

Research Article

DIFFERENT METHODS OF DEMONSTRATION AND ROLE PLAY ON SLB-B TEACHER IN SEMARANG CITY INDONESIA

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ABSTRACT

The dental and oral health is part of the health of the body that can' not be separated from one another because the health of teeth and mouth will affect the overall health of the body. Therefore, to realize the optimal health status for the community, health efforts are carried out in a series of integrated, integrated and continuous activities to maintain and improve public health status in the form of disease prevention, health promotion, disease treatment and health restorations. This research method that is used a Quasi Experiment with Control Group Pretest and Post-test Design approach subject of this research is teacher who come from SLB Swadaya and SLB Negeri Semarang which amount to 37 people according to inclusion and exclusion criteria. This research was conducted by giving demonstration method and role play after giving questionnaire, checking oral hygienic condition by using Simplified Oral Hygiene Index (OHI-S) measurement before and after research. The results obtained by the analysis of significant value p-value <0.05 means there is a meaningful different means of OHI-S score before and after the demonstration given to the School teacher. In the role play group, from the analysis, results obtained showed significant p-value > 0.05, meaning that there is no significant difference mean debris score before and after intervention on teacher group role play

Key words: *Demonstration, Role Play, SLB-B Teacher, Semarang*

INTRODUCTION

Dental and oral health is part of the body's health that cannot be separated from one another because the health of teeth and mouth will affect the overall health of the body (Alissa *et al.*, 2008)

Therefore, to realize the optimal health status for the community, health efforts are carried out in a series of integrated, integrated and continuous activities to maintain and improve public health status in the form of disease prevention, health promotion, disease treatment and health recovery (Belanger *et al.*, 1982, Hosey *et al.*, 1995).

Cases

Special Schools (SLB) are special schools for school-aged children who have "special needs" in which SLB is an educational institution that aims to assist students with physical or mental, behavioral and social disorders in order to develop attitudes, knowledge and skills as personal and community members in conducting mutual relationships with the surrounding social, cultural and natural environment and can develop skills in the world of work or follow up education. The educational unit for children with special needs such as SLB school for learners at Semarang (Hori *et al.*, 2011).

Improving health in oral and dental health can be done through counseling. Health education is an educational activity, conducted by spreading the message, instilling confidence, so that people are not only aware, know and understand, but also willing and able to do a suggestion that has to do with health (Hori *et al.*, 2010)

Dental health education can be done with several methods such as demonstration methods and role play, demonstration method is a method of teaching by demonstrating the goods, events, rules, and sequence of doing activities, either directly or through the use of teaching media relevant to the subject or material that is being served. (Helenius *et al.*, 2012, Harris *et al.*, 2005)

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Education of ways of brushing teeth for children needs to be modeled on a good model and with the simplest possible techniques and delivery of oral and dental education in children should be made as attractive as possible, through attractive counseling without reducing the content of education, such as live demonstrations via a controlled mass toothbrush (Davit *et al.*, 2009, Guggenheimer *et al.*, 2003)

The role play method is a method of developing imagination and appreciation. The development of imagination and appreciation is done by playing it as a living or inanimate character in general done more than one person; it depends on what is played. In the role play method, the emphasis lies in emotional involvement and sensory observation into a real problem situation (Bull *et al.*, 1997, Bull *et al.*, 1998)

MATERIALS AND METHODS

This research is a quasi experimental research. The research design used was pre and post test with group design. The design of this study consists of group I and group II begins by filling out questionnaires to know the knowledge, attitude and skills of dental and oral hygiene teachers, using pretest before oral hygiene education with discussion and demonstration method begins and posttest after education dental and oral hygiene, accompanied by dental and mouth cleansing of deaf children then evaluated dental and mouth hygiene of child waiting on the 21st day done on month (Firiolo and Sollecito, 2014, El Mouzan *et al.*, 2009).

The subjects in this study were divided into two categories: the groups were given dental and oral hygiene education by the method of discussion, and one group was given dental hygiene education by using the lecture method. 29 February 2016 until 21 March 2016 with the number of 15 teachers with the dental health education and the mouth using demonstration method held in the meeting room and this research was also conducted at Semarang State Extraordinary School on March 3 to 24 March with dental and oral health education using the role play method conducted in the classroom of Semarang State Extraordinary School with the amount 15 teachers.

RESULTS AND DISCUSSION

Based on the result of research about the difference between demonstration method and role play method in improving dental and mouth hygiene of teacher in Semarang City, the difference of oral hygiene, knowledge, attitude and skill between demonstration method and demonstration role play got the average score of OHI S before the intervention was 2,222 with the lowest score of 1.33 and the highest was 3.00 and the mean score of OHI-S after intervention was 0.711 with the lowest OHIS score 0.33 and the highest was 1.33

Table 1: Distribution of Knowledge

Demonstration		Role Play	
Pre test (%)	Post Test (%)	Pre test (%)	Post Test (%)
62	85	65	84

The questions that gain knowledge of the teacher can be summarized before the intervention of more than 50% of the questions, the teacher has answered correctly, but there are still some questions, namely question number 9 concerning you think the action you did in the event of tartar in the demonstration group before the intervention by 40% after intervention to 80%, in the role play group before the intervention 33% to 73%.

Table 2: Attitude

Demonstration		Role Play	
Pre test (%)	Post Test (%)	Pre test (%)	Post Test (%)
60	87	59	82

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The questions that reinforce teacher attitudes can be summarized before the intervention of more than 50% of the questions, the teacher has answered correctly, but there are still some questions, namely question 7 regarding I use toothpaste as the corn kernels in the demonstration group before the intervention of 47% after the intervention to 87%, in the role play group before the intervention 33% to 73% and the question number 8 concerning addition to brushing my teeth also cleans the tongue in the demonstration group before the intervention of 40% after intervention to 87%, in the role play group before the intervention 40% to 80%.

Table 3: Skill

Demonstration		Role Play	
Pre test (%)	Post Test (%)	Pre test (%)	Post Test (%)
57	77	57	80

The questions that taught teacher skills can be concluded before the intervention of more than 50% of the questions, the teacher has answered correctly, but there are still some questions, namely question number 6 concerning me brushing my teeth using toothpaste just as much as corn kernels in the demonstration group before the intervention of 47 % after intervention to 73%, in the role play group before the intervention of 40% to 73%, question number 7 about me also rubbed the tongue part while cleaning before the 20% demonstration intervention after the intervention to 67%, while the group role before the intervention 47 % after intervention to 80%

Conclusion

Based on the results of this study can be concluded there are differences in oral hygiene, knowledge, attitudes and skills of the quality of dental and oral hygiene care at teachers in Special Schools in Semarang City before and after the method of role play and demonstration

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