16,4
	Laborer	14	25,5	10	18,2
	Housewife	14	25,5	11	20
	Self-employed	4	7,3	3	5,5
	Retired	1	1,8	0	0

Based on Table 1, most of respondent at late adulthood, most of them woman, level education senior high school, more than half family income intervention group at >3 million/ month, control group 1-3 million/ month. Most of them housewife.

Table 2. Statistic Descriptive research variable on the control group

	Minimum		Maximum		Mean		Std. Deviation	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post
Perceived susceptibility	7	7	12	14	10.20	10.27	1.311	1.353
Perceived severity	8	8	13	13	11.11	11.04	1.212	1.201
Perceived benefits	8	8	31	31	11.36	11.24	2.952	3.012
Perceived barriers	7	7	12	12	9.73	9.58	1.254	1.243
Cues to Action	9	9	13	13	11.00	10.95	.882	.911
Self-efficacy	10	10	13	13	11.20	11.16	.621	.660
Motivation	11	11	20	20	15.44	15.25	2.493	2.279

Table 2 shows that most of the pre-post-test data research variables did not experience significant changes. The average value of all variables decreased.

Table 3. Statistic Descriptive research variable on the intervention group

	Minimum		Maximum		Mean		Std. Deviation	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post
Perceived susceptibility	6	10	13	20	9.20	16.07	1.532	2.235
Perceived severity	9	13	14	16	10.87	14.25	1.203	.886
Perceived benefits	7	11	13	14	10.73	13.02	1.394	.805
Perceived barriers	6	11	12	16	9.69	14.02	1.477	1.178
Cues to Action	8	10	13	15	10.62	12.64	1.194	1.495
Self-efficacy	10	10	14	14	10.87	11.82	.862	1.140
Motivation	10	10	20	24	14.58	20.15	2.132	2.321

Table 3 shows that most pre-post-test data research variables experience significant changes. The average value of all variables increases.

Table 4. Wilcoxon Signed Rank Test statistics in the intervention group and control group

	Control Group		Intervention Group	
	Z	**p-value**	**Z**	**p-value**
Post - Pre test Perceived susceptibility	-1.000[b]	.317	-6.467[b]	.000
Post - Pre test Perceived severity	-1.633[c]	.102	-6.299[b]	.000
Post - Pre test Perceived benefits	-1.890[c]	.059	-6.266[b]	.000
Post - Pre test Perceived barriers	-1.604[c]	.109	-6.480[b]	.000
Post - Pre test Cues to Action	-1.732[c]	.083	-6.083[b]	.000
Post - Pre test Self-efficacy	-1.414[c]	.157	-4.937[b]	.000
Post - Pre test Health behaviors	-1.709[c]	.088	-6.039[b]	.000

Based on the results of statistical tests with the Wilcoxon Signed Rank test, it shows that the intervention influences all research variables on the intervention group with a p-value <0.05, which means that there is an increase in perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues for action, self-efficacy, and motivation to doing Health and clean behaviors. In the control group, the p-value of all variables was>0.05, which means there was no difference between the pre-post tests.

Table 5. Mann Whitney Test statistics on the difference in post-pre test scores in the intervention group and control group

	Z	**p-value**
Post - Pre test Perceived susceptibility	-9.523	.000
Post - Pre test Perceived severity	-9.185	.000
Post - Pre test Perceived benefits	-9.049	.000
Post - Pre test Perceived barriers	-9.585	.000
Post - Pre test Cues to Action	-7.440	.000
Post - Pre test Self-efficacy	-6.239	.000
Post - Pre test Health behaviors	-8.436	.000

Based on the results of statistical tests with the Mann Whitney test, it shows that the intervention influences all research variables with a p-value <0.05, which means that there is an increase in perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues for action, self-efficacy, and motivation to doing Health and clean behaviors.

DISCUSSION

The Effect of Educational Videos on Local Wisdom, "*Topeng Dance and Basa Walikan*," to Motivate the New Culture of clean and healthy living behavior in Disease Prevention on the Healthy Behavior Based on Health Belief Model (HBM)

Based on the results of statistical tests with the Mann Whitney test, it shows that the intervention influences all research variables with a p-value <0.05, which means that there is an increase in perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues for action, self-efficacy, and motivation to doing Health and clean behaviors.

There are various things that can influence the formation process behavior, in addition to knowledge, there are things that are local or specific to a region, known as Local wisdom can support the

achievement of a reciprocal relationship between the community and the local environment living which is the result of the application of the culture and habits of the local community (Noerfitri & Prasetya, 2022).

Implementation of clean and healthy living behavior in society is still low due to a lack of socialization regarding the benefits and risks of not implementing clean and healthy living behavior in daily life. Due to the low level of socialization of clean and healthy living behavior, the public's willingness to implement it is also low, which results in disrupted public health. This community service aims to empower the community, improve, protect, and maintain health so that people are aware, willing, and able to independently become actively involved in implementing clean and healthy living behavior (delivery assisted by health workers, weighing babies and toddlers, eliminating mosquito larvae, using clean water, eating fruit and vegetables every day) in everyday life (Nasution, 2020). Implementation of clean and healthy living behavior, especially when it comes to smoking inside home and rarely eat fruit and vegetables in society is still low. Lack of vegetables also has a negative impact on eyes, can also cause anemia with symptoms such as, weakness, tiredness, lethargy, lack of concentration and laziness. Apart from that, the healthy living behavior indicator related to smoking behavior seen from various angles view is very detrimental, good for yourself and the people around him (Yunita et al., 2023).

Education will affect a person's learning process, the higher the education, the easier it is for that person to receive information that can and is absorbed clearly. Level of education closely related to the ability to absorb and receive health information and abilities contribute to health development. People who have a high level of education Higher levels generally have insight broad, so it is easier to absorb and accept information, and can take an active role in overcome his health problems and his family (Afifah et al., 2022). A high level of education provides opportunities to absorb knowledge quickly. The research result is compatible with another research statement that there is a relationship between higher education and the implementation of healthy living behavior. The prevalence ratio (P.R.) of 4.230 means higher education is riskier, 4,230 times greater than education. The Population believes that 95% of those in higher education are more likely to do a healthy living behavior than those in lower education (Amuri et al., 2021).

Knowing healthy living behavior in the home setting is necessary for families, where good knowledge will impact behaviour change in everyday life (Candra et al., 2023). Another research shows more of half of the heads of families' level of knowledge regarding clean and healthy living behavior in the good category from the survey results similar research in Panaikang Subdistrict, District Panakukang Makassar City, 96.5% classified have good knowledge about clean living patterns and healthy. The level can influence this difference Education in this study Population the majority had primary education (50.3%) (Afifah et al., 2022).

The health belief model (HBM) is a foundational framework in health behavior research. The model focuses on how individuals perceive health threats and decide to act based on the value individuals place on a particular goal and the likelihood that actions taken toward that goal will be successful in achieving the goal (Alyafei & Easton-Carr, 2024). Perceived susceptibility: assessing the probability of acquiring an illness or encountering an undesirable outcome. Perceived severity: understanding the seriousness of the disease, condition, or unfavorable outcome and what could happen without additional action. There is a considerable range in how people perceive the severity of an illness, and they often consider both the medical and social implications when assessing its severity. Perceived benefits: the effectiveness of various available actions to reduce the risk of illness are perceived. Perceived barriers: obstacles to performing a recommended health action. Self-efficacy is an individual's belief in their ability to effectively perform a specific behavior or task. It is also related to the likelihood of a person engaging in a desired behavior. Cues to action: whether from

one's surroundings or subjective experiences. Specific cues can influence the actions one chooses to take. While less explored, cues to action are the stimuli that initiate the decision-making process to embrace a recommended health intervention. These cues can be either internal or external, from noticing symptoms of an illness to being exposed to a health campaign (Alyafei & Easton-Carr, 2024).

A systematic review of educational methods found that using health education with dance videos according to research results on strategies to increase knowledge, attitudes, and skills toward a clean and healthy life, based on the results obtained, namely the average value of Knowledge students before the intervention was 3.42 out of 30-8 students, while student knowledge after the intervention was 3.87 out of thirty-eight students. The statistical analysis results obtained $p<0.05$, meaning there is a significant difference in knowledge before and after counseling using the " *Kerasa*" clean and healthy living behavior video regarding the habit of washing hands with soap. Also, the dance video a traditional dance from Lombok called "*Rudat*". The potential of "*Rudat*" dance as a medium of information for students is enormous because of its forms, such as dance, music, and one more person accompanied by the lyrics about clean and healthy living behavior, especially relating to Handwashing with Soap than information that is delivered to students is very obtainable. In connection with "*Rudat*" Dance, it has the potential to be a medium of information and counseling (Sasmitha et al., 2020).

Family is the principal capital in the future, and it needs to be maintained and improved. Moreover, it protects their health. Every family member has a vulnerable period suffering from a disease, especially in families with high risk. These namely families have factors that can threaten their health due to circumstances physical, mental, and socio-economic, so you need to get guidance and nursing care and health services due to ignorance and inability to maintain health and care. Pain rates and deaths from infectious and non-infectious diseases in high-risk families can prevented by Clean and Healthy Living Behavior. Efforts to maintain and improve individual health must be the awareness of every individual. The public is also expected to be able to recognize the causes and symptoms of the disease so that they can prevent and overcome their health problems. One of the benefits of implementing clean and healthy living behavior in the household is that household members do not get sick quickly, productivity increases, and children grow healthy and intelligent. If you prevent disease, the most measurable benefit is that the costs incurred will be much less than treating disease (Dewi Rury Arindari et al., 2024). A person's Clean and Healthy Living Behavior is closely related to improving the health of individuals, families, communities, and the environment. Low clean and healthy living behavior achievement levels have obstacles, which include a need for more public knowledge and a lack of counselling costs. For cadres who visit clean and healthy living behavior homes, there is still a lack of support for families and facilities and infrastructure to improve clean and healthy living behavior (Fadilla Paramita et al., 2022).

Lessons learned through communication media, news, and education have increased knowledge, attitude change, and behavior through the approach method of leadership, building an atmosphere, and also making self-enabled movements in community groups. This condition is a form of helpful reflection to help society recognize ide, identify, and solve problems in individual and household settings. The goal is to form a society that adopts a habitual way of life that is healthy in its daily life to improve the degree of health in the home setting, household, or community environment (Wati & Ridlo, 2020).

Health belief model can successfully explain following safety measures behavior during use of household chemical products (HHCP). Motivation factors has the greatest impact on this behavior. Perceived benefits are the person's belief that taking a particular action will help avoid and prevent a problem from happening. This study showed no significant association between perceived benefits and following safety measures, which indicates that

this component had little impact on following healthy behavior (Albadr et al., 2020). Cultivating desire requires strong motivation and must start by providing accurate information and convincing. The Health Belief Model (HBM) is one interpersonal approach aimed at helping individuals implement preventive behavior to a health problem (Kaniawati et al., 2021).

Media Video is a vehicle for conveying information to learner or message transmitter, which is also called hearing aids, teaching materials (instructional material), point of view communication (audio visual communication), visual aids education), educational technology (educational technology), visual aids and explanatory tools (Sutjipto et al., 2022). The art of dance has an essential meaning in human life because it can provide various benefits, such as entertainment and communication. Dance is a part of the arts; in general, it will appear that there are essential elements in it, namely movement and rhythm. Meanwhile, dance expresses the human soul through aesthetic rhythmic movements. As entertainment, dance will be packaged as attractively as possible so that communication can reach the audience. For this reason, the skill of the dance artist in creating dance works for the public is at stake. The aspect that needs to be prioritized is providing presentations by strengthening the choreographic aspect as the main parameter in the creative process. Choreography can be understood as the art or practice of designing sequences of physical body movements and depicting them authentically. Choreography can also refer to the design of the movement. Choreography is created by a choreographer who creates choreography by practicing the art of choreography (Dwi, 2023). The "*Tari Topeng Malangan*" is worth preserving because it comes from local wisdom that is not contaminated by foreign culture and is based on ancient stories (Jannah, 2019).

An educational video about Clean and Healthy Living Behavior that includes elements of local wisdom from Malang, namely "*Topeng Dance and Basa Walikan*," integrates the HBM theory. Incorporating elements of local wisdom is an effective strategy to increase awareness and change people's behavior while preserving local culture and making it easy to understand. The result is the cultivation of Clean and Healthy Living Behavior in the family and community. HBM is a psychological theory that predicts changes in health behavior, components: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy. The "*Topeng*" Dance contains the meaning of life and the human character of being happy, sad, laughing, and embarrassed. The meaning can be seen clearly from the many mask characters in this dance art. The use of "*basa walikan*" is to preserve "*basa walikan*" as local culture. The spread of basa walikan brought by arek Malang while outside Malang caused outsiders to identify "*basa walikan*" as the cultural identity of "*arek Malang*". Using local culture in Clean and Healthy Living Behavior outreach also preserves local wisdom and is easily accepted because it is close to everyday life.

CONCLUSION

Transformation of Clean and Healthy Living Behavior through Educational Videos on Local Wisdom, "*Topeng Dance and Basa Walikan*," can Motivate the New Culture of healthy living behavior in Disease Prevention.

SUGGESTION

Suggestions for future research include conducting cadres empowerment activities so that the healthy living behavior culture can be applied to the wider community.

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CONFLICTS OF INTEREST

The authors declare no conflict of interest.

AUTHOR CONTRIBUTIONS

Frengki Apryanto plays a role in conceptualization, data curation, conducting formal analysis, writing original drafts, searching for supporting reference sources. Rozly Zunaedi carries out investigations, establishing methodology and carrying out validation, data collection. Rahmaniah Ramadhani plays a role in review and editing, optimizing resources and investigations.

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