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The Influence of Health Education Through Tiktok Videos on the Conscious Knowledge of Adolescent Girls in Karang Langu Hamlet

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Abstract: Breast cancer is the most common type of cancer in women. Early detection of breast cancer can be achieved through breast selfexamination (BSE). BSE is a technique for detecting potential abnormalities in the breast that may indicate breast cancer, performed independently by individuals. This study aims to determine the effect of health education through TikTok video media on BSE knowledge before and after the intervention among adolescent girls in Karang Langu Hamlet. The method used is quantitative research with a preexperimental design, employing a one-group pre-test post-test approach. The number of respondents in this study was 48, selected using a purposive sampling technique. The results of the Wilcoxon Rank Test showed a p-value of 0.000 < 0.05, which indicates a significant influence of health education through TikTok videos on the improvement of SADARI knowledge.

Keywords: Adolescents; Breast Cancer; Health Education; SADARI; Tik Tok

Introduction

Breast cancer is the most common type of cancer in women, developing as malignant tumors in breast tissue, including mammary glands, adipose tissue, and connective tissue (Panet et al., 2024; P. Sari et al., 2020). In Indonesia, more than 80% of cases are found in the advanced stage due to low awareness of early detection (Legi et al., 2024)). Knowledge about prevention, diagnosis, and treatment is very important to improve health services, increase the cure rate, and extend the life expectancy of patients (Aminizadeh et al., 2024; P. Sari et al., 2020).

According to WHO (2020), around 2.3 million women in the world are diagnosed with breast cancer, with 685,000 deaths. As of the end of 2020, 7.8 million women were living with a breast cancer diagnosis in the past five years, making it the most common cancer. This cancer can occur in all countries and the risk increases with age. Data from Riskesdas (2018) shows that the prevalence of cancer in Indonesia is 1.79/1000 population, an increase from 1.4/1000 in 2013, with the highest cases in the Special Region of Yogyakarta (4.86/1000). According to Global Burden Cancer (GLOBOCAN) data, the International Agency for Cancer Research recorded 58,256 cases of breast cancer out of a total of 348,809 cancer cases in Indonesia (Kartika Adyani et al., 2022; Siregar, 2022)

According to data from the NTB Provincial Health Office in 2021, there were 34 cases of breast cancer out of 803,884 residents, with 36,084 women undergoing breast examinations (Çelik & Çalım, 2023; Dechasa et al., 2022; Kothiyal et al., 2023). In North Lombok Regency, the early detection rate of cervical cancer and breast cancer in women aged 30-50 years reaches 88.5%. The most examinations occurred at the Gangga Health Center (7,519 times out of 6,828 women), Kayangan (4,772 times out of 3,724 women), and Tanjung (6,626 times out of 7,841 women). Several other health centers also recorded high examination rates, showing an increase in

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awareness of early detection in the region (Dikes KLU, 2021).

Globalization is causing rapid social change for Indonesian adolescents, changing their values and lifestyles and increasing their vulnerability to diseases, including reproductive disorders. Breast cancer is one of the diseases with a high incidence rate (Lestari et al., 2019; L. T. Sari et al., 2024). Research shows an increase in cancer cases at a young age in recent years. Epidemiological data recorded a surge in incidences in Asian countries such as Korea, Thailand, Japan, China, and Hong Kong (Candra Wahyuni & Retno Palupi Yonni Siwi, 2024). The American Cancer Society (ACS) recommends annual mammograms for women over 40 years old, clinical check-ups (SADANIS) every three years for women in their 20s, and SADARI every month for women starting at age 15 (Amegbedzi et al., 2022; Getu et al., 2022). Regulation of the Minister of Health Number 34 of 2015 emphasizes early detection of breast cancer through SADARI, a simple and economical method to identify potentially cancerous lumps (WHO, 2020). SADARI is a fast, non-invasive self-examination that aims to detect cancer at an early stage to increase the chances of effective treatment (Alidosti et al., 2022; Limidia Vidiandari, 2022).

Research in East Lombok by Irsan et al. showed that of the 62 respondents, 38 had less knowledge about SADARI, while only 7 had a good understanding (Karimian et al., 2022; Koçak Akgün & İldan Çalım, 2022). Early detection of symptoms can reduce the death rate by up to 25-30%. Early identification, rapid diagnosis, and early therapy are the keys to breast cancer cure. Education about SADARI is very important, considering that there are still many Indonesian women who do not understand how to do it. Lack of knowledge and information about early detection contributes to the high incidence of breast cancer (Mardiati Barus et al., 2025; Tae & Melina, 2020).

Increasing adolescents' knowledge about SADARI from an early age can have a positive impact on adulthood. Health education plays a role in changing behavior to better support health (Lestari et al., 2019). One of the effective media for SADARI education is TikTok videos, which are attractive to teenagers and support understanding with visual and audio displays. Video as a non-print learning medium can convey information comprehensively. Research shows that video media is effective in increasing understanding, attitudes, and actions related to SADARI (Limidia Vidiandari, 2022b; Wijayanti et al., 2020; Winarsih et al., 2024a), making it an interesting and easily acceptable educational strategy for teenagers. A preliminary study in Karang Langu Hamlet on December 29, 2023 found that 4 out of 10 adolescent girls often fingered their breasts but did not know the SADARI technique. Some teenagers claimed to have found lumps, and as of 2023– May 2024, four teenagers have undergone surgery to remove the lumps. The Hamlet Head stated that there has never been socialization regarding the early detection of breast cancer through SADARI in the region.

Method

This study uses a quantitative method with a preexperimental design, especially one group pre-test posttest. The effect of health education was measured by comparing knowledge before and after the intervention (Nurin Latifiani, 2021; Yuliza et al., 2021). Held in Karang Langu Hamlet in April-May 2024, the location was chosen because many young women do not understand SADARI. Population is all objects or subjects with certain characteristics that are determined to be researched and concluded. In this study, the population consisted of 93 adolescent girls in Karang Langu Hamlet. The sample is part of a population that has similar characteristics (Rahmadini et al., 2022). The sampling technique used is purposive sampling, which is the selection of samples based on certain considerations. Data collection begins with research permission, followed by measurement of SADARI knowledge before and after education through TikTok videos (Efni & Fatmawati, 2021; Rezi, 2021). Furthermore, the research determines the time period, data collection method, implementation of data collection, and ends with an analysis of the research results(Asmalinda et al., 2022).

Editing is the process of checking the completeness and clarity of filling in instruments in data collection (Suriani et al., 2023) *Coding* is the assignment of numerical codes to specific categories of data, which are required for computer-aided analysis, such as SADARI knowledge assessment (0 = False, 1 = True). *Entry* is done by entering data into a master table or computer database, then compiling a frequency distribution or contingency table. *Cleaning* aims to check and clean the data that has been entered to ensure accuracy before further analysis. All of these stages are important in ensuring the quality of data that is valid and can be used in research.

Univariate analysis is used to analyze each research variable, producing frequency and percentage distributions to compare the characteristics of variables (Winarsih et al., 2024b) Meanwhile, the bivariate analysis evaluated the relationship between two variables, in this case the effect of health education through TikTok videos on SADARI knowledge in adolescent girls. The analysis process includes normality tests, data analysis, and interpretation of results. The normality test using *Kolmogorov-Smirnov* showed that the data was not normally distributed (sig. 0.000). Therefore, data analysis was carried out by the Wilcoxon Rank Test nonparametric test. The results of the interpretation showed that there was a significant change in SADARI knowledge before and after the health education intervention.

Result and Discussion

Karang Langu Hamlet is located in Tanjung Village, Tanjung District, North Lombok Regency, West Nusa Tenggara Province which is bordered by Karang Swela Hamlet to the east, Karang Selumbung Hamlet to the north, Karang Nangka Hamlet to the west and Lading-Lading Hamlet to the south. Based on village data in 2023, Karang Langu Hamlet has 489 heads of families with a population of 1,496 people. This research was conducted from March to April 2024 with a total of 48 respondents. Data collection was carried out with the help of a questionnaire given to respondents. In this section, the characteristics of research respondents based on age and education level will be explained. Table 1 above shows the characteristics of respondents based on the age of middle adolescence (15-17 years) as many as 31 people (64.6%) and late adolescence (18-21 years) as many as 17 people (35.4%). Based on research by Hanifah (2019) related to age with knowledge about breast self-examination (SADARI). Knowledge or cognition is a very important domain to influence a person's actions (over behavior). Knowledge is influenced by several factors, including age. Age describes physical, psychological and social maturity that affects the teaching and learning process.

One of the factors that affect (Lestari et al., 2019) is age. Changes in physical and psychological aspects occur as a person ages. Physical growth can be grouped into four main categories, namely changes in size, changes in proportions, loss of new features and the emergence of new features caused by the maturation of organ function. While in the psychological or mental aspect, a person's level of maturity or maturity of thinking is increasing over time. According to findings in the field, adolescent girls have a low level of interest in reading and seeking information related to health, the level of dependence on 52 smartphones, especially social media, is high, so that it decreases interest in teaching and a culture of shame, which causes more respondents to have less knowledge before being given health education through TikTok videos. Based on research from (Ayuningtyas et al., 2022; Nurhayati et al., 2023), data shows that reading interest among the Indonesian people is very low, with a participation rate of only around 0.001% with an analogy of 1000, only 1 person is actively involved in reading activities. According to data from UNESCO (2020), Indonesia ranks second lowest in the world literacy category.

Research conducted by (Pratiwi & Alfiana, 2020) found that respondents who experienced smartphone addiction were dominated by adolescents with a female gender. Adolescent girls use smartphones to conduct online chats, blogging and social media updates. According to research, one of the impacts of smartphone addiction is a decrease in interest in learning in adolescents. (Utami, 2019) said that smartphone addiction in adolescents can be at risk of decreasing academic achievement and academic engagement. According to (Odgers & Jensen, 2020), Indonesia is ranked fifth in the world in terms of the most gadget ownership. Most of the Indonesian population including children, teenagers, adults and the elderly have their own personal devices. This is an early indicator of the emergence of dependence on gadgets. Research conducted by Sadoh et al., 2021 shows that out of 81 respondents, it is known that 40 adolescent girls (49.4%) have been SADARI. The results of the statistical test of knowledge (p=0.046) and culture of shame (p=0.000) which means that the variables of knowledge and culture of shame have a relationship with SADARI. According to research conducted by Sadoh et al., 2021), shame is created by several things, namely: first, based on one's own understanding of guilt, second, based on the belief of a certain local community to hold breasts by doing SADARI which is still considered taboo in society.

Based on the research of Juwita et al., 2022 the results of the study show that there is a relationship between age and the level of knowledge, this is confirmed by 53 with a p-value of 0.034 where the pvalue is <0.05, so statistically it can be concluded that there is a significant relationship between age and the level of knowledge. Age has a relationship regarding experiences that affect individuals so that age can be one of the factors in a person's level of knowledge (Rezi, 2021). The influence of age on knowledge about SADARI is also supported by the results of research by (Asmalinda et al., 2022; Efni & Fatmawati, 2021; Rahmadini et al., 2022). The study showed that 59 respondents (59%) had less knowledge, 22 respondents (22%) had enough knowledge and 19 respondents (19%) had good knowledge. From the results of the Chi Square test, pvalue = 0.001 (p<0.05) which shows that there is a significant relationship between age and SADARI knowledge.

Table 1. Distribution of Respondents by Age in KarangLangu Hamlet, February to March 2024

Age Range	Frequency	Percentage (%)
15-17 years old (Middle Teen)	31	64.6
18-21 Years (Late Teens)	17	35.4
Sum	48	100

From Table 2, the number of middle adolescents (15-17 years) is 31 people with a percentage of 64.6% and late adolescents (18-21 years) is 17 people with a percentage of 35.4%. From the table below, it is known that the largest number of respondents is from the high school level with a total of 29 people with a percentage of 60.4%, followed by the undergraduate education level with a percentage of 19 people with a percentage of 39.6%. The respondents with the most education were high school students with 29 people (60.4%) and bachelors with 19 people (39.6%). Knowledge is the result of human sensing or the result of a person's knowledge of objects through their senses (eyes, nose, ears and so on). Knowledge is a variety of things that a person obtains through the five senses (Amegbedzi et al., 2022).

According to Azhar et al., 2023, the level of education is one of the factors that affect a person's knowledge in relation to respondents in receiving the information provided. The level of education also greatly affects the process of individual understanding related to the level of knowledge so that a low level of education will make it difficult for a person to develop the mindset and material obtained. Knowledge is influenced by the education of the respondents. The higher the respondent's education, the better the respondent's knowledge will be because good thinking will make it easier for a person to absorb the information provided. A person's knowledge can be influenced by education, one of which is (Lestari et al., 2019). Education refers to the information that a person gives to others to ensure an understanding of something. It is undeniable that the higher a person's level of education the easier it is for them to receive information and ultimately the more knowledge they have. On the other hand, a low level of education for a person can be an obstacle to the development of attitudes towards the reception of information and introduced values.

Erlina et al., 2022 research on education and the use of mass media with WUS knowledge about SADARI using a sample of 393 people found that most of the respondents' knowledge had insufficient knowledge as many as 122 people (61.6%) and the education of the respondents was mostly elementary education as many as 137 people (69.2%). The results of the statistical test showed a p-value of 0.000<0.05 which means that there is a relationship between education and WUS knowledge about SADARI.

This research is in accordance with the research that has been conducted by Getu et al., 2022 entitled the relationship between the level of education and the level of knowledge of women aged 20-40 years about SADARI as one of the ways to detect breast cancer early in Sidodadi Hamlet. The results of the study obtained a p-value of 0.000<0.05 showing that there was a relationship between the level of education and the level of knowledge of women aged 20-40 years regarding breast self-examination (SADARI). In the research conducted by Rahmadini et al., 2022, the data was analyzed by classifying the level of education and assessing the percentage of knowledge level on the results of respondents' answers. The results obtained were the level of knowledge of respondents with the category of poor as much as 33%, enough by 36% and good by 31%.

The results showed that there was a relationship between the level of education and the level of knowledge with a sig value of 0.000 (<0.05). In addition to education and age, knowledge is also influenced by several other factors such as employment, interests, experience and ease of access to information (Lestari et al., 2019). The results of the research conducted by Saragih (2020) found that most of the respondents had good knowledge as many as 62 people (91.2%) and enough as many as 6 people (8.8%). The results obtained have an influence between health education and SADARI knowledge. This is because the education of respondents who are already 55 is high, namely vocational schools, making it easier to receive the information provided.

Table 2 Distribution of Respondents based on educationin Karang Langu Hamlet, February to March 2024.

Education	Frequency	Percentage (%)
SMA	29	60.4
Bachelor	19	39.6
Sum	48	100

In Table 3 Identification of knowledge before being given health education, it shows that knowledge before being given health education with good criteria as many as 4 people (8.3%), enough as many as 18 people (37.5%) and 26 people (54.2%) with poor knowledge. Knowledge is influenced by several things, namely: education, the higher a person's level of education, the easier it is for them to receive the information provided and ultimately the more knowledge they have. On the contrary, a low level of education becomes an obstacle to a person's acceptance of information so that it causes a person's low knowledge. Age can also affect knowledge. In line with education, age can also affect knowledge. The older a person gets, there will be changes in physical and psychological (mental) aspects. In the psychological (mental) aspect, the level of maturity or maturity of a person's thinking increases as they age. Other factors that can increase knowledge are interest, experience and ease of access to information (Lestari et al., 2019)

According to Dyanti's (2019) research related to factors that affect breast self-examination (SADARI) in women of childbearing age. The results of the study

were obtained in the age category and knowledge related to breast self-examination behavior (SADARI). Sadoh et al., 2021 research obtained statistical test results showing that knowledge (p=0.046), culture of shame (p=0.000), exposure to information (p=0.008), family support (p=0.001) and support of health workers (p=0.005) which means that the variables of knowledge, culture of shame, family support, information exposure and support of health workers are related to SADARI. Based on research conducted by (Siregar, 2022) related to factors that affect SADARI in adolescent girls in class X. Of the 150 respondents, 84% have the behavior of not doing SADARI. Significant related variables were attitudes, family history, media information and family influence. The most dominant variable is mass media information, which means that respondents who are exposed to mass media information have 16 times the opportunity to do SADARI compared to respondents who are not exposed to mass media information.

Knowledge can be improved by providing health education. Education refers to the information that a person gives to others to ensure an understanding of a (Sadler et al., 2007). In line with the research of Saragih (2020), the results of this study show that most of the respondents after being given health education have a good level of knowledge about SADARI, namely 62 people (91.2%). The level of knowledge of SADARI is sufficient, which is 6 people (8.8%). From the results of the statistical test, the p-value was obtained 0.00 because the value of <0.05 can be concluded that there is an influence between health education and breast selfexamination (SADARI) on the knowledge of early detection of breast cancer in adolescent girls in vocational schools.

Table 3 Adolescent knowledge before being givenhealth education.

Categories Knowledge	Frequency	Percentage (%)
Good	4	8.3
Enough	18	37.5
Less	26	54.2
Sum	48	100

Based on Table 4, the results show that after being given health education through TikTok video media, most of the young women have good knowledge, which is as many as 37 people or 77.1%. Meanwhile, the level of knowledge that is classified as sufficient is found in 11 people with a percentage of 22.9%. This indicates that education using TikTok video media is effective in increasing young girls' understanding of SADARI. This increase shows that the use of interactive and easily accessible digital media can be an effective educational method in increasing awareness and understanding of early detection of breast cancer.

 Table 4 Adolescent knowledge after being given health

 education

Categories Knowledge	Frequency	Percentage (%)
Good	37	77.1
Enough	11	22.9
Less	-	-
Sum	48	100

The results showed that the respondents' knowledge after being given health education was good for 37 people (77.1%) and enough for 11 people (22.9%). The provision of health education through TikTok videos that has been carried out has provided a change, namely a good category for respondents. After being given health education, the majority of respondents have known about SADARI well.

Knowledge can be improved by providing health education. Education refers to the information that a person gives to others to ensure an understanding of something (Lestari et al., 2019). According to Efni & Fatmawati, 2021, health education can be interpreted as a dynamic process in changing human behavior, with the aim of changing aspects of knowledge, attitudes, and behaviors related to achieving a healthy life, both at the individual, group, and community levels. Health education involves using available health care facilities in an appropriate manner. More than just delivering information, health education is a collection of experiences that are useful for influencing health behavior, and is a process that involves participants in a broader context.

According to Asmalinda et al., 2022, health education is a persuasive effort or learning process aimed at the community with the aim that they are willing to take actions to maintain and improve their health level. Health education is a self-care action carried out by nurses to help clients, both individuals, groups, and communities, in overcoming various health problems through learning activities. In this context, nurses play the role of educators who are in accordance with their role as nurses. The purpose of providing health education is to expect changes in the knowledge, attitudes and behaviors of individuals, families and communities. This change is directed to maintain a healthy lifestyle and play an active role in efforts to improve the optimal health degree (Lestari et al., 2019)

According to the research of Wijayanti et al., 2020, the results of the hypothesis test obtained showed that the p-value was 0.000<0.05 so that there was an influence of health education about SADARI through video media on the knowledge of young women of SMK Muhammadiyah Cawas Klaten. Based on Prastyaningrum's research (2024) on the influence of education through TikTok social media on adolescent girls' knowledge about anemia at SMA Citra Nusa Cibinong. The results of the study found that there was an increase in the average score of knowledge before education was 7.00 and after education was given of 9.64 with p-value = 0.000<0.05 which means that there is an influence of media education through TikTok social media on knowledge.

Research conducted by Juwita et al., 2022 related to the effectiveness of SADARI health education on the level of knowledge and attitude of WUS regarding early detection of breast cancer. The results of the research conducted from 15 research articles used 13 of them showed that there was an influence of SADARI health education on the level of knowledge and attitude of WUS about early detection of breast cancer. Health education can improve respondents' knowledge. Health education can be used with various methods, one of which is through audio-visual media and social media (TikTok). Audio visual media is a type of media that contains sound and image elements that can be seen such as videos, sound slides and so on. The ability of audio-visual media is considered better and more interesting because it contains two elements, namely heard and seen, (Ayuningtyas et al., 2022; Karimian et al., 2022). According to Ayuningtyas et al., 2022 research, TikTok social media can be processed into an interesting and interactive learning medium for teenagers.

According to research by Pratiwi et al (2020), the results of the study showed an increase in knowledge before and after health education through videos. The knowledge of adolescent girls before being given health education with video media was lacking for the majority of 48 respondents (84.2%) and after being given health education through video knowledge was good for 40 respondents (70.2%). The results of the Wilcoxon test were obtained with p-value= 0.000 (p=value<0.05) so that it can be concluded that there is a difference in the knowledge of adolescent girls before and after being given health education about SADARI through video media. The influence of health education through Tiktok videos on the knowledge of 51 SADARI in adolescent girls was tested using the Wilcoxon Rank Test with the help of the SPSS v.23 application with the provision that if the p-value < 0.05, Ho would be rejected. The results of the influence test can be seen in the table below. Based on the results of the analysis using the Wilcoxon Rank Test, a Pvalue of 0.000 was obtained, because the significance value was 0.000 < 0.05, so Ho was rejected and Hi was accepted, which means that there is an influence of health education through TikTok videos on the knowledge of SADARI in adolescent girls in Karang Langu Hamlet.

Table 5 Analysis of the influence of health education through TikTok on SADARI knowledge in adolescent girls in Karang Langu Hamlet.

0 0	0			
Knowledge Before-	Mean	Z	p-Value	Ν
Knowledge After	24.00	-5.938b	0.000	48

The study showed that the results of the normality test obtained abnormally distributed data with a significance result of 0.000<0.05. The results of the Wilcoxon Rank Test obtained a significance value of 0.000<0.05, then Hi was accepted and Ho was rejected which means that there is an influence of health education through a video about SADARI on young women in Karang Langu Hamlet. Health education is a learning effort given to the community so that the community has the knowledge and actions to maintain and improve their health level. Health education is an independent act of nursing to assist clients, both individuals, groups and communities in overcoming their health problems through learning activities in which nurses are nurse educators in accordance with the duties of a nurse (Erlina et al., 2022). The purpose of providing health education is to expect changes in the knowledge, attitudes and behaviors of individuals, families and communities. This change is directed to maintain a healthy lifestyle and play an active role in efforts to improve the optimal health degree (Lestari et al., 2019).

Health education can be provided directly or through certain media. Health education media is a communication tool used to convey health messages. The selection of health education media depends on the number of targets, geographical conditions, characteristics of participants and the availability of supporting resources. Some examples of health education media that can be used are video media, the advantage of video media is that it can depict reality that is difficult to record by the eyes and the mind can also be repeated to see the available information. The research of Juwita et al., 2022 with the title Increasing SADARI Knowledge through Health Education Using Videos The results obtained were that the average value of SADARI knowledge before being given a video was 8.9 and the average value of SADARI knowledge after being given a video was 12.9. The average increase in knowledge about SADARI before and after giving videos about SADARI was 4. Media in the form of videos was proven to increase SADARI knowledge before and after the intervention with a significant difference shown in the ttest value with a significance of 0.000 (p-value <0.05).

The results of the study by Istiqomah et al, (2023) show that p value = 0.000<0.05 then Ha is accepted, this means that there is an effect of breast self-examination counseling (SADARI) through video media on the level of knowledge about SADARI in adolescent girls at SMA

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Negeri 1 Pleret. This research is in line with the research conducted by Efni & Fatmawati, 2021; Rahmadini et al., 2022, the results of the research before being given a video obtained an average knowledge of 15.05, while after giving a video, an average score of 15.75 was obtained. The results of the Wilcoxon test showed that the average knowledge before and after the video was given increased by 0.70 with a p-value of 0.000. This means that the provision of SADARI videos is able to increase employees' knowledge about SADARI.

In addition to videos, health education can also be provided through social media. Technological advances provide better means to support communication in social life. Social media is an internet-based tool that helps its users communicate and relate and collaborate in real time. Social media changed communication habits from 60 face-to-face meetings to communication using applications (Utami, 2019). According to (Pratiwi & Alfiana, 2020) social media can function as a health promotion media. The use of social media for health promotion is very important for various institutions that focus on handling health (Vedel et al., 2020).

One of the social media that can be used as a medium for health education is the social media TikTok. TikTok is one of the social media that is popular and liked by people from various circles. TikTok allows its users to be able to create videos with additional sounds and add songs that can be selected according to the Ministry wishes. According to the user's of Communication and Information Technology (KemenKominfo), 63 million people use the internet and 95% of them are used to access social media. Based on Sensor Tower (2020) data, TikTok became the first social media that was downloaded the most globally. Tiktok is a social media and music video platform originating from China which was released in September 2016 and then Aji (2020). The TikTok application can now be used as a learning and educational medium by (Ayuningtyas et al., 2022).

Based on Ayuningtyas et al., 2022; Pratiwi & Alfiana, 2020 on the influence of education through TikTok social media on adolescent girls' knowledge about anemia at SMA Citra Nusa Cibinong. The results of the study found that there was an increase in the average score of knowledge before education was 7.00 and after education was given of 9.64 with p-value = 0.000<0.05 which means that there is an influence of media education through TikTok social media on knowledge. In addition to using videos and social media, health education can be provided to respondents by other methods such as leaflets, PPTs, lectures, and others. Research conducted by (Juwita et al., 2022) regarding breast cancer prevention through SADARI health education for Madrasah Aliyah Qamarul Huda students where the provision of health education using the lecture method and leaflet media was obtained to increase knowledge based on the results of the evaluations that have been carried out. Knowledge before and after was significantly different after health education activities were carried out so that health education was very beneficial to the aspect of increasing knowledge 61 which would later have an impact on the attitude of adolescent girls in early detection of breast cancer.

Conclusion

Based on the results of the study, it can be concluded that health education through TikTok videos has an effect on increasing SADARI knowledge in adolescent girls in Karang Langu Hamlet. The study involved 48 respondents, with the majority aged 15-17 years (64.6%) and having a high school education. Before being given health education, the majority of respondents' knowledge levels were poor (54.2%), adequate (37.5%), and good (8.3%). After the intervention, there was an increase with 77.1% of respondents having good knowledge and 22.9% adequate. The results of the Wilcoxon Rank Test showed a p-value of 0.000 < 0.05, which indicates a significant influence of health education through TikTok videos on the improvement of SADARI knowledge.

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Conflicts of Interest

The author declares no conflict of interes

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