THE RELATIONSHIP OF EDUCATION AND INFORMATION EXPOSURE WITH KNOWLEDGE OF BASIC LIFE SUPPORT TO VICTIMS OF STOP BREATHING AND CARDIAC ARREST OF JENETALLASA BATHROOM EMPLOYEES

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ABSTRACT

Cardiac Arrest is a disease with attacks that cause many victims to die. Respiratory Arrest and cardiac Arrest are part of the main attack of the disease, so the first 10 minutes of help will determine the life and death of the victim. The type of this research is descriptive-analytic with a cross-sectional study design carried out at the Jenetallasa Baths, Bajeng District, Gowa Regency. The population in this study was 50 employees of the Jenetallasa Baths using total sampling. The results of the study showed that the Chi-square statistical test obtained the value of education = 0.002 ($\rho < = 0.05$) and exposure to information = 0.000 ($\rho < = 0.05$), meaning that there is a statistically significant relationship between education and information exposure. Knowledge about providing basic life support to respiratory and cardiac arrest victims. It can be concluded that education and information exposure are related to knowledge about providing basic life support to victims of respiratory and cardiac Arrest.

Keywords: Education, Information Exposure, Knowledge, Basic Life Support, Respiratory and Cardiac Arrest

INTRODUCTION

An emergency is an unexpected event that can occur suddenly and requires immediate treatment. One of the emergency conditions that can be life-threatening and require immediate help is cardiac arrest. Cardiac arrest is a condition where the heart's mechanical function suddenly stops, reversible with appropriate treatment but will cause death if not treated immediately. One of the causes of sudden cardiac arrest (SCA) or cardiac arrest is coronary heart disease (Suranadi, 2017).

Cardiac arrest is fatal and remains an important public health topic worldwide (Fosbøl et al. 2014; Hasegawa et al. 2013b; Sanghavi et al. 2015). The annual incidence rate and clinical outcome of cardiac arrest are indicators of a country's health (Jenny S. Guadamuz, MS Ramon A. Durazo-Arvizu et al. 2020; Kitamura et al. 2016; Patil, Halperin, and Becker 2015). According to American Heart Association (AHA) data, 17.9 million people died from CVD in 2019, representing 32% of all global deaths. Of these deaths, 85% were

caused by heart attacks and strokes, according to the Swedish cardiopulmonary resuscitation council (2014). Riskesdas data (2018) shows that the number of people with heart disease in Indonesia according to a doctor's diagnosis is 1,017,290 (1.5%). Meanwhile, people with heart disease in the South Sulawesi region amounted to 33,693 people (1.3%).

Delays in getting help cause deaths of patients with cardiac arrest. There is an essential role of the CPR method in determining the success of rescuing cardiac arrest victims (Alamsyah, Sulasri, Hasbullah, A.Fahira Nur, Vidyanto and Wandira 2019; Bylow et al. 2019; Caswell et al. 2019; Finn et al. 2015; Kardong-Edgren et al. 2010). Survival is much more likely when out-of-hospital heart failure victims receive immediate cardiopulmonary resuscitation (CPR) from a bystander (the first person to find the victim) (Hasselager et al. 2019; Nagao et al. 2016). Therefore, contacting the Emergency Call and CPR provided immediately by the bystander can increase the number of people given a chance to survive (Hasegawa et al. 2013a; Hasselager et al. 2019; Nagao et al. 2016; Patil et al. 2015). This is in line with some data: the number of OHCA victims who survived by a bystander was 31.7 percent (Sudden Cardiac Arrest Foundation, 2015). Jenetallasa Sileo Baths Kab. Gowa is one of the vacation spots with a relatively high risk of casualty figures because of its swimming pool which can cause drowning victims. Therefore, employees' knowledge of essential life support needs to be considered for basic life support training for lay people.

METHODS

This study uses the Analytical Survey method, which is a survey that explores how a phenomenon can occur. This analytical survey uses a quantitative approach. The research design used a cross-sectional study by studying the dynamics of the correlation between the relationship and the effect through an observation approach or data collection at once, meaning that each research subject was only observed once. Measurements were made on the status of the character or variable of the subject at the time of examination (Soekidjo Notoatmodjo 2012)..

The population of this study was employees of the Jenetallasa Sileo bath, Kab. Gowa. While the samples used were all employees of the Jenetallasa Sileo Baths Kab. Gowa with total sampling, all the population, is used as a sample. With inclusion criteria:

1. Willing to be a sample
2. Being at the location when the research takes place
3. Age between 17-55 Years

The test is used to see if there is a relationship between the Independent variable (Education, Information Exposure) and the Dependent variable (Basic Life Support Knowledge) using statistical tests Chi Square using the limit of the significance of 0.05 (Significant Level or 5%) and the level of confidence (Confidence Interval (CI) or 95%). With the provision that if p (p 0.05), the decision Ho is accepted, meaning that there is no significant relationship between the independent variable and the dependent variable and vice versa. This statistical test uses the help of SPSS.

RESULTS

1. Univariate Table

Table 1. Sample Distribution Table Based on Respondent Age

Variable	Frequency	Percentage
Age		
18-25 Years	9	18%
26-35 Years	14	28%
36-45 Years	19	38%
46 Years	8	16%
Total	50	100%

Source: Primary Data 2022

Table 2. Sample Distribution Table Based on Respondent Education

Variable	Frequency	Percentage
Education		
D3/S1	3	6%
High School Equivalent	22	44%
Junior High School Equivalent	11	22%
Elementary	9	18%
School	5	10%
Not School		
Total	50	100%

Source: primary data 2022

Table 3. Sample Distribution Table Based on Respondent Information Exposure

Variable	Frequency	Percentage
Information Display		
Once	2	4%
Never	48	96%
Total	50	100%

Table 4. Sample Distribution Table Based on Respondents' Knowledge

Variable	Frequency	Percentage
BLS Knowledge		
Yes	2	4%
Not	48	96%
Total	50	100%

Source: primary data 2022

2. Bivariate table

Table 5. Relationship between education and knowledge of basic life support.

Education	Knowledge about BHD	Total	P Value

	Yes		No				
	N	%	N	%	N	%	
D3/S1	2	4	1	2	3	6	
High School Equivalent	0	0	22	44	22	44	
Junior High School Equivalent	0	0	11	22	11	22	0.002*
Elementary	0	0	9	18	9	18	
School No School	0	0	5	10	5	5	
Total	2	4	48	96	50	100	

Source: primary data 2022

Table 5 above shows that there is a relationship between education and knowledge of respondents' basic life support, this is evidenced by the results of the Chi Square test with a significance value of 0.002 (p<0.05).

Table 6. Relationship of Information Exposure with Knowledge of Basic Life Support.

Education	Knowledge about BHD				Total		P Value
	Yes		No				
	N	%	N	%	N	%	
Yes	2	4	0	0	2	4	
No	0	0	48	96	48	96	0.000*
Total	2	4	48	96	50	100	

Source: primary data 2022

Based on table 6 above shows that there is a relationship between exposure to information and knowledge of respondents' basic life support, this is evidenced by the results of the Chi Square test with a significance value of 0.000 (p <0.05).

DISCUSSION

1. Relationship of Education with Knowledge of Basic Life Support

This study's results indicate a relationship between education and knowledge of essential life support for respiratory and cardiac arrest victims. This is in line with the research conducted by (Sesrianty 2018), that education is closely related to the respondent's knowledge about providing essential life support for cardiac arrest victims. Education is also one factor that influences a person's perception because it can make a person more receptive to new ideas or technologies.

Nurses with a reasonably good education will carry out effective and efficient nursing practices, producing high-quality health services. An adequate level of education will contribute to nursing practice. The level of education of a nurse will influence the rationale behind setting nursing standards (Nurasiah, Rizkiyani, and Heriana 2020).

This is in line with research conducted by Wijaya, Dewi & Yudhawati (2016) that education affects the level of knowledge of the Denpasar community about BHD. Although in this study, only 21 people (8.4%) had good knowledge about

BHD, but 90.5% of them were respondents with high school and college education levels. People with higher education are also interested in learning BHD techniques and cardiac resuscitation (Blewer et al. 2016).

Researchers assume that the level of education can provide significant benefits for someone in stimulating the brain to receive knowledge. The higher a person's education, the greater the chance for the brain to receive the available information. Education is essential to carry out basic life support training or other knowledge transfer.

2. Relationship of Information Exposure with Knowledge of Basic Life Support

The results of this study indicate that information exposure is related to the respondent's knowledge of essential life support in respiratory and cardiac arrest. The respondent's ability to take BHD actions depends on their information. There are many ways to obtain information regarding providing essential life support for respiratory and cardiac arrest victims, namely through mass media and electronic media. This is in line with the research (Erawati 2015), that people get BHD information through electronic media or other visual media such as video. The ability of ordinary people to perform compressions during cardiac resuscitation has increased after watching a short video about BHD (Benoit et al, 2017). Besides visual media, health workers should be another popular source of information. Cardiopulmonary resuscitation (CPR) increases the chances of survival two to three times (Cho et al. 2010; Kern 2000; Patil et al. 2015; Policy et al. 2020). Therefore, as many individuals in the community as possible must acquire sufficient CPR skills

(Bjørnshave et al. 2018; Kardong-Edgren et al. 2010; Pedersen et al. 2018).

CONCLUSION
The conclusion of this study is that there is a relationship between education and information exposure to knowledge about basic life support for bathing staff Jenetallasa Sileo Kab. Gowa.

SUGGESTION
As a suggestion, all vacation spots that are far from access to health need to provide basic life support training for all employees, because vacation spots are places with high levels of crowds and it is possible that there are victims of cardiac arrest, one of them.

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