

Effect of Health Counseling on *Tinea Pedis* on Farmers Attitudes in Prevention of *Tinea Pedis* in Sukodono Village, Karangrejo District, Tulungagung Regency, 2017

Farida^{a, 1, *}

^a STIKes Hutama Abdi Husada Tulungagung, Jl. Dr. Wahidin Sudiro Husodo, Tulungagung, Indonesia

¹ poprimf@gmail.com*

* corresponding author

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ABSTRACT

Tinea Pedis (athlete's foot) is a water flea disease caused by fungi *Trichophyton*, *Epidermophyton*, and *Microsporum*. *Tinea pedis* often attacks farmers and washers. In 2015 there were *Tinea pedis* 230 cases of in Tulungagung. The case occurred because the community was not well informed and understood about *Tinea Pedis*. The purpose of this study was to determine the effect of health education about disease *Tinea Pedis* on the attitude of farmers in the prevention of disease *Tinea Pedis* in Sukodono Village, Karangrejo District, Tulungagung Regency. The research design was *One-Group Pre-post Test Design*. The study population was all farmers in Sukodono Village. The number of samples was 79 people selected by *purposive sampling technique*. Data was taken using a questionnaire sheet. Data is processed by techniques *Editing, Coding, Scoring* and *Tabulating*. Data analysis with Wilcoxon statistical test. The results showed that before counseling only 30 respondents (38%) had good attitudes and after counseling there were 53 respondents (67%) who had good attitudes. The results of statistical tests show that there is an influence of health education on changes in attitudes of farmers in Sukodono Village ($p = 0,000$ $\alpha = 0.05$). Providing health information is very important to be carried out continuously, especially among farmers. This proved useful to change the attitude of farmers in the prevention and control of cases of *Tinea pedis*.

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I. Introduction

In the medical world, *Tinea pedis* is often called *athlete's foot*. Lay people often refer to this disease as water lice. The three main fungi that cause *Tinea Pedis* are *Trichophyton*, *Epidermophyton*, and *Microsporum*. The case of *Tinea Pedis* often occurs in farmers because of the occurrence of repeated direct contact in a wet place, namely the rice field area. Risk factors causing *Tinea Pedis* are behaviors *host* that are influenced by several factors. The factors that influence these behaviors are knowledge and attitude. In addition to behavior, the risk factors for *Tinea Pedis* are endurance, environment, physical factors, chemicals, microbiology and *personal hygiene*[1].

Health education is an effort to provide one's knowledge and abilities through learning practice techniques or instructions with the aim of changing and influencing human behavior with the aim of individuals, groups, and society. Health education aims to make the target become independent in achieving the goals of healthy life [2]. Counseling can be done to reduce the incidence of *Tinea Pedis*, which is to change the attitude of farmers to be more concerned about health by increasing the level of knowledge.

Based on this background, researchers are interested in conducting research with the title "The Effect of Health Counseling on Disease *Tinea Pedis* Against the Attitudes of Farmers in the Prevention of *Tinea Pedis*".

II. Proposed Method

This research has gone through the stages of research proposals, licensing and *ethical clearance* by the STIKes Ethics Commission Hutama Abdi Husada Tulungagung. The instruments used in this study have also been tested for validity and reliability. Validity and reliability tests were carried out on other similar population groups and then analyzed the validity of the instrument.

III. Method

design of the study was *Quasy Experimental* with the design of *one group pre test - post test design*. This design does not use a control group. This design seeks to strengthen the causal relationship in the group by comparing the results of the pre-test and post-test but without comparing the effects imposed in other groups [3]. Inclusion criteria are farmers who are willing to become respondents, farmers who can read and write, farmers who always have direct contact with rice fields. The research instrument is facility tools used by researchers in collecting data so that the work is easier and the results are better in the sense of being more careful, complete and systematic so that it is easily processed [4]. In this study the instrument used was a questionnaire sheet.

Data analysis using the *Wilcoxon sign range test* using a computer using the SPSS technique (*Statistical Product and Service Solution Version 16 Windows*). To determine the level of significance between the variables in a meaningful measurement of the influence of the significance level of $p < 0.05$ means H_0 is rejected and H_1 accepted, it means that there is influence between the variables measured, when $P \geq 0.05$ means that H_0 is received and H_1 rejected means no effect

IV. Results and Discussion

Table 1. Frequency distribution of respondents attitudes about *Tinea Pedis* before extension Guide

attitude	Number	Percentage
Good	30	38%
Less	49	62%
Total	79	100%

^a Source: Questionnaire Research, 2017

Table 1 shows the distribution of respondents' attitudes before the extension. Of the 79 respondents most (n = 49; 62%) had a bad attitude towards *Tinea Pedis*. After counseling, most of the respondents (n = 53; 67%) had a good attitude. Distribution attitude after the extension is shown in Table 2.

Table 2. Frequency Distribution of Respondents on attitude *Tinea Pedis* after Extension Guide

attitude	Number	Percentage
Good	53	67%
Less	26	33%
Total	79	100%

^b Source: Questionnaire Research, 2017

Results of statistical analysis using *Wilcoxon Sign Test Range* at level Significantly $\alpha = 0.05$, the result is p value = 0,000. This shows that H_0 is rejected, which means that there is an effect of giving health education to farmers' attitudes in preventing disease *Tinea Pedis*.

Distribution of categories of less good attitudes is found in respondents before getting counseling. Poor attitudes indicate the low level of knowledge of respondents before counseling. If citizens have a low level of knowledge about clean and healthy behavior, it can increase the incidence of disease cases. [5]

There are several factors that can affect one's attitude, namely personal experience, culture, important figures, mass media, and educational provision [6]. Education consists of formal (formal school) and non formal (courses, seminars, training etc.). Knowledge as one of the things that influence the formation of attitudes. PHealth Education (counseling) can change a person's attitude for the better. The educational process can instill a moral concept in the individual [7]. Providing good and targeted information can increase a person's level of knowledge even though the person has a low level of formal education [8].

The results of this study indicate that health education plays an important role in improving one's attitude for the better. Therefore the researchers argue that the provision of health information is very important, including to farmers, in the health sector this has proved useful to improve the attitudes of farmers without ignoring the age and education of respondents in this case the farmers.

The material or message conveyed in health education must be adapted to the health needs of individuals, families, groups and communities, so that the material presented can be directly felt by the benefits. The material is conveyed using language that is easy to understand, not too difficult to understand by the target, in the delivery of material we should use methods and media to facilitate understanding and to attract the attention of the target or audience. From the purpose of health education (counseling) itself is to change knowledge, opinions of concepts, to change attitudes and perceptions, to instill new behaviors and habits [9].

The results of this study are in accordance with the theory and facts that occurred at the study site. This shows that by giving information the level of knowledge will increase so that it can affect one's attitude. The level of education affects someone receiving information and gaining knowledge. This shows that the higher the level of knowledge is in line with the better the level of attitude it has [9].

Attitudes are divided into two types, namely positive and negative. Positive attitude is the tendency of action in the form of approaching, liking, and expecting certain objects. Negative attitude is the tendency to stay away from, avoid, hate, dislike certain objects [10].

This research can prove that providing information through health education can affect knowledge. Good knowledge can work together with a good attitude. The results of this study should be used as a basis for providing counseling to farmers about *Tinea Pedis* by related parties.

V. Conclusion

conclusions of this study are:

1. Distribution of respondents' attitudes before being given health education about *Tinea Pedis* shows the proportion of respondents who have aattitudefavorableas many as 30 respondents (38%) and unfavorable (*Unfavorable*) as many as 49 respondents (62%).
2. Distribution of the attitude of respondents after being given health education about *Tinea Pedis* from 79 respondents who had a good attitude (*Favorable*) as many as 53 respondents (67%) and unfavorable (*Unfavorable*) as many as 26 respondents (33%).

3. There is the influence of giving counseling about disease *Tinea Pedis* to the attitude of farmers in the prevention of disease *Tinea Pedis*.

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Thanks to District Health Office of Tulungagung. According to this research, it is advisable to: increase the continuity of facilities and health education to implement *Tinea Pedis Prevention* programs such as availability in rice fields, socializing the use of boots among farmers etc. It is recommended to improve health education on a level of health center.

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