

Dok. Kurang No. 1_Bukti Korespondensi

- A. **Judul: Factors influencing patient attention toward audiovisual-health education media in the waiting room of a public health center**
- B. **Bukti Korespondensi: Artikel ini dimuat di edisi khusus Kerjasama IJPHR dengan panitia ISOPH. Korespondensi penulis hanya diperkenankan dengan panitia ISOPH, lalu panitia ISOPH yang melanjutkan ke Jurnal, karena ini edisi khusus Kerjasama jurnal dengan panitia ISOPH**

s://mail.google.com/mail/u/0/#search/isoph/FMfcgxmZTRjzSsXXkSdnDSrGHgWZRxD

isoph

ISOPH Indonesia Committee <conference@fkm.unair.ac.id> Wed, Feb 28, 2018, 2:15 PM
to me

Indonesian > English Translate message Turn off for

Kepada Yth. Ibu Sri Widati Santoso

Baik Ibu, terima kasih atas kiriman revisi dari panjenengan.

Best regard,
The 2nd **ISoPH** Committee
Universitas Airlangga

Regards,
The **ISOPH** Committee
Universitas Airlangga

Widati Santoso <widatisantoso@gmail.com> Fri, Nov 19, 2021, 3:23 PM
to dwi.sri.rejeki, mukhammad.hufron

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Mohon Dikonfirmasi (Artikel setelah diproofread) Inbox x

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 **ISOPH Indonesia Committee** <conference@fkm.unair.ac.id>
to me ▾

📧 Mon, Apr 23, 2018, 3:20 PM ☆ ↶ ⋮

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Kepada Yth. Dr. Sri Widati, S.Sos., M.Si.

Berikut Kami kirimkan Folder Artikel yang telah diproofread oleh proofreader yang berisi 2 file:

1. File Artikel asli dengan coretan oleh proofreader

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Kami mohon dapat dicek untuk Folder tersebut.

Bila File Artikel yang telah diproofread **sudah sesuai** dengan maksud dari konten Artikel Bapak/Ibu, Kami mohon dapat melakukan konfirmasi via email dengan mengirimkan kembali folder tersebut.

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Serta, Kami mohon dapat melakukan pengurangan terkait jumlah kata dalam Abstrak (max 200 kata), karena terjadi perubahan jumlah kata dalam Abstrak Ibu setelah dilakukan proofread.

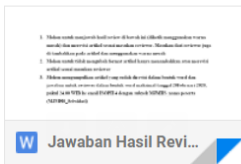
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Best Regards,
The 2nd **ISoPH** Committee
Universitas Airlangga

Dear panitia
Maaf ini masi ada revisi sedikit. Ini yg betul nggih. Maturuwun

salam
sri widati

2 Attachments



ISO PH 4 FKM UNAIR <isoph4fkmunair@gmail.com> Wed, Feb 17, 2021, 9:50 AM

to me
Indonesian English Translate message Turn off for: Indonesian

Selamat Pagi Ibu Sri Widati

Terimakasih, email sudah kami terima dan akan kami teruskan ke pihak jurnal

Hormat Kami
Panitia **ISO PH**

Revisi Sri Widati

Widati Santoso <widatisantoso@gmail.com> Sat, Jul 11, 2020, 3:11 PM
to ISO PH

Dear panitia
berikut saya kirimkan revisi artikel.
trimakasi

wid

2 Attachments

isoph

16 of many

Widati Santoso <widatisantoso@gmail.com> Mon, Feb 22, 2021, 8:49 AM

to ISO PH

Dear panitia.
Ini revisi referensi saya. Figure 1 sdh saya hapus tidak saya pake lagi dan saya juga sudah menghapus semua substansi yang berkaitan dengan itu. Trimakasi
salam
sri widati



ISO PH 4 FKM UNAIR <isoph4fkmunair@gmail.com> Mon, Feb 22, 2021, 5:33 PM

to me

Indonesian > English [Translate message](#) [Turn off for: Indonesian](#)

Selamat Malam bu Wid
Baik ibu, emailnya sudah kami terima dan figurenya tidak ikut kami submit.
Terimakasih
Hormat Kami



ISOPH FKMUNAIR <isoph3fkmunair@gmail.com>

Re: Progress Request-4th ISoPH Articles, 52nd APACPH Collaboration (JPHRes)

7 messages

Emanuela Fusinato <emanuela.fusinato@pagepress.org>
To: ISOPH FKMUNAIR <isoph3fkmunair@gmail.com>

Thu, Jun 25, 2020 at 1:55 PM

Dear Committee,

This is to inform you that you are going to receive in a few minutes the paginated proofs of all the 38 papers included in the Special Issue. Documents for each article (COI form + License) have been already received, thank you.

We would ask you to please collect and provide your corrections within 3-4 working days, so that we can be able to publish the issue by the end of next week.

When checking the proofs, please keep in mind that: *at this stage it is not possible to make any changes other than **minor amendments**: please restrict your alterations to the correction of factual errors or misspellings. Avoid changes that will cause large amounts of text to move to different pages as it will affect the numbering of index entries, creating extra work and cost. Moreover, hyphenation of words is not questionable. Hyphens to separate syllables are automatically generated by the computer program, in accordance with the official English syllabification. Lastly, please note that your article has been edited for Journal style and for standard Editorial rules. Changes that are against Journal style or standard Editorial rules will not be made.*

I'm looking forward to hearing from you.

Thanks for kind co-operation.

Best regards

Emanuela

Emanuela Fusinato
PAGEPress srl
Scientific Publications
via A. Cavagna Sangiuliani 5
27100 Pavia, Italy
T. +39.0382.464340
F. +39.0382.34872
www.linkedin.com/company/3264205



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Il giorno 17 mag 2020, alle ore 08:30, ISOPH FKMUNAIR <isoph3fkmunair@gmail.com> ha scritto:

Dear Nadia, Emanuela and Michele,

I hope this email finds you well.

We would like to apologize in advance for the inconvenience.

This is with regard to our publication progress, is there any update regarding the status of our articles, as the Faculty is currently asking the process of articles.

Several students also need a formal letter of acceptance from the journal for graduation requirements.

Thank you very much for your consideration

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Mon, Mar 23, 2020 at 10:14 PM Nadia Moscato <nadia.moscato@pagepress.org> wrote:
Here attached please find the requested Letter of Agreement, please inform if everything ok.

Thank you in advance for your fine collaboration.

Kind regards,

Nadia Moscato
Head of Journal Division
PAGEPress Srl
Via A. Cavagna Sangiuliani 5
27100 Pavia (Italy)
T. +39.0382.464340
Mobile +39 346 8187868
Skype: nadia_moscato
www.pagepress.org
www.linkedin.com/company/3264205

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types.

Il giorno 20 mar 2020, alle ore 04:58, ISOPH FKMUNAIR <isoph3fkmunair@gmail.com> ha scritto:

Dear Nadia Moscato and all

I hope all is well with you and all families.

I would like to ask for your help regarding the continuing contract between 52nd APACPH Conference/5th ISO PH and Journal of Public Health Research, the University asked us whether you could provide us a formal letter of agreement, which are required on an urgent basis by the academic department.

Thank you so much for your help,

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Tue, Mar 10, 2020 at 2:17 PM ISOPH FKMUNAIR <isoph3fkmunair@gmail.com> wrote:

Dear Emanuela,

Thank you very much for your time and consideration. We look forward to hearing from you about the updates and progress.

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Fri, Mar 6, 2020 at 3:13 PM <emanuela.fusinato@pagepress.org> wrote:

Dear Committee,
Thanks for your message and for sending the material.

Over the next few days we will check that everything is set and then upload the papers on the website, so that we can start the production process.

In case we have any problems, or if anything is missing, we will contact you accordingly.

Thank you for you co-operation.

Best regards

Emanuela Fusinato

Il 6 marzo 2020 alle 4.47 ISOPH FKMUNAIR <isoph3fkmunair@gmail.com> ha scritto:

Dear Nadia Moscato

Editor Journal of Public Health Research,

We would like to apologize as we have been updated our final articles, there should be 38 articles in the list.

These are 38 articles from 4th International Symposium of Public Health, Universitas Airlangga.

Please find all articles and documents of Peer Review Certificate and COI Disclosure in the below link:

<https://drive.google.com/drive/folders/1i8uzkMVGA04PRGk2cAXAlJGeCnAiG3v?usp=sharing>

Thank you very much once again for your considerations,

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Fri, Mar 6, 2020 at 5:26 AM ISOPH FKMUNAIR <isoph3fkmunair@gmail.com> wrote:

Dear Nadia Moscato

Editor Journal of Public Health Research,

I hope this email finds you well.

We would like to submit 37 articles from 4th International Symposium of Public Health, Universitas Airlangga.

Please find all articles and documents of Peer Review Certificate and COI Disclosure in the below link:

<https://drive.google.com/drive/folders/1i8uzkMVGA04PRGk2cAXAlJGeCnAiG3v?usp=sharing>

We would be grateful if you could let us know whether there are any mistakes in documents or there are forms that we also should fill in.

Thank you very much for your considerations,

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Tue, Feb 4, 2020 at 8:37 AM ISOPH3 FKMUNAIR <isoph3fkmunair@gmail.com> wrote:

Thank you very much, we will prepare all documents before submission.

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Mon, Feb 3, 2020 at 7:37 PM Nadia Moscato <nadia.moscato@pagepress.org> wrote:

Dear All,

Thank you for accepting our suggestion to consider the Journal of Public Health Research as the right venue to publish the

Conferences papers.

As requested, please find in attachment the Authors' Guidelines for this journal for the manuscript preparation. The extended version is also available at: <https://www.jphres.org/index.php/jphres/guide>

In the same file you can also find quick info for the Organizer about preparation and submission method.

Should you have any question related to workflow, please feel free to get in touch with Emanuela Fusinato (managing editor of the Journal, copied of this message) or with me.

We remain at your disposal for any further info or detail you might need.

Kind regards,

Nadia Moscato
Head of Journal Division
PAGEPress Srl
Via A. Cavagna Sangiuliani 5
27100 Pavia (Italy)
T. +39.0382.464340
Mobile +39 346 8187868
Skype: nadia_moscato
www.pagepress.org
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Il giorno 3 feb 2020, alle ore 09:22, ISOPH3 FKMUNAIR <isoph3fkmunair@gmail.com> ha scritto:

Dear Nadia,

Thank you very much for the information.
We agree to submit the articles of 4th ISoPH and 52nd APACPH Conference/5th ISoPH to Journal of Public Health Research, as well as the processing charge of 300Euro/article.

Do we have to submit the articles via online system or email?
We also would like to ask you regarding the author guidelines and other documents that we have to prepare during submission.

Thank you very much again,

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

On Fri, Jan 31, 2020 at 5:09 PM Nadia Moscato <nadia.moscato@pagepress.org> wrote:

Dear all,

Thank you for your email.

The authors of the 3rd ISoPH articles can trace, show, download at the direct link:

<https://publichealthinafrica.org/index.php/jphia/issue/view/21> or from the Archives heading on the JPHiA home page. Also, for each article the statistics (number of views, number of downloads) are available, as well as the PlumX Metrics (<https://plumanalytics.com/>)

The site experienced a short maintenance period in which the site pages were not immediately available.

Thank you for informing about the process of the 4th ISoPH papers. As per your specific request, we confirm that it would be possible to publish these papers in a regular issue instead of a supplement. The regular issue does not usually have a special package, however in order to meet your expectations and needs as much as possible and to strengthen our successful cooperation, we can grant a special price of Euro 300 for each article to be published.

Thank you for offering us a further collaboration for the 52nd APACPH Conference / 5th ISoPH. We have visited the official site and are very interested in collaborating with you for this event also.

Regarding the two forthcoming conferences on public health (4th ISoPH and 52nd APACPH Conference / 5th ISoPH), we would like to draw your attention on that the *Journal of Public Health in Africa* is focused on the health issues on the African continent only, while your Conferences are wide-ranging, not related to a specific, restricted geographic area / country.

Thus, we would like you to consider publishing in our *Journal of Public Health Research*, which publishes contributions from both the "traditional" disciplines of public health, including hygiene, epidemiology, health education, etc. as well as from the area of "new health care fields" including social science, population-mental health, gender and disparity issues, global and migration-related themes, etc. The *Journal of Public Health Research* is indexed in Scopus, PubMed, ESCI, DOAJ, CABI.

Both journals are published by PAGEPress, so

you're sure to have a unique reference Publisher, which makes contacts and procedures straightforward and smoothly running.

Looking forward to receiving your feedback.

If you have any further query, please feel free to ask for.

Kind regards,

Nadia Moscato
Head of Journal Division
PAGEPress Srl
Via A.Cavagna Sangiuliani 5
27100 Pavia (Italy)
T. +39.0382.464340
Mobile +39 346 8187868
Skype: nadia_moscato
www.pagepress.org
www.linkedin.com/company/3264205

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Il giorno 30 gen 2020, alle ore 11:20, ISOPH3 FKMUNAIR <isoph3fkmunair@gmail.com> ha scritto:

Dear Nadia Moscato,
Editor Journal of Public Health in Africa

I hope this email finds you well. We have several news and queries with regards to our collaborative publication.

1. We have issues to see 3rd ISoPH articles on the website, as some authors are students who currently preparing for examination, and they have to show the articles on the web. Is there anything that we can do for tackling this issue?
2. We would like to inform you that the scientific

committee of 4th ISoPH is now preparing for article submission, and the papers are still undergoing proofreading services

We will inform you later once it is completed.

Our Head of School is also have a query regarding the type of conference paper, do we have a chance to publish the articles in regular issue, instead of supplement articles.

Is there any special package if we want to publish articles in regular issue for conference papers.

3. We would like to offer you another Conference Collaboration from 52nd APACPH Conference that will be held on 25th to 27th August in Surabaya. This event is also in

conjunction with 5th ISoPH. Detailed information of the conference is available through this link: <https://apacph.conference.unair.ac.id/>

We have also attached APACPH brochure.

We hope that we may continue to strengthen the partnership and cooperation between Journal of Public Health in Africa and Universitas Airlangga. Please let us know if you require any further information regarding the event.

We look forward to a successful conference collaboration in the future.

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia
<apach revisi 30.1.pdf>

ISOPH FKMUNAIR <isoph3fkmunair@gmail.com>
To: Emanuela Fusinato <emanuela.fusinato@pagepress.org>

Thu, Jun 25, 2020 at 2:23 PM

Dear Emanuela,

Thank you very much for the information, we have downloaded the papers.
We will get back to you at the soonest after checking all papers.

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

[Quoted text hidden]

ISOPH FKMUNAIR <isoph3fkmunair@gmail.com>
To: Emanuela Fusinato <emanuela.fusinato@pagepress.org>

Sun, Jun 28, 2020 at 4:07 PM

Dear Emanuela,

We have made corrections for 21 articles by digitally marking in the PDF (highlighted) include affiliation number, missing significance of public health (ID 1840), missing references list (ID 1836), all attached in this email, including the conference logo.

There are several things that we would like to confirm:

1. As we discussed before, on 31st January, Nadia granted us for the regular issue instead of the supplement, for 300Euro per article, is it still available for us?
2. We also would like to request a formal Letter of Acceptance as well as the Invoice from the journal for this issue.

Thank you so much for your help,

Warm Regards

International Symposium of Public Health
Faculty of Public Health
Universitas Airlangga
Indonesia

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2 attachments



Emanuela Fusinato <emanuela.fusinato@pagepress.org>
To: ISOPH FKMUNAIR <isoph3fkmunair@gmail.com>

Wed, Jul 1, 2020 at 1:53 PM

Dear Committee,
Thanks for sending the proofs back. We will made the necessary corrections and then publish the issue in a couple of days.

Just a quick question: we must insert in the papers the dates of submission and acceptance (just a formal requirement). Could you please provide me with a tentative date?

Thank you.
Emanuela

Emanuela Fusinato
PAGEPress srl
Scientific Publications
via A. Cavagna Sangiuliani 5
27100 Pavia, Italy
T. +39.0382.464340
F. +39.0382.34872
www.linkedin.com/company/3264205



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1 **Original article**

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3 **Factors Influencing Patient Attention toward Audiovisual-Health Education Media**
4 **in the Waiting Room of a Public Health Center**

5
6 **Anas Tamsuri,^{1,3} Sri Widati²**

7
8
9 **Abstract**

10 The Public Health Center (Puskesmas) is a primary care in Indonesia which emphasizes
11 on promotive and preventive efforts, as against curative approaches. However, a major
12 challenge has been identified in relation to the limited number of health personnel required to
13 provide education to patients. The objective of this study, therefore, was to determine the
14 impact of personal factors, severity of health problems, environmental situation, and patient
15 activities on the level of attention attributed to the audiovisual media. This involved a post-
16 test only design was used, characterized by the demonstration of 12 kinds of health education
17 video, which ran in the LCD panel at the waiting room. The population consisted of
18 visitors/patients that were 15 years old or older, and a sample size of 124 was selected
19 randomly during study period. Based on the statistical analysis, it was established that age,
20 severity of health problems, environment situation, and visitor activity influence patient
21 awareness to audiovisual media in the waiting room of the Public health center. It is
22 recommended that public health center improve their environment by encouraging patient to
23 pay attention to health media.

Commented [A1]: Please see the template
Complete all the information running title, acknowledgement, etc

24
25 **Introduction**

26 The Public Health Center is primary health care facility, which prioritizes promotive
27 and preventive efforts on an individual and communal basis, in order to achieve the highest
28 level of wellbeing in the region.¹ In addition, health promotion is the primary activity
29 conducted, which is difficult to optimally implement, alongside the curative service
30 orientation.² Conversely, the results of a study in 2017 demonstrated showed a shortage from
31 the technical specifications set by the Indonesia government regulated in Law no. 38 of 2014,
32 in many health promotion workers.²

33 The health educational activities in Ngadi Public Health Center, Kediri Regency, East
34 Java have continuously been conducted once a month in Ngadi Health Center, Kediri
35 Regency, particularly in the visitors' waiting room by the health counselors, which include
36 nurses and midwives. The incidence of less effectiveness has resulted from the inability to
37 reach all targets, and a limitation in health personnel creates a major challenge in
38 improvement approaches, as no particular staff is specifically assigned.

39 Health Promotion is an effort to promote self-help, and develop community-based
40 activities that are in accordance with the local socio-culture, and supported by public health-
41 oriented policies.² Further, health education is viewed as impart health related information to
42 influence values, attitude and motivation of person/ group as well as change their health
43 behavior.^{3,4} The delivery of messages through media (leaflets), posters and video at Public
44 Health Center is expected to help convey health-related information to patients and visitors,
45 and also create good and positive opinions needed to foster and develop an atmosphere to
46 acquire the relevant knowledge.²

47 Video as a audio visual learning media has been used from the era of the Second World
48 War.⁵ The possible benefits of video (audio visual media) in education has been widely
49 investigated in Indonesia, as seen in the study of Syahlani, Ahmad; Tanwiriah, Tanwiriah &
50 Latif, Abdul (2017) wich expolored the effectiveness of health promotion through audio

Commented [A2]: Make it structured abstract
See the guidelines

51 visual media toward motivation of youth, and study of Arneliwati ; Agrina; and Dewi, Ari
52 Pristiana (2019) who explored the effectiveness of health education using audiovisual media
53 on increasing family behavior in preventing dengue hemorrhagic fever (DHF).^{5,6}

Commented [A3]: Please add the significance of the study
The aim of study

54 55 **Design and Methods**

56 This research used quantitative methods with experimental design, which involved the
57 creation of educational videos and information (regarding the obtainable services) in the
58 waiting room. This process required the Sparkol Videoscript software, where the media
59 produced contain elements of sound (music), picture and words, featuring 60-180 seconds
60 duration for each file. Furthermore, the 12 educational videos covering Public Health
61 services, as well as health and affiliated behaviors were displayed in the visitors' waiting
62 room. These include the area for registration and general treatment, examination of pregnant
63 women and dental care, and also in the place where drugs and cash are taken. A sample of
64 124 study visitors aged over 18 years was selected by using systematic random sampling. In
65 addition, the Data was collected within the first two weeks of video media installation in the
66 waiting room of the Public health center. Ordinal Regression was used for data analysis to
67 identify the strength of each factor in influencing patient attention.

68 69 **Results**

70 The results of study showed demographics of respondents, respondent perception of
71 disease, respondent perception toward environment, respondent activity, respondent's level of
72 attention as shown in tables 1,2,3 and 4 respectively.

Commented [A4]: Please add the narration of table 1

73 The perception of disease severity was obtained through measurements conducted with
74 a semantic differential scale in the range of 0-10. The results showed 0 as the lowest severity
75 degree value, while the highest was attained at point 3, with an average perception of 3.411,
76 and a standard deviation of 1.672. These values indicate mild severity scale, hence public
77 health center is assumed to provide basic/essential services to the immediate community.

78 Table 2 show that most respondents (44.35%) perceive the environmental conditions/
79 situations in the waiting room as a source of mild disturbance. Based on the results as show in
80 Table 2, a majority of respondents (52.42%) were engaged in no activities while awaiting the
81 services. However, some individuals tend to perform light actions, including talking, and the
82 use of mobile phones, while a small number participated in moderate activities, which
83 include holding or inviting children to play.

84 Respondent's level of attention respondents attribute to the media was subjectively
85 measured as show in Table 2. The results showed the provision of moderate to high level of
86 attention by most respondents.

87 The results of ordinal regression test in Table 3 with the Complementary Log-Log
88 function approach showed an intercept only value (without an independent variable) of
89 338.275, which became 147.824 after adding a final variable in the Fitting Information 2log
90 likelihood Model. Furthermore, the difference in value represents a Chi-Square of 190.451,
91 which is significant at a level of 5% (Sig 0.000). The Goodness of Fit from Pearson and
92 Deviance was Sig. 0.994 and 1.000, which were both greater than 0.05, indicating the
93 suitability of this model to explain the effect of independent on dependent variable. In
94 addition, a pseudo R Square Table shows Cox and Snell value of 0.785 and Nagelkerke of
95 0.840, which indicate the ability for independent variables (severity, environmental
96 influences, and activities of respondents) to respectively predict the independent (attention) at
97 78.5% and 84.0%.

98 The parameter estimation table shows the effect of each factor as follows in table 3.
99 The statistical results identified the Wald's value for age to be 7.589 (sig. 0.006), which was
100 0.381 (sig. 0.537) for gender, with education level at 1.682 (sig. 0.95), employment 0.369

101 (sig. 0.544), severity of 4.045 (sig. 0.544), environmental situation of 56,358 (sig. 0,000) and
102 14,095 (sig. 0,000) for activity. These results, therefore, indicate the influence of disease
103 severity, environment, and respondent activity variables on the attention of Public health
104 center visitors to media.

106 **Discussions**

107 Age is a factor that is closely relates with the mental development of an individual, as
108 well as attention. The results show better alertness in younger than older people (in this study,
109 the age category is 18-21 years, while the age group is 61-87 years).⁸ In addition, attention is
110 a psychological phenomenon known to interact with other cognitive processes, including
111 perception, memory, production of linguistic, as well as spatial orientation and behavioral
112 planning.⁹ This functional development is general influenced by the neurological maturation
113 of certain areas in the brain. Conversely, executive operations are often associated with the
114 slower maturation of frontal and prefrontal cortex, while those in the parietal and back (visual
115 or spatial attention) are involved in basic attention processes. This study outcome implies that
116 chronological age influences personal attention performance during development.^{12,13}

117 In addition, the male and female respondents encompass 60 (48.39%), and 64 (51.61%)
118 individuals, respectively. These value are congruent with the outcome of a previous study by
119 Arneliwati, Agrina and Dewi, which showed a larger number of female than male visitors.⁶
120 Meanwhile, the Public Health Center provide services for women experiencing health
121 challenges, and also for the healthy, encompassing pregnancy checks, postpartum, and
122 contraceptive services.

123 Some differences were observed between both sexes in the level of attention attributed
124 to an object, and women had a higher tendency to pay more attention to symbolic items.¹² In
125 addition, gender is assumed to contribute towards the ability to provide selective attention,
126 which was dependent on the type of information provided, as reported in some studies.¹³
127 However, this results showed the absence of any gender-based effect.

128 The highest level of education for most visitors, including 70 individuals (56.45%) was
129 high school, which is probably due to the rural location of the Public Health Center facility in
130 Ngadi. This result was consistent with a research by Arneliwati, Agrina and Dewi.⁶

131 Other investigations affiliated a higher level of education with better attentiveness,
132 especially at advanced levels, as seen with divided and sustained attention. However, the
133 inverse is observed with students at low-class, which also indicates the influence of age,
134 hence it is believed that education trains an individual to increase attention.¹⁴

135 A total of 48 people (38.71%) were reported to work as farmers, which is possibly due
136 to the fact that most people live in the rural area. The results showed the absence of any
137 impact of work type and the visitors' attention.

138 Some occupations tend to promote certain forms of cognitive functions, which is
139 strongly influenced by the length of time allocated to work, and types performed.¹⁵ In
140 addition, the habit of working in stressful, noisy, or hot situations enhances the
141 acclimatization of workers to the management of these stimuli.¹⁵ However, the availability of
142 relatively quiet and comfortable conditions in the waiting room was believed to suppress the
143 feeling of interruption, hence the type of work has no influence on the attention attributed to
144 the audiovisual media.

145 The assessment results showed disease severity in the average range of 3.411, with a
146 standard deviation of 1.672 in a majority of visitors. This indicates the first-level health care
147 services at Public Health Center were at mild levels, based on the basic services provided.
148 Hence, more complex health challenges are generally referred to higher health institutions.

149 An individuals' health status or biological condition was observed to strongly influence
150 attention, which consists of several tasks in the focused, sustained, shifting, and divided

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151 forms. Therefore, people with challenges are assumed to participate in inhibitory control,
152 characterized by the allocation of more attention to the conditions, and less to the
153 surrounding.¹⁶

154 Most respondents (44.35%) described the environmental conditions/situations in the
155 waiting room as a source of mild disturbance, which subsequently influences the degree of
156 attention.^{9,16} Therefore, humans have a high tendency to make adaptive efforts towards
157 various environmental circumstances.¹⁶ The results obtained also showed the poor ability for
158 the health center environment to influence attention, which was probably due to the amount
159 of visitors, and the relatively small noise.

160 Most of the visitors were not engaged in any activities while in the waiting room, as
161 excessive levels have been affiliated with reduced attention to a stimulus. This phenomenon
162 possibly results from the energy and special concentration required,¹⁶ which is actively
163 focused on self or the activity without distractions from other stimuli. Meanwhile, sustained
164 attention is defined as the ability for an individual to retain concentration over prolonged
165 periods.⁸

167 Conclusions

168 Based on the results and discussion of this study, concluded that the attention attributed
169 to audiovisual education media was influenced by the age of the visitor, patients' disease
170 severity, environmental situation and visitor acitivity. The gender, level of education and type
171 of work did not influence the individual toward their attention to audiovisual education
172 media.

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205
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207 **Table 1. Characteristics of Respondents**

Category	N= 104	%
Sex		
Male	60	48.39
Female	64	51.61
Age		
15-24 years	24	19.35
25-34 years	30	24.19
35-44 years	35	28.23
45-59 years	35	28.23
Education level		
Elementary School	6	4.84
Junior High School	30	24.19
Senior High School	70	56.45
University	18	14.52
Occupation/ Working status		
Student	12	9.68
Housewife/not working	44	35.48
Farmer	48	38.71
Trader	7	5.65
Entrepreneur	4	3.23
Private employer	5	4.03
Government Employee	4	3.23

208
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210
211 **Table 2. Perception of environment situation, Activity, Attention Towards Media**

Category	n	%
Perception of Environment		
No disturbance	17	13.71
mild disturbance	55	44.35
Medium disturbance	40	32.26
Severe disturbance	12	9.68
Activity		
No activity	65	52.42
Mild activity	41	33.06
Medium activity	18	14.52
Attention toward media		
Unaware	0	0
No attention	24	19.35

Category	n	%
Perception of Environment		
Mild attention	25	20.16
Moderate attention	38	30.65
High attention	37	29.84

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Table 3. Factors Influencing Patient Attention Towards Audiovisual-Health Education Media

Factors	Wald	Sig. (2-tailed)	Odds Ratio
Age	7.589	0.006	1.04
Sex	0.381	0.537	
Education Level	1.682	0.195	
Occupation	0.369	0.544	
Severity	4.045	0.044	0.86
Environment Situation	56.358	0.000	0.61
Activity	14.095	0.000	0.52

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1 **Original article**

2

3 **Factors Influencing Patient Attention toward Audiovisual-Health Education Media**
4 **in the Waiting Room of a Public Health Center**

5

6 **Anas Tamsuri,^{1,3} Sri Widati²**

7

8 ¹Doctoral Program of Public Health, Faculty of Public Health, Universitas Airlangga,
9 Mulyorejo, Surabaya Indonesia

10 ²Department of Health Promotion and Behavioral Sciences, Faculty of Public Health,
11 Universitas Airlangga, Mulyorejo, Surabaya Indonesia

12 ³Pamenang School of Health School, Kediri, East Java, Indonesia

13

14 **Running Title:** Patient attention toward health education media

15 **Acknowledgment:** The authors are grateful to the teachers of Universitas Airlangga, and
16 colleagues at Pamenang School of Health for the support.

17 **Correspondence:** Sri Widati, Department of Health Promotion and Behavioral Sciences,
18 Faculty of Public Health, Universitas Airlangga, Jl. Mulyorejo, Surabaya, Jawa Timur 60115,
19 Indonesia, Ph: +62315920948, Fax: +62315924618, Email: sri-widati@fkm.unair.ac.id.

20 **Key words:** Patient Attention; Health Education; Audio-Visual Media; Public Health Center

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27 **Contributions:** The authors contributed equally to this study. Anas Tamsuri developed
28 theoretical and frameworkd analysis, and collected data. Sri Widati supervised the project,
29 performed data analysis and prepared manuscript.

30 **Conflict of interests:** The authors declare no potential conflict of interest.

31 **Funding:** The study was financially supported by Universitas Airlangga

32 **Clinical trials:** The study did not involve any clinical trials

33 **Conference presentation:** A part of this paper was presented at the 4th International
34 Symposium of Public Health, 2019 October 29-31, Griffith University, Gold Coast, Australia.

35

36 **Significance for Public Health:**

37 Health education's main aim is to improve knowledge, attitude and behavior of
38 individual and community to improve their health status. Usage of audio visual aid as media
39 for health education can be one of strategy to overcome the limitation of health counselor.
40 This paper describes patient attention toward audio visual media and factors influencing their
41 attention toward media at public health center.

42

43 **Abstract**

44 *Background:* The Public Health Center (Puskesmas) is a primary care in Indonesia
45 which emphasizes on promotive and preventive efforts, as against curative approaches.
46 However, a major challenge has been identified in relation to the limited number of health
47 personnel required to provide education to patients. The objective of this study, therefore,
48 was to determine the impact of personal factors, severity of health problems, environmental
49 situation, and patient activities on the level of attention attributed to the audiovisual media.

50 *Design and Methods:* This involved a post-test only design was used, characterized by
51 the demonstration of 12 kinds of health education video, which ran in the LCD panel at the
52 waiting room. The population consisted of visitors/patients that were 15 years old or older,
53 and a sample size of 124 was selected randomly during study period.

54 *Results:* Based on the statistical analysis, it was established that age, severity of health
55 problems, environment situation, and visitor activity influence patient awareness to
56 audiovisual media in the waiting room of the Public health center.

57 *Conclusions:* It is recommended that public health center improve their environment by
58 encouraging patient to pay attention to health media.

59

60 **Introduction**

61 The Public Health Center is primary health care facility, which prioritizes promotive
62 and preventive efforts on an individual and communal basis, in order to achieve the highest
63 level of wellbeing in the region.¹ In addition, health promotion is the primary activity
64 conducted, which is difficult to optimally implement, alongside the curative service
65 orientation.² Conversely, the results of a study in 2017 demonstrated showed a shortage from
66 the technical specifications set by the Indonesia government regulated in Law no. 38 of 2014,
67 in many health promotion workers.²

68 The health educational activities in Ngadi Public Health Center, Kediri Regency, East
69 Java have continuously been conducted once a month in Ngadi Health Center, Kediri
70 Regency, particularly in the visitors' waiting room by the health counselors, which include
71 nurses and midwives. The incidence of less effectiveness has resulted from the inability to
72 reach all targets, and a limitation in health personnel creates a major challenge in
73 improvement approaches, as no particular staff is specifically assigned.

74 Health Promotion is an effort to promote self-help, and develop community-based
75 activities that are in accordance with the local socio-culture, and supported by public health-
76 oriented policies.² Further, health education is viewed as impart health related information to
77 influence values, attitude and motivation of person/ group as well as change their health
78 behavior.^{3,4} The delivery of messages through media (leaflets), posters and video at Public
79 Health Center is expected to help convey health-related information to patients and visitors,
80 and also create good and positive opinions needed to foster and develop an atmosphere to
81 acquire the relevant knowledge.²

82 Video as a audio visual learning media has been used from the era of the Second World
83 War.⁵ The possible benefits of video (audio visual media) in education has been widely
84 investigated in Indonesia, as seen in the study of Syahlani, Ahmad; Tanwiriah, Tanwiriah &
85 Latif, Abdul (2017) wich explored the effectiveness of health promotion through audio
86 visual media toward motivation of youth, and study of Arneliwati ; Agrina; and Dewi, Ari
87 Pristiana (2019) who explored the effectiveness of health education using audiovisual media
88 on increasing family behavior in preventing dengue hemorrhagic fever (DHF).^{5,6}

89 The main challenge in this study was the deficiency in information on the natural
90 response (attention attributed) of Public Health Center outpatient visitors toward audio-visual
91 education media in the waiting room, and also the responsible influencing factors. The
92 purpose of this study, therefore, was to determine the impact of demographic factors,
93 including age, sex, occupation, and education level, and also the effect of environment,
94 disease severity and level of activity on visitor attention to audio-visual education media in
95 the waiting rooms of Public Health Centers.

96

97 **Design and Methods**

98 This research used quantitative methods with experimental design, which involved the
99 creation of educational videos and information (regarding the obtainable services) in the
100 waiting room. This process required the Sparkol Videoscript software, where the media
101 produced contain elements of sound (music), picture and words, featuring 60-180 seconds
102 duration for each file. Furthermore, the 12 educational videos covering Public Health
103 services, as well as health and affiliated behaviors were displayed in the visitors' waiting
104 room. These include the area for registration and general treatment, examination of pregnant
105 women and dental care, and also in the place where drugs and cash are taken. A sample of
106 124 study visitors aged over 18 years was selected by using systematic random sampling. In
107 addition, the Data was collected within the first two weeks of video media installation in the
108 waiting room of the Public health center. Ordinal Regression was used for data analysis to
109 identify the strength of each factor in influencing patient attention.

110

111 **Results**

112 The results of study showed demographics of respondents, respondent perception of
113 disease, respondent perception toward environment, respondent activity, respondent's level of
114 attention as shown in tables 1,2,3 and 4 respectively.

115 Table 1 show that the gender of respondent distributed equally, highest level of
116 education is Senior High School, and most participant occupation is farmer. Age of
117 participant is distributed equally.

118 The perception of disease severity was obtained through measurements conducted with
119 a semantic differential scale in the range of 0-10. The results showed 0 as the lowest severity
120 degree value, while the highest was attained at point 3, with an average perception of 3.411,

121 and a standard deviation of 1.672. These values indicate mild severity scale, hence public
122 health center is assumed to provide basic/essential services to the immediate community.

123 Table 2 show that most respondents (44.35%) perceive the environmental conditions/
124 situations in the waiting room as a source of mild disturbance. Based on the results as show in
125 Table 2, a majority of respondents (52.42%) were engaged in no activities while awaiting the
126 services. However, some individuals tend to perform light actions, including talking, and the
127 use of mobile phones, while a small number participated in moderate activities, which
128 include holding or inviting children to play.

129 Respondent's level of attention respondents attribute to the media was subjectively
130 measured as show in Table 2. The results showed the provision of moderate to high level of
131 attention by most respondents.

132 The results of ordinal regression test in Table 3 with the Complementary Log-Log
133 function approach showed an intercept only value (without an independent variable) of
134 338.275, which became 147.824 after adding a final variable in the Fitting Information 2log
135 likelihood Model. Furthermore, the difference in value represents a Chi-Square of 190.451,
136 which is significant at a level of 5% (Sig 0.000). The Goodness of Fit from Pearson and
137 Deviance was Sig. 0.994 and 1.000, which were both greater than 0.05, indicating the
138 suitability of this model to explain the effect of independent on dependent variable. In
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141 influences, and activities of respondents) to respectively predict the independent (attention) at
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161 chronological age influences personal attention performance during development.^{10,11}

162 In addition, the male and female respondents encompass 60 (48.39%), and 64 (51.61%)
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208 focused on self or the activity without distractions from other stimuli. Meanwhile, sustained
209 attention is defined as the ability for an individual to retain concentration over prolonged
210 periods.⁸

211

212 **Conclusions**

213 Based on the results and discussion of this study, concluded that the attention attributed
214 to audiovisual education media was influenced by the age of the visitor, patients' disease
215 severity, environmental situation and visitor activity. The gender, level of education and type
216 of work did not influence the individual toward their attention to audiovisual education
217 media.

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265 **Table 1. Characteristics of Respondents**

Category	N= 104	%
Sex		
Male	60	48.39
Female	64	51.61
Age		
15-24 years	24	19.35
25-34 years	30	24.19
35-44 years	35	28.23
45-59 years	35	28.23
Education level		
Elementary School	6	4.84
Junior High School	30	24.19
Senior High School	70	56.45
University	18	14.52
Occupation/ Working status		
Student	12	9.68
Housewife/not working	44	35.48
Farmer	48	38.71
Trader	7	5.65
Entrepreneur	4	3.23
Private employer	5	4.03
Government Employee	4	3.23

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269 **Table 2. Perception of environment situation, Activity, Attention Towards Media**

Category	n	%
Perception of Environment		
No disturbance	17	13.71
mild disturbance	55	44.35
Medium disturbance	40	32.26
Severe disturbance	12	9.68
Activity		
No activity	65	52.42
Mild activity	41	33.06
Medium activity	18	14.52
Attention toward media		
Unaware	0	0
No attention	24	19.35
Mild attention	25	20.16
Moderate attention	38	30.65
High attention	37	29.84

270

271 **Table 3. Factors Influencing Patient Attention Towards Audiovisual-Health Education**
 272 **Media**

273

Factors	Wald	Sig. (2-tailed)	Odds Ratio
Age	7.589	0.006	1.04
Sex	0.381	0.537	
Education Level	1.682	0.195	
Occupation	0.369	0.544	
Severity	4.045	0.044	0.86
Environment Situation	56.358	0.000	0.61
Activity	14.095	0.000	0.52

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LETTER OF ACCEPTANCE

This letter serves as a formal acceptance between “Universitas Airlangga, Faculty of Public Health” and “PAGEPress Publications”.

PAGEPress Publications provided the publishing of the following publication services:

Proofreading / Corrections, online publication of the regular issue dedicated to the 4th International Symposium of Public Health (ISOPH) 2019 (38 papers)

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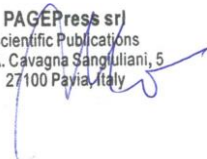
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