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BASIC LIFE SUPPORT TRAINING EFFECT (BLS) IN THE LAY OF KNOWLEDGE AND BEHAVIOR MANAGEMENT CARDIAC ARREST IN RT 14 RW 03 BLIMBING SUB DISTRICT DONGKO TRENGGALEK By : Novita Ana Anggraini Rahmania Ambarika Alfian Fawzi Shanty Natalia Suci Anggraeni Agusta Dian Ellina SURYA MITRA HUSADA KEDIRI HEALTH COLLEGE ABSTRACT BASIC LIFE SUPPORT TRAINING EFFECT (BLS) IN THE LAY OF KNOWLEDGE AND BEHAVIOR MANAGEMENT CARDIAC ARREST IN RT 14 RW 03 BLIMBING SUB DISTRICT DONGKO TRENGGALEK Novita Ana Anggraini-1, Rahmania Ambarika-1, Alfian Fawzi-1, Suci Anggraeni-1, Agusta Dian Ellina-1, Shanty Natalia-2 1Lecturer of Nursing Program 2Lecturer of Midwifery Program Surya Mitra Husada Health College Jl.Manila No.37 Sumberece Kediri City Death occurs usually because of the inability of rescuers to handle patients in the emergency phase.

Inability is caused by the severity, inadequate equipment, knowledge is still lacking. The purpose of this study was to determine the effect of the Basic Life Support Training (BHD) In Layman Of Knowledge And Behavior Management Cardiac Arrest. This study uses a pre-experimental one-group pre-test post-test design.

Population All residents in RT 14 RW 03 Blimbing Village District of Dongko Trenggalek totaling 450 households. Sampling technique purposive sampling with a sample of 30 respondents. The research instrument used SOP sheets and questionnaires. Most respondents 67% (20) before being given training BHD less knowledge and all respondents 100% (30 people) behavior less.

Most respondents 67% (20) after the training given BHD knowledge of good and almost all respondents 76.5% (23) after the training given BHD has a good conduct in providing help. Statistical test results obtained p-value for the knowledge and behavior is 0.000>

0.05 means that there is an influence reject H_0 conclusion BHD Training In Layman Of Knowledge And Behavior Management Cardiac Arrest.

Factors that affect the knowledge and behavior of which is educational level, and provision of information, of the results showed with the provision of information can influence knowledge and behavior in the handling of cardiac arrest. Keywords: Basic Life Support Training, a layman, Knowledge, Behavior, Cardiac Arrest

INTRODUCTION Emergency conditions can occur anywhere, anytime and it is the duty of health workers to deal with the problem.

Even so, it is not possible that emergency conditions can occur in areas that are difficult to help victims before being found by health workers to be very important. Most Indonesian people from non-medical or lay circles cannot recognize the signs of an emergency. Because, ordinary people in Indonesia are not trained in handling emergency conditions.¹ Emergency conditions such as heart attack.

Data from the World Health Organization (WHO) states that heart attacks are still the number one human killer in developed countries and developing by contributing 60 percent of all deaths. In the last two years, traffic accidents in Indonesia by the World Health Organization (WHO) are considered to be the third largest killer, under coronary heart disease and tuberculosis (TB).²

From the results of a preliminary study in Dongko Subdistrict, the village area where the youth activities and the organization are running well is Blimbing Village, and there are many people who suffer from heart disease. The results of the interview on January 12, 2015 in Dongko Village on 20 residents, 10 people said they did not know what action to take if there were people who were suddenly unconscious, 4 people said they were confused about what action to do if someone fainted, 3 people said they immediately called a health worker, 2 people said they would do a heart massage, and 1 person would check whether the person had died or not.

Death occurs usually due to the inability of rescuers (residents or health workers) to deal with patients in the golden period. This inability can be caused by the severity, inadequate equipment, lack of an integrated system and lack of knowledge in emergency response, the right help in handling emergency cases is Basic Life Support.³ states that basic life support (BLS) can be taught to anyone.

Every adult should have BLS skills, even children can also be taught according to their capacity. All levels of society should be taught about basic life support especially for workers related to the provision of safety assistance⁴. One of the factors that influence a person's behavior is the level of knowledge.

Knowledge is the result of knowing, and this happens after people sensing a particular object. Most human knowledge is obtained through the eyes and ears (seeing and hearing). Knowledge is also very close to education, because knowledge is obtained through both formal and informal education⁵.

CPR education and training for health workers and lay people is very important in order to reduce "Sudden Death", because the most occurrence is outside the Hospital. One of the bright ideas of modern medical science is that "sudden death" can be reduced. Initial handling **in the first minutes** determines the fate of the victim. This can be done by all of us, everywhere. All that is needed is our hands⁶.

The purpose **of this study was to determine the effect of Basic life support Training (BLS) on Laymen on Knowledge and Behavior of Heart Stop Treatment in RT 14 RW 03 Blimbing Village, Dongko District, Trenggalek Regency.** MATERIALS AND METHODS OF RESEARCH The research design used was a Pre-experimental one-group pre-test post-test design, **this study was to determine the effect of Basic life support Training (BLS) on Laymen on Knowledge and Behavioral Handling of Heart Disease.** Independent variables In this study **Basic life support (BLS) training.**

the dependent variable is the knowledge and behavior of **cardiac arrest in RT 14 RW 03 Blimbing Village, Dongko District, Trenggalek District.** The study was conducted **in RT 14 RW 03 Blimbing Village, Dongko District, Trenggalek Regency on August 27, 2015.** With 30 respondents. By using purposive sampling technique. Wilcoxon **Test was carried out** with a significance level or $\alpha = 0.05$ using a computer program.

RESEARCH RESULTS AND DISCUSSION No. _GENERAL DATA __ _Description _Code
_Amount _% __1 _Gender _1. Male _15 _50 ___2. Women _15 _50 __2 _Age _1. <20
years _2 _7 ___2. 20-25 years _2 _7 ___3. 26-30 years _17 _56 ___4. > 30 years _9
_30 __3 _Education _1. Elementary _8 _27 ___2. Middle school _13 _43 ___3. High
school _9 _30 __4 _Job _1. Student _4 _13 ___2. Entrepreneur _7 _23 ___3. Civil
servant _6 _20 ___4.

Farmers _13 _43 __5 _Information about BLS _1. Never _24 _80 ___2. Ever _6 _20 __6
_Ever helped people _1. Never _27 _90 ___2. Ever _3 _10 __ The sex of the respondents
is the same number of men and women, namely 50%, more than half of the
respondents, 56% are 26-30 years old, almost half of the respondents are 43% of
secondary education, almost half of the respondents are 44% working as farmers
Knowledge before being given **Basic Life Support (BLS) training.**

No _Knowledge before _Amount _Percentage __1 2 3 _Less Enough Good _20 7 3 _67 23
10 __ _Amount _Amount _30 __ _most respondents 67% (20 people) before being given
Basic Life Support (BLS) training have less knowledge. Behavior before being given Basic
Life Support (BLS) training No _Behavior before _Amount _Percentage __1 2 3 _Less
Enough Good _30 0 0 _100 0 0 __ _Amount _Amount _30 __ _All respondents 100% (30
people) before being given **Basic Life Support training** have less behavior in providing

help in handling cardiac arrest.

Knowledge after being given **Basic Life Support (BLS) training** No_Knowledge after
_Amount_Percentage __1 2 3 _Less Enough Good _5 5 20 _16,5 16,5 67 _Amount
_Amount_30 __Most respondents 67% (20 people) after being given **Basic Life Support
training** have good knowledge. Behavior after being given Basic Life Support (BLS)
training No_Behavior after _Amount_Percentage __1 2 3 _Less Enough Good _2 5 23 _7
16,5 76,5 _Amount _Amount_30 __Almost all respondents 76.5% (23 people) after
being given Basic Life Support training had good behavior in providing help in handling
cardiac arrest.

DATA ANALYSIS Test Statisticsa __ _postest knowledge - pretest knowledge _postest
behavior - pretest knowledge _postest behavior - pretest behavior __Z_-4,235b
-4,507b-4,963b __Asymp. Sig. (2-tailed) _,000 _,000 _,000 __a. **Wilcoxon Signed Ranks
Test** __b. **Based on negative ranks.** __From the results of statistical tests obtained
p-value for knowledge and behavior is $p = 0,000$, which means smaller than the value of
 $a = 0.05$ ($p = 0.000 < a = 0.05$) means rejecting the conclusion **that there is an effect of
Basic Life Support Training** (BLS) In Laymen Against Knowledge and Behavior in
Handling Heart Disease.

DISCUSSION The results showed that the majority of respondents 67% (20 people)
before being given **Basic Life Support (BLS) training** had less knowledge. The results of
behavioral research before being given the training of all respondents 100% (30 people)
have less behavior in providing help in handling cardiac arrest. This shows that lay
people **do not know about** how to provide basic basic life support to patients who
experience emergency.

Laymen will be confused when they meet someone who crashes on the street or
someone who is having a heart attack at home, because **they do not know** what action
to do, from the results of the study showed that almost all respondents 90% (27 people)
had never helped people with accidents or heart attacks. Experience is an event that
someone has experienced.

Azwar said that attitude would be easier to form if the personal experience occurred in
situations involving emotional factors. In situations that involve emotions, experience
will be more profound and more quickly traceable⁷. From the description above the
researcher argues that the factors that influence a person's knowledge and behavior
before being given health education are education, socio-economic (position or position
of a person in society, income), **and the provision of** information, before being given
health education the majority of respondents' knowledge is lack and behavior before

being given health education all respondents have less behavior in providing help in handling cardiac arrest.

The results showed that the majority of respondents 67% (20 people) after being given **Basic life support training** had good knowledge, this indicates that **basic life support training** will increase the knowledge of lay people about the management of cardiac emergencies. The results showed that almost all respondents 76.5% (23 people) after being given **Basic life support training** had good behavior in providing help in handling cardiac arrest.

This shows that in addition to increased knowledge of the behavior or skills of lay people will also increase about how to give help to cardiac emergency patients. Providing information or **basic life support training** to lay people also helps in improving one's knowledge and behavior, from the results of cross tabulation it is known that the most is 33.3% (10 people) before training has less knowledge and after training has good knowledge, this is in accordance with the theory.

Information is **data that has been processed into a form that is meaningful to the** user, which is useful in making the current decision or supporting information sources. By providing information, counseling and so on will increase public knowledge about it. In the provision of newspapers and radio or other communication media, news that should be factually submitted objectively tends to be influenced by the attitude of the author, consequently affecting the attitudes of consumers 8.

From the description above, the researcher believes that the provision **of basic life support training** is very helpful for improving and the behavior of lay people, according to the research from the results of cross tabulation it is known that as many as 10 people before training have less knowledge and after training have good knowledge.

From those who previously did not know about how to deal with cardiac emergency patients they met on the street or at home, after being given **basic life support training** they came to know how to help initially, at least they knew what they should do to prevent the risk of death more big. The results of the statistical tests for knowledge and behavior before and after being given **basic life support training** showed that the p-value was 0,000, meaning that H_0 was rejected.

The conclusion was that there was an **effect of basic life support training** on lay people on the knowledge and behavior of handling cardiac arrest. Brain death and permanent **death can occur within** 8 to 10 minutes of a person experiencing cardiac arrest 9 .This condition can be prevented by giving cardiac pulmonary resuscitation and immediate

defibrillation (before exceeding the maximum time limit for brain damage), to restore normal heart function as quickly as possible.

Cardiac pulmonary resuscitation and defibrillation given between 5 to 7 minutes from the victim experiencing cardiac arrest will provide an opportunity for the victim to live an average of 30% to 45%. From the description above, the researcher argues that by providing Basic life support education and training to ordinary people will greatly affect the level of knowledge and behavior, this is evidenced by the results of the significance value is 0,000 which means there is the influence of providing basic life support training to increase knowledge and layman behavior.

Giving basic life support to lay people is very important because if you are a little late in giving first aid, the consequences can be fatal to the sufferer. The provision of basic life support training for lay people must be done because health workers are not always located anywhere, they must be called first and then be able to go to the scene, and the first person to meet patients is their family or neighbors

CONCLUSIONS AND RECOMMENDATIONS

Most respondents 67% (20 people) before being given Basic life support (BLS) training had insufficient knowledge and all respondents 100% (30 people) had less behavior in providing assistance in handling cardiac arrest

Most respondents 67% (20 people) after being given Basic life support training had good knowledge and almost all respondents 76.5% (23 people) after being given Basic life support training had good behavior in providing assistance in handling cardiac arrest.

Statistical test results obtained p-value value for knowledge and behavior is 0,000 <0.05 means to reject H_0 conclusion there is an effect of Basic life support Training (BLS) on Laymen on Knowledge and Behavior of Heart Stop Treatment

SUGGESTION

1. For the Community To further improve the ability to do basic life support, be sensitive to the environment when finding people lying on the road or accidents or heart attacks at home, not to be silent if we have never participated in basic life support training at least immediately contact the hospital or health care place closest because time is the life for the sufferer

2.

For Health Workers It is expected that health workers have a BCLS / BLS certificate, because with the ability and skills of BCLS / BLS it will make us more skilled in handling patients who experience emergency, if they are skilled to share their knowledge to lay people around us

3. For the Dongko Health Center It is expected to further improve community health services, not only in terms of providing treatment but also in providing training on how to provide basic life support to emergency patients they meet, and routinely providing health counseling about signs of heart attack, because so far Lay people consider heart attack patients to be a cold-induced illness so that they

are late to be sent to a health service 4.

For Further Researchers The next researcher is expected to be able to further develop this research to be broader, namely about what motivations that make people or lay people want to do basic life support training. REFERENCES Sudiharto, Sartono. Basic Trauma Cardiac Life Support. Jakarta: CV.Sagung Seto; 2011. Depkes RI. Pedoman pengendalian penyakit jantung dan pembuluh darah. Jakarta: Direktorat jenderal pengendalian penyakit dan penyehatan lingkungan. Depok.

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