



Educational Model With Syar'i Video on Coffee Drinkers on the Prevention of Non-Communicable Diseases (NCDs)

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ABSTRACT

NCDs are currently a public health problem. The World Health Organization states that NCDs are the number one killer of humans today, such as; Hypertension, Stroke, and Diabetes Mellitus (DM). The incidence of diabetes in 2040 it is estimated to increase to 642 million people. The purpose of this study was to determine the effect of the educational model using Syar'i Video on coffee drinkers on the prevention of NCDs. The sample of this study was 450 respondents. The sampling technique used was the Multistage sampling method. Collecting data using a questionnaire designed by researchers to test these variables. Data analysis using SEM. The results of the SEM test obtained the GFI (Goodness of Fit Index) value in the expected Cut of Value range (p-Value 0.05). Video syar'i can be used as a medium to provide education to coffee drinkers because it supports the prevention of NCDs. The results of this study indicate that the Education Center at the Public health center can prevent NCDs by providing education that is needed by the community. Likewise, if the health center nurse conducts education using syar'i video, it will have a direct or indirect influence on the prevention of NCDs. Educational findings using videos will give more meaning to coffee drinkers to understand the content of education about coffee, sugar, diabetes, hypertension, and the risk of other complications such as stroke. The findings of this study along with the variables of Education Center Public health center, Education and Video Syar'i, and prevention of NCDs are things that can be done by the department or education as needed. This education is to limit the rate of incidence of NCDs in Aceh. Education with video is one way to use educational technology that can be shared via Smartphones or other media in coffee shops (or places frequented by people on a daily basis). To be able to prevent NCDS and prevent more severe complications in coffee drinkers, it requires continuous efforts to socialize the material in the syar'i video to the community through community leaders in the village. The public can be given some videos related to NCDs or other health problems. Public health center personnel can track actions with NCDS cases in the village or the number of cases that come to the Public health center. In addition, patients with cases of high addiction to coffee can be educated individually by face to face and sharing syar'i videos. The results of this study indicate that the Education Center at the Public health center can prevent NCDs by providing education that is needed by the community.

Keywords: Syar'i Video, Coffee Drinkers, Non-Communicable Diseases

INTRODUCTION

Non-communicable diseases (NCDs) are chronic illnesses that persist for extended periods and result from a combination of genetic, physiological, environmental, and behavioral factors [1]. The majority of NCDs are non-infectious and are caused by several factors, including genetic, physiological, behavioral, and environmental factors [2]. According to the World Health Organization (WHO), NCDs are the leading cause of death globally, responsible for 71% of all deaths annually. The top four NCDs responsible for the highest number of deaths are cardiovascular diseases (17.9 million deaths per year), cancers (9.0 million), respiratory diseases (3.9 million), and diabetes (1.6 million) [2]. Indonesia is currently experiencing a higher incidence of NCDs than infectious diseases. According to the 2018 Rikesdas results, NCDs in Indonesia have increased, including hypertension (from 25.8% to 34.1%), stroke (from 7% to 10%), and diabetes (from 6.9% to 8.5%). The government survey also revealed an increase in the number of overweight (13.6%) and obese (21.8%) adults aged 18 years and over in 2018 [3][4]. Additionally, the survey found an increase in the prevalence of smoking in the population aged 10-18 years from 2007 (7.2%) to 2018 (9.1%). The government also stated that the population aged 10 years and over showed an increase from 2007 (3%) to 2018 (3.3%) for the category of alcoholic beverages and similar products. The low level of healthy living behavior among Indonesian people is due to their lack of understanding and awareness of healthy living practices [5]. Educating the public to adopt healthy behaviors is one way to reduce the incidence of NCDs in Indonesia. These efforts are particularly critical because health education serves as a preventive measure in addressing health issues [6][7].

The Indonesian government has implemented health education initiatives with the aim of preventing and reducing the incidence of diseases in the community, including non-communicable diseases (NCDs). The success of these initiatives depends greatly on the media employed, which plays a crucial role in the communication process [8][9][10]. The effectiveness of health education communication also relies on the characteristics of the media utilized. In recent years, media-based applications have significantly evolved and improved in capability and power. Video-based applications allow users to have control over the generation, creation, and sharing of information by enabling them to upload text, links, videos, or photos to popular websites linked to their private networks [11]. Studies have shown that watching videos online outperforms many other activities, with nearly 70% of adults using the internet for this purpose [12]. Improved technology and capabilities have provided new and better opportunities for health intervention and education [13]. Utilizing videos as an extension tool can facilitate intervention efforts in the community, including among coffee drinkers. Aceh province, known as the land of a thousand coffee shops, is one of the provinces with a coffee-drinking culture [14][15]. Excessive consumption of coffee and sugar has the potential to trigger diabetes mellitus [16][17]. The role of public health nurses is crucial in counseling coffee drinkers through video. Nurses, as part of the healthcare team, can act as advocates and counselors for patients, and it is essential to design professional, effective, and efficient service models. Therefore, video-based counseling efforts have been implemented to educate coffee drinkers about the prevention of non-communicable diseases (NCDs).

MATERIALS

Study Design

This type of research is quantitative and uses a cross-sectional approach. This study aims to see the effect of the Education Center model of the Public health center in providing education to coffee drinkers, using syar'i video media on the prevention of non-communicable diseases in Aceh. The

research locations will be conducted in six (6) regencies/cities in Aceh, namely: Aceh Besar, Banda Aceh, Sigli, Lhokseumawe, Tapaktuan, and Meulaboh on 1 August – 30 October 2021.

Population and Sample

The population of this study were all coffee drinkers in 6 districts/cities in Aceh, namely: Aceh Besar Banda Aceh, Sigli, Lhokseumawe, Tapak Tuan and Meulaboh. The sample in this study was 450 people. The sampling technique in this study was carried out using the Multistage sampling method. The sample calculation is calculated according to the standard use of the SEM method or structural Equation Modeling. The inclusion criteria for selecting respondents were: age < 25 - 50 years, visiting coffee shops > 3 times/week and drinking coffee 2-3 times/day, no physical abnormalities due to NCDs: 1) not paralyzed, 2) not difficult to talk, 3) no gangrene injuries and 4) willing to be a respondent.

Measurements

Data was collected using a questionnaire designed to test the variables of the education center of the Public health center, Education, Video Syar'i, and prevention of NCDS . The questionnaire was designed on a Likert Scale (1-5). The questionnaires were distributed to coffee drinkers and asked to be filled out in front of the researcher and immediately collected again after being filled out. The questionnaire has been tested for reliability on 50 coffee drinkers in 2021. The results of the validity and reliability test use the product-moment correlation. The questionnaire was designed by researchers using reference sources related to these variables. The education variable Center_Public health center (X1) was adopted from the Indonesia[18], while the Education variable (X2) was adopted from [19], and (Gaffney & White, 2018). The video syar'i variable (Y) was adopted from[20],[21]. Likewise, the NCDs prevention variable (Z) was adopted from several related references, namely[22][23][24]. Data collection was carried out after coffee drinkers watched a video about syar'i education which contained the effects of coffee and the impact of excessive sugar on the body, especially NCDs. In addition, the video is linked to religious education about healthy eating patterns in Islam and the Sunnah of the Prophet about eating and drinking well.

Table 1 Research Variable Successful Education of Coffee Drinkers on The Prevention of NCDs

Variable	Information	Dimension
X ₁	Education Center_Public health center	Hypertension Education Diabetes Mellitus Education 3. Stroke Education
X ₂	Education	Convenience Video material Community Support
Y	Syar'i Videos	1. Internet/WIFI 2. LCD/ Hanphone 3. Video Display
Z	NCDs Prevention	Control Blood Sugar Levels Keep Cholesterol Blood Pressure Control

Procedure

The study was conducted on 4 July -30 October 2021 on coffee drinkers in 6 city districts in Aceh province. Before being given a questionnaire, the researcher explained in advance the benefits, objectives, and techniques of filling out the questionnaire. Furthermore, the respondent reads the respondent's consent form, fills it in, and fills it out if he agrees as a respondent. Furthermore, respondents filled out a questionnaire about the Education Center_Public health center (X1). Education (X2), Syar'i Video (Y), and Prevention of Non-Communicable Diseases (Z).

Analysis

Data analysis with Structural Equation Modeling (SEM) Method. The purpose of using SEM aims to determine the variables or sub-variables that require observation simultaneously using software called AMOS 22. The SEM analysis model is used because this equation model is a set of statistical techniques that allows testing a series of relatively complex relationships simultaneously.

Ethical considerations

The research has been carried out with an ethical test by the Aceh Poltekkes. In addition, it has been explained to coffee drinkers who were selected as respondents about the purpose, benefits of the study, and no impact on respondents. Respondents who agreed to fill out the informed consent and continued to fill out the questionnaire

RESULTS

Demographic Characteristic

The demographic characteristics referred to in this study are characteristics that include: age, gender, education, income, complaints and health checks.

Table 2. responden Characteristic

1	Ages:		
	≤ 25 years old	192	42,7
	25-45 years old	171	38,0
	> 45 years old	87	19,3
2	Marital status:		
	Single	220	48,9
	Married	217	48,2
	Widow/Widower	87	2,9
3	Gender		
	- Man	296	65,8
	- Woman	154	34,2
4	Level of education:		
	- Junior high school	33	7,3
	- senior High School	190	42,2
	Diploma/ Bachelor	206	45,8
	Master	21	4,7
5	Check your health at the Public health center/doctor		
	- Every year routine	47	10,4
	- If there is a complaint	369	82,0
	- Never check	34	7,6

6	Current complaint		
	- DM	15	3,3
	- Hypertension	20	4,4
	- Stroke history	14	3,1
	- No complaints	401	89,1
7	Monthly income:		
	< IDR 1.350.000	171	38,0
	IDR 1.350.000-2.999.999	140	31,1
	IDR 3.000.000-3.999.999	79	17,6
	IDR 4.000.000-4.999.999	36	8,0
IDR 5.000.000-5.999.999	24	5,3	

In table 2 it can be seen that most coffee drinkers are aged 25 years, namely 192 people (42.7%). The largest group in the marital status category was unmarried, namely 220 (48.9%). Meanwhile, in the sex group, the dominant coffee drinkers were men, as many as 296 (65.8 %). The education level of most coffee drinkers is in the high school category, which is 190 people (42.2%). An important aspect of health check-up behavior was that coffee drinkers checked their health if there were only complaints as many as 369 people (82.0%). The results of other urgent demographic data are that coffee drinkers are in a DM condition in as many as 15 people (3.3%), hypertension among 25 people (4.4%), and a history of stroke in 14 people (3.1%). From an economic point of view, coffee drinkers are mostly in the low economic category with income < IDR 1.350.000 (38.0 %).

Confirmatory Factor Analysis

The latent construct in this study consisted of two exogenous latent variables, namely Education Public health center and Education. While the two endogenous latent variables are Syar'i video and NCDs prevention. This study also creates path diagrams as shown below. Meanwhile, the dimensions observed in the exogenous and endogenous latent variables are 31 dimensions.

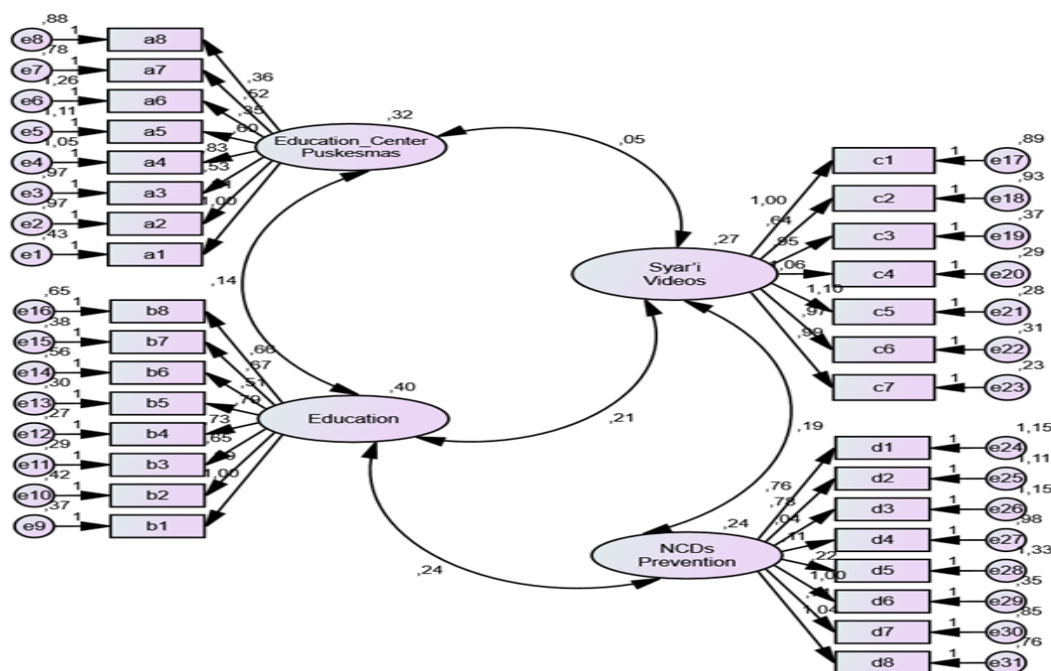


fig1 Confirmatory Factor Analysis

In Figure 1 it can be explained that the Education_Center Health Center variable, Education, and NCDS prevention has an indirect effect through Syar'i Video on the prevention of NCDS. The SEM test results found the values of Chi-square, GFI (Goodness of Fit Index), AGFI (Adjusted Goodness Fit Of Index), CFI (Comparative Fit Index), TLI (Tucker Lewis Index), CMIN/DF, and RMSEA (Root Mean Square Error of Approximation) with values can be seen in Table. As for the 4 variables as shown in the picture above, there are indicators (a, b, c, d) that are tested for their relationship in the development of this model, as shown in Table 3 below:

Table 3. Confirmatory Factor Analysis

No	Variables	Indicators
1	Education Center	a1. My body is in normal condition a2. blood pressure > 140/90 mmHg a3. Currently there are no symptoms of eating a lot a4. Checking blood sugar levels is often controlled a5. I often have headaches a6. My cholesterol is high > 200 mg% a7. My limbs are in good health a8. Health checks are rarely done
2	Education	b1. Nurse doing counseling with video b2. Counseling using video is easier tounderstand b3. Fact-based counseling b4. Interesting syar'i video b5. Syar'i videos are useful for preventing NCDS b6. People are happy with the videos played by religious figures. b7. Message can be understood well b8. The community is willing to share videos in the village
3	Video Syar'i	c1. Strong signal internet c2. Wifi is provided in the Village c3. Videos are on each cellphone c4. Videos can be accessed easily c5. Syar'i videos can be accessed by the public via cellphones c6. Materials can be accessed by computer c7. Video plays in a crowd
4	Prevention NCDS	d1. Blood sugar levels when <150 mg%/dl in a healthy body d2. I don't feel any DM d3. Every time you drink coffee, you use more than d4 tablespoons of sugard4. My blood pressure is higher than normal d5. Every time I have a complaint, I check it at the Public health center d6. NCDS videos make me more careful about drinking coffee d7. Coffee has no direct relationship with cholesterol d8. The food in the coffee shop is a lot of coconut milk and oily

3.1. Confirmatory Factor Analysis of Research Variables (SEM)

This study uses data analysis with Structural Equation Modeling (SEM). The first step with the SEM test is to first test the dimensions with Confirmatory Factor Analysis. The research model consists of 31 dimensions or indicators. The test results show that there is a causal relationship between the hypothesized variables. The results also show that the model used is acceptable with a significance level of 0.082, which means it is a good structural equation. The GFI, CFI, CMIN/DF and RMSEA measurement indices are also in a good range.

Table 4 Criteria Goodness of Fit Measurement Models

Goodness-of-Fit Index	Cut off Value	Analysis Results	Evaluasi Model
Degree of Freedom (DF)	Positif (+)	Positif (+)	Good
χ^2 (Chi-Square)	Expected small	812,109	Good
Signifikan Probability	$\geq 0,05$	0,053	Good
CMIN/DF	$\leq 2,00$	1,888	Good
GFI	$\geq 0,90$	0,953	Good
AGFI	$\geq 0,90$	0,915	Good
PGFI	$\geq 0,90$	0,953	Good
NFI	$\geq 0,90$	0,991	Good
TLI	$\geq 0,90$	0,923	Good
CFI	$\geq 0,90$	0,951	Good
PNFI	0,60 – 0,90	0,946	Good
RMSEA	0,05 – 0,08	0,079	Good

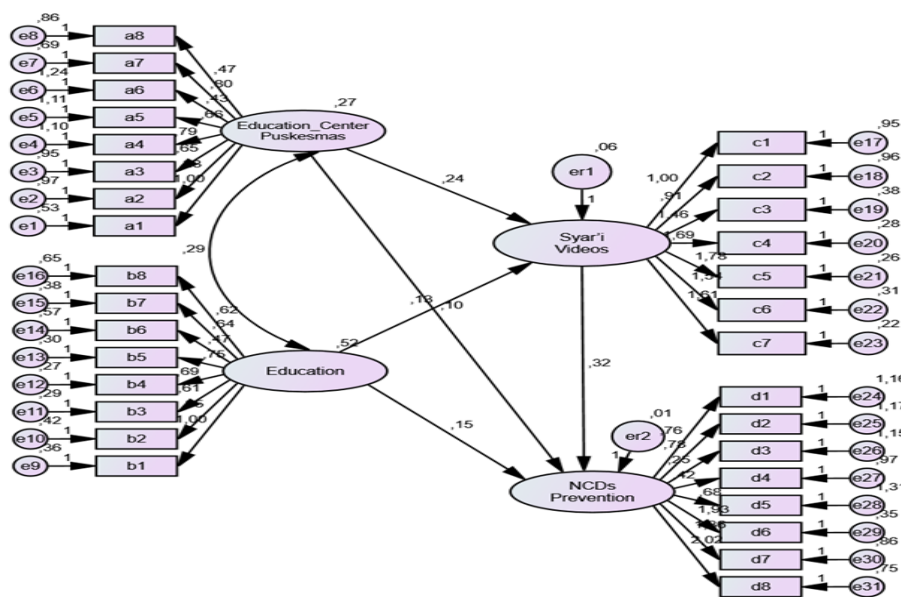


fig 2 Confirmatory Full Model

The results of this test indicate that the model used is statistically acceptable with a significance level of 0.000. In addition, the proposed model uses a structural equation model, the results are good. The measurement index Goodness of Fit Index (GFI), Comparative Fit Index (CFI), The Minimum Sample Discrepancy Function (CMIN/DF), and The Root Mean Square Error of Approximation (RMSEA) are in the range of expected values.

Hypothesis test

In this discussion, the results of hypothesis testing will be explained as proposed in the previous chapter. Hypothesis testing in this study was carried out based on the Critical Ratio (CR) value of a causal relationship from the results of SEM processing as shown in table 5 below.

Table 5 Regression Weight Structural Equational Model

Endogen		Exogen	Estimate	C.R.	P
Syar'i_Videos	<---	Education center Public health center	0,249	5,415	***
Syar'i_Videos	<---	Education	0,161	6,824	***
NCDs_Prevention	<---	Education Center Public health center	0,133	5,041	***
NCDs_Prevention	<---	Education	0,151	3,101	***
NCDs_Prevention	<---	Syar'i_Videos	0,323	7,375	***

DISCUSSIONS

The parameter estimation results indicate that the Health Center Education Center has a significant effect on the use of Syar'i video, with a Critical Ratio value of 5.415 and a p-value of 0.000. This finding suggests that using the Public Health Center Education Center and Syar'i Video can serve as an effective program and media for preventing NCDs in coffee drinkers. Specifically, implementing the Health Center Education Center program can increase NCD prevention in coffee drinkers by 24.9%. Moreover, the estimated parameter for the effect of education on the use of Syar'i video also shows a significant result, with a Critical Ratio value of 6.824 and a p-value of 0.000. This implies that Syar'i video education can be a viable solution to prevent NCDs in coffee drinkers, potentially increasing NCD prevention by 16.1%. Furthermore, the parameter estimation for the effect of the Health Center Education Center on NCD prevention also shows a significant result, with a Critical Ratio value of 5.041 and a p-value of 0.000. This indicates that the Community Health Center Education Center activity can be an effective program for preventing NCDs in coffee drinkers, potentially increasing NCD prevention by 13.2%. Finally, the parameter estimation for the effect of education on NCD prevention shows a Critical Ratio value of 3.101 and a p-value of 0.000, suggesting that education can also contribute to preventing NCDs in coffee drinkers. Overall, these findings highlight the importance of utilizing both the Health Center Education Center and Syar'i video education as programs for NCD prevention in coffee drinkers. The innovation in education for community services has a significant impact on the prevention of non-communicable diseases (NCDs). Education can serve as a preventative strategy for NCDs among coffee drinkers and can increase the prevention of NCDs by 15.1%. The estimation parameter used to test the effect of Syar'i Video on NCDs prevention reveals a Critical Ratio value of 7.375 (p-value 0.000), indicating that Syar'i Video is an effective tool for preventing NCDs. The use of Syar'i Video can be implemented as a media and program at public health centers to prevent NCDs in coffee drinkers, which can increase the prevention of NCDs by 32.3%. As the prevalence of NCDs increases with age, and life expectancy plays a role in exacerbating the incidence of NCDs [25], it is essential to prevent excessive coffee drinking. Most coffee contains caffeine which can function as a physiological stimulus causing side effects of insulin resistance and hypertension [26]. The use of Syar'i Videos, which combine information from health workers, religious leaders, and community leaders, is a positive step. By utilizing a single medium, the influential components of society can provide education. The integration of education through videos shared via cellphones makes it easier for nurses at public health centers to ensure continuity of education. The information conveyed in the videos is delivered in accordance with medical and religious concepts, which makes it easier for the community to accept the information. Nurses at public health centers can prioritize important education based on health problems and create videos that correspond to the learning topic. In the video, the message is conveyed through a dynamic process and interaction between actors, both formal and informal [27]. This approach is highly effective in providing education and promoting healthy behavior in the community. Various health issues and different societal conditions require

innovative and engaging educational media. Video, for instance, can effectively teach scientific ideas directly through pictures, interactive conversations, and role-playing [28]. Using video as an educational tool is a form of community-based art that can inspire coffee drinkers to adopt healthy habits and foster creativity, leading to a healthy and meaningful lifestyle to prevent NCDs [22]. To design effective educational media, it is ideal to use design principles that guide material development, implementation, and program quality improvement [29]. The video's cast can see themselves as participants in public health activities [30]. Education that involves local figures (ethnography) in the video is a direct leadership practice to increase values, beliefs, and promote healthy lifestyle practices in the community. Shared videos can also increase public interest in changing perceptions about coffee drinkers and preventing NCDs. The prevention of NCDs using videos involves community leaders, such as Alim Ulama, who can support the strategies presented in the Syar'i videos. Since NCDs are often a result of behavior, educational media must be fun, engaging, and easy to implement in daily activities. The video can be shared by education managers at public health centers with villages in their working areas, providing accessible and informative education for the community.

CONCLUSION

The results of the study suggest that the Education Center at the Public Health Center can effectively prevent NCDs by providing education that meets the community's needs. Furthermore, when health center nurses use Syar'i video in their educational efforts, they can have a direct or indirect impact on preventing NCDs. Using video as an educational tool can help coffee drinkers better comprehend the educational content concerning coffee, sugar, diabetes, hypertension, and the risk of complications such as stroke. The findings of this study, along with the Education Center at the Public Health Center, Education and Syar'i Video variables, can be utilized by the department or education, as required, to reduce the incidence rate of NCDs in Aceh. Video-based education is an effective way to use educational technology that can be shared through smartphones or other media in coffee shops or other daily meeting places. To prevent NCDs and more severe complications among coffee drinkers, it is necessary to continue promoting the Syar'i video material through community leaders in the village. The public can be provided with videos related to NCDs or other health issues. Public health center staff can monitor NCDs cases in the village or the number of cases that come to the Public Health Center. Additionally, for patients addicted to coffee, face-to-face education and sharing Syar'i videos can be done individually.

CONFLICT OF INTEREST

The author declares no conflict of interest

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