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OPTIMIZING KNOWLEDGE ON THE PREVENTION OF SEXUAL VIOLENCE IN ELEMENTARY SCHOOL CHILDREN THROUGH ANIMATION VIDEO-BASED EDUCATION

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ABSTRACT

This Community Service activity aims to increase students' knowledge about primary prevention of sexual violence through sexual education using animated video media at SDN Singonegaran 2 Kediri City. The program is carried out based on the needs of partners for health education that is in accordance with the characteristics of elementary school age children so that material on sexuality, forms of sexual harassment, the impact of sexual violence, and self-protection efforts can be delivered in an attractive and easy-to-understand manner. The implementation method includes health counseling using animated video media followed by interactive discussions and evaluations using **pre-test** and post-test designs for 18 students as participants in the activity. The results of the activity showed that before education, most participants had a level of knowledge in the sufficient category as many as 9 respondents (50.0%), the poor category as many as 7 respondents (39.0%), and the good category as many as 2 respondents (11.0%). After the implementation of education, the majority of participants were in the good knowledge category as many as 12 respondents (67.0%), while the sufficient category was 4 respondents (22.0%) and the poor category was 2 respondents (11.0%). The analysis of the evaluation results showed that there was a significant difference between the level of knowledge before and after the implementation of education. In addition to improving the results of knowledge measurement, the output of the activity showed that participants were able to recognize forms of sexual violence, understand its impact, and know the steps that must be taken if they face situations that endanger them. Thus, sexual education through animated video media is effective in increasing students' knowledge about primary prevention of sexual violence and can be used as a health education medium that supports promotive and preventive efforts in the elementary school environment.

Keywords: *sexual education, animated videos, prevention of sexual violence, knowledge, elementary school children.*

INTRODUCTION

Sexual violence against children is one of the health, social, and educational problems that require serious attention because its impact not only affects physical conditions, but also psychological, emotional, social, and quality of life of children to adults. Elementary school-

age children are a group that is still at the stage of cognitive and emotional development so that they are not fully able to recognize forms of sexual violence, understand personal body limits, and determine the right actions when facing situations that threaten their safety. This condition makes education about the prevention of sexual violence one of the forms of primary prevention that must be provided from an early age through methods that are in accordance with the characteristics of child development. Based on the results of the situation analysis conducted by the service team at SDN Singonegaran 2 Kota Kediri, it was found that students' knowledge about the definition of sexual violence, forms of sexual violence, the impact it causes, and self-protection measures are still limited so that educational interventions are needed that are able to improve their understanding comprehensively. In addition, the results of *the need assessment* show that schools do not have interesting and easy-to-understand educational media to deliver material on sexual violence prevention to students. The material that has been provided so far is still general so that it has not been able to provide a deep understanding of self-protection efforts against various forms of sexual violence. Based on these conditions, the Community Service team from the Bachelor of Nursing Study Program of STIKES Baptist Hospital Kediri carried out the program "Sexual Education Through Animated Videos as an Effort to Prevent Primary Sexual Violence in Children at SDN Singonegaran 2 Kediri City" as a form of implementation of the tridharma of higher education which is oriented towards solving public health problems through a promotive and preventive approach. This program is prepared based on the real needs of partners by involving schools as active partners in the process of planning, implementing, and evaluating activities so that the solutions provided are in accordance with the conditions and characteristics of students. The results of the activity show that the program is directed to increase students' knowledge through interesting and easy-to-understand learning media so that it is expected to be able to form children's awareness in protecting themselves from the risk of sexual violence from elementary school age.

The urgency of implementing this activity is getting stronger because sexual education for children is still often seen as a sensitive topic so that its delivery in the school environment has not been carried out optimally. In fact, sexual education for children does not aim to introduce sexual behavior, but to provide an understanding of body functions, personal body boundaries, safe and unsafe forms of touch, and self-protection measures when facing situations that have the potential to lead to sexual violence. The results of the literature synthesis that you attached show that health education on sexual violence prevention has a positive impact on improving knowledge, awareness, and *self-protection skills* in children after participating in educational interventions. Various studies summarized in the literature show that the use of educational media such as animated videos, audiovisual media, educational games, and story-based approaches is able to increase participants' understanding because the material is presented visually, interestingly, and in accordance with the child's cognitive development stage. In addition, animated videos have the ability to combine elements of images, sounds, text, and storylines so that the information conveyed is easier to understand than conventional lecture methods. The literature synthesis also explains that the effectiveness of animation media increases when it is developed based on target needs, uses simple language, displays illustrations that are appropriate to children's daily lives, and is combined with discussion or question and answer sessions. These findings became the scientific basis for the service team in choosing animated videos as the main media in health

education activities because they were considered in accordance with the characteristics of elementary school students and were able to increase participant involvement during the learning process. Thus, the implementation of this activity not only answers the needs of partners, but is also supported by scientific evidence regarding the effectiveness of animated video media in improving children's health knowledge.

The profile of the partner in this activity is SDN Singonegaran 2 Kediri City, which is an elementary school that is the location for the implementation of community service programs. Based on the results of the identification of common needs by the school, it was found that students need health education on sexual violence prevention that is packaged attractively and according to their age. The school provides full support for the implementation of activities through the provision of venues, coordination of participants, teacher assistance during the activity, and involvement in the evaluation process. The collaboration shows that the school is committed to improving the quality of health education for students as part of efforts to create a safe learning environment and support children's growth and development. The activity is designed in several stages which include problem identification, preparation of educational media, implementation of counseling using animated videos, interactive discussions, and evaluation using *pre-test* and *post-test instruments*. This approach was chosen so that participants can gain a more active learning experience so that material on the definition of sexual violence, forms of sexual violence, impacts, and prevention efforts can be better understood. The results of the evaluation of the activity showed an increase in students' knowledge after participating in education using animated videos, which is an indicator that the media used is able to support the learning process according to the program's objectives. Thus, the active involvement of partners and the application of educational methods that are in accordance with the characteristics of the target are important factors in supporting the success of this community service activity.

This service activity also has a strong connection with the literature you attach. The first literature explains that animated video media is one of the effective health education innovations in improving children's health knowledge, attitudes, and behaviors because it is able to convey information visually, attractively, and easily understood according to the level of development of participants. The literature emphasizes that the use of animation in health education can increase attention, learning motivation, and information retention so that participants can more easily remember the material provided. Meanwhile, a synthesis of the literature on sexual violence prevention health education shows that educational interventions provide a consistent improvement in children's knowledge, awareness, and self-protection skills after participating in health education programs. Various forms of intervention reported, including animated videos, educational games, and other audiovisual media, showed positive results in building children's ability to recognize risky situations, reject actions that lead to sexual violence, and seek help from trusted adults. The compatibility between the results of the literature review and the needs of partners shows that the use of animated videos as an educational medium is the right choice to be applied to elementary school students. Therefore, this program is not only based on field needs, but also supported by scientific evidence that strengthens the effectiveness of methods used in improving knowledge on primary prevention of sexual violence in children.

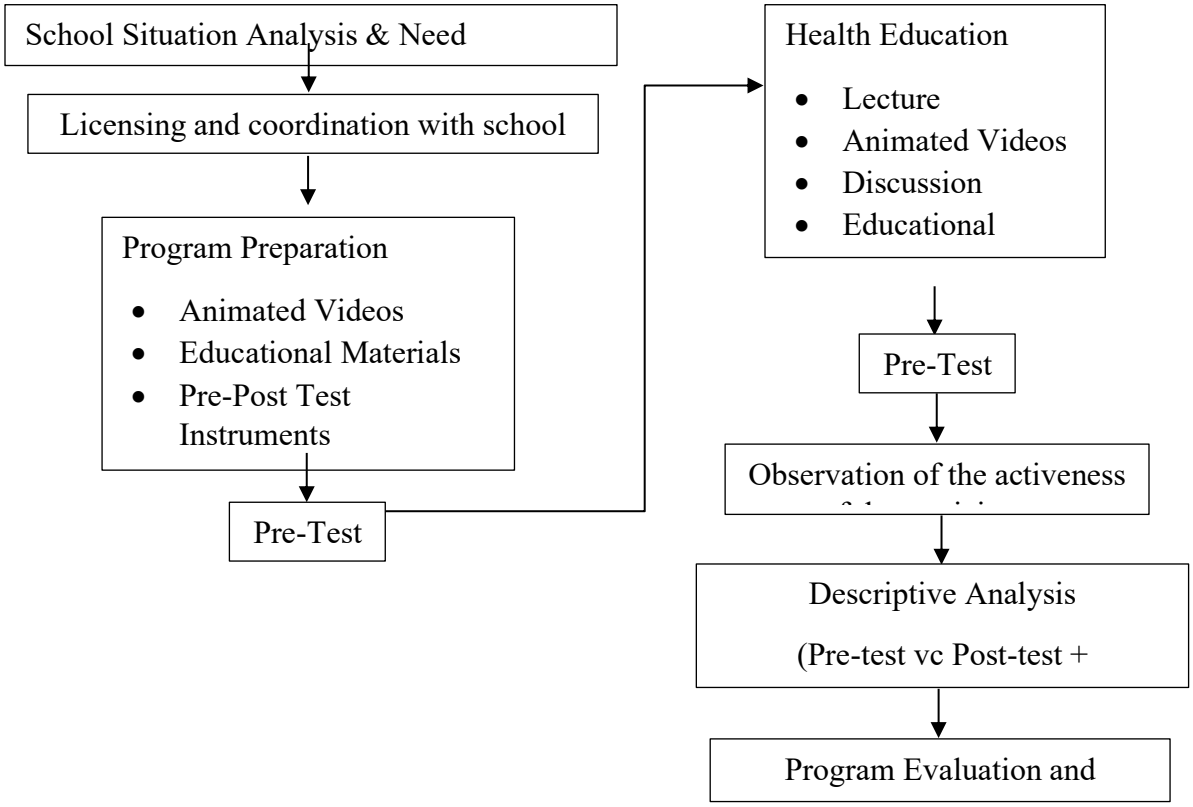
Based on the analysis of the situation, the results *of the need assessment*, the characteristics of the partners, and the available literature support, the main purpose of this

Community Service activity is to increase the knowledge of students of SDN Singonegaran 2 Kota Kediri about the definition of sexual violence, forms of sexual violence, the impact it causes, and primary prevention efforts through health education using animated video media. This program also aims to provide an interesting learning experience, increase student participation during the education process, and build basic skills in self-protection against potential sexual violence. To determine the achievement of these goals, the activity is complemented by evaluation using *pre-test* and *post-test* so that changes in participants' knowledge can be measured objectively. Based on these goals, the formulation of the problem in this service activity is: "How can the implementation of sexual education through animated videos increase the knowledge of students of SDN Singonegaran 2 Kediri City about the primary prevention of sexual violence against children?" The formulation of the problem is the basis for the preparation of all stages of activities, starting from identifying needs, preparing educational media, implementing interventions, to evaluating the results of activities. Thus, this activity is expected not only to provide direct benefits for students as participants, but also to become a model of health education that can be applied sustainably by schools in supporting child protection efforts through innovative media-based health education.

METHOD

This Community Service activity uses a counseling-based health education design combined with animated videos, lectures, and educational games as the main method to increase students' knowledge about primary prevention of sexual violence. The method was chosen based on the results of the analysis of the situation and the needs of partners which showed that conventional learning was less effective so that more interactive media was needed and in accordance with the characteristics of elementary school students. The activity was carried out at SDN Singonegaran 2 Kediri City with the target of elementary school students as program participants, while the school acted as a partner who supported coordination, provision of places, participant assistance, and the implementation of activity evaluations. The implementation stage began with the preparation of assignment letters and permits from the institution, followed by coordination with the Principal of SDN Singonegaran 2 Kediri City to determine the time, place, and mechanism for implementing the activity. After the schedule was agreed, the service team prepared animated video media, educational materials about the definition of sexual violence, forms of sexual violence, the impact of sexual violence, and primary prevention efforts, then held counseling for all participants according to the set schedule. According to educational activities, it is carried out in one meeting followed by evaluation in the next period to measure the increase in participants' knowledge. The activity instruments used include animation video media as the main learning medium, educational/counseling materials, pre-test and post-test instruments to measure changes in knowledge before and after the intervention, as well as observation sheets used to record student participation, attention, and involvement during the activity. Data collection is carried out through measuring pre-test scores before the delivery of the material, filling out the post-test after the entire series of education is completed, and direct observation of the participants' activeness during the learning process. This approach is in line with the literature you attached, which explains that the use of animated video media in health education is able to increase student engagement and the effectiveness of material

delivery through a combination of visual, audio, and narrative elements that are appropriate to the child's developmental stage. In addition, the literature on sexual violence prevention health education shows that evaluation using pre- and post-intervention measurements is an appropriate way to describe changes in knowledge and self-protection abilities after educational activities. Based on this approach, the evaluation analysis in this activity is carried out descriptively by comparing the results of the pre-test and post-test to see changes in the level of knowledge of the participants, then supported by the results of observations during the activity as a complement in describing the achievement of program objectives without conducting an inferential analysis.



RESULT AND DISCUSSION

1. *Implementation of Activities and Participant Participation*

Community Service activities were carried out at SDN Singonegaran 2 Kediri City with the theme *Sexual Education Through Animated Videos as an Effort to Prevent Primary Sexual Violence in Children*. The activity is the implementation of the program that has begun with situation analysis, identification of partner needs, preparation of educational materials, coordination with the school, and the implementation of counseling using animated video media. The school participates in the provision of activity venues, coordination of participants, and assistance during the implementation of education. The target of the activity is elementary school students who take part in a whole series of activities starting from filling out the pre-test, delivering material using animated videos, discussions, to filling out the post-

test as the final evaluation. Based on the PKM results document, the number of participants who took part in the activity was 18 students. All participants participated in a series of activities according to the schedule that had been set by the service team with the school. During the activity, the educational process using audiovisual media was combined with the delivery of material on the definition of sexuality, forms of sexual violence, the impact of sexual violence, and primary prevention efforts that can be carried out by children in accordance with the material that has been prepared in the service program.

2. *Pre-test and Post-test Measurement Results*

Knowledge measurement is carried out using pre-test instruments before providing education and post-test after all material is delivered. Based on the results of the PKM, before the implementation of education, a small number of respondents had knowledge of the good category, namely 2 respondents (11.0%), while the sufficient category was 9 respondents (50.0%), and the poor category was 7 respondents (39.0%). After the educational activities were completed, the post-test results showed a change in the distribution of knowledge categories, namely the good category to 12 respondents (67.0%), the sufficient category as many as 4 respondents (22.0%), and the less category as many as 2 respondents (11.0%). All of these results were obtained from filling in the evaluation instruments by 18 participants who participated in the complete activity. In addition to the distribution of knowledge categories, the PKM results document also included the results of the analysis that there was a significant difference between the level of knowledge before and after being given health education using animated videos. In the results section, it is only stated that there are significant differences without further interpretation of the causes or factors that affect them. The data is part of the evaluation used to describe changes in measurement results before and after the implementation of the program.

3. *Observation Notes and Implementation Documentation*

The implementation of the activity began with coordination with the school, preparation of animated video media, and the delivery of material by the service team. During the educational process, participants participated in an animated video screening containing material about the definition of sexuality, forms of sexual harassment, the impact of sexual violence, and efforts that can be made if faced with self-endangering actions. After the delivery of the material, the activity continued with a question-and-answer session and evaluation through filling out the post-test. The documentation of the activity shows the involvement of students during the educational process, the implementation of counseling in the classroom, the delivery of material by the service team, and the assistance by the teacher during the activity. The results of PKM show that all stages of activities are carried out according to the plan that has been prepared, starting from the preparation, implementation, to evaluation stages. In addition, the activity report noted that the school provided support for the implementation of the program through the provision of venues, coordination of participants, and facilitation of the implementation of activities so that the entire series of programs could take place according to schedule. There are no observation records that mention any special obstacles during the implementation of activities in the available documents.

Figure 1. Activity of implementation community service

4. *Interview Results, Outputs, and Partner Commitments*

Based on the available documents, there are no transcripts of interviews, FGDs, or direct quotes from participants or teachers. Therefore, this section only describes information that is explicitly written in the PKM results report. In the outside part of the activity, it is stated that after participating in education, "students are able to recognize and know about the efforts that should be made if things that are dangerous for them occur, especially about sexual violence." In addition, the report also states that after the implementation of health education, participants "are able to understand materials related to health education by introducing children from an early age about what sexuality is, forms of sexual abuse, the impact of sexual abuse and the efforts that should be made by children in the event of things that are harmful to them, especially about sexual violence." The statement is the output of activities listed directly in the PKM result document. In terms of partnership, it shows the active participation of SDN Singonegaran 2 Kediri City in supporting the entire series of activities from the planning stage to implementation. Documented forms of commitment include the provision of activity locations, coordination of participants, and the involvement of teachers in accompanying students during the activity.

5. *Quantitative and Qualitative Achievements of Activities*

The quantitative achievements of activities based on the results of PKM include the involvement of 18 participants, the implementation of pre-tests and post-tests, as well as changes in the distribution of participants' knowledge levels as stated in the results of the evaluation. Before education, the category of good knowledge was 11.0%, 50.0% was enough, and 39.0% was lacking. After education, the distribution changed to good category of 67.0%, 22.0% enough, and 11.0% less. In addition, the PKM results document noted significant differences between the results before and after the provision of education using animated videos. The reported qualitative achievements are in the form of students' ability to recognize the meaning of sexuality, forms of sexual harassment, the impact of sexual

violence, and the efforts that need to be made when facing situations that endanger them. The results show that the activities have been carried out according to the planned stages, starting from identifying needs, preparing materials, implementing education, to evaluating the results of the activities. The literature used in the preparation of the program describes that animated video media is an educational medium that can be used in child health education, while it summarizes various studies on health education on the prevention of sexual violence in children and various intervention media that have been used. Meanwhile, the document you attached does not present the results of the research used as a comparison, but rather contains a note that the available references are not yet adequate for a particular topic. All of this information is presented as stated in the document without any additions or interpretations outside of the available data.

Discussion

1. *The Relationship between Activity Results and Increased Participant Knowledge*

The results of the service activities showed that the implementation of education using animated video media was able to increase participants' knowledge about the prevention of sexual violence in elementary school children as shown by the increase in the pre-test and post-test results contained in the PkM result data. This finding was also strengthened by the results of observations that showed that participants were more active in asking questions, able to re-explain the material that had been received, and showed an understanding of the concept of personal body parts, forms of sexual violence, and self-protection measures according to the material presented. Activity documentation shows the active involvement of participants during video screenings, discussions, and Q&A sessions. This condition shows that animated video media is able to attract the attention of participants so that the process of delivering information takes place more effectively. These results are in line with the synthesis of literature that shows that animation media is one of the effective health education media in improving the knowledge of school-age children because it combines visual, audio, narrative, and illustration elements that are appropriate to the child's cognitive development stage (Ojio et al., 2024; Molster et al., 2025; Suwanphan et al., 2025). The literature also explains that the use of animation-based digital media improves children's ability to understand health information because the material is presented in an attractive, simple, and memorable manner (Acosta & Pisarnturakit, 2026; Casañas et al., 2025).

2. *The Significance of the Use of Animated Videos in Sexual Violence Prevention Education*

Animated video media used in community service activities makes an important contribution to the success of the educational process because it is able to convey material that was previously considered sensitive to be easier to accept by children. Based on the results of observations during the activity, participants showed full attention when the video was played and showed enthusiasm in the discussion session after the presentation of the material. The documentation of the activity also shows that participants follow the entire series of education until it is completed without leaving the room, and are able to actively participate when given questions or simple simulations about self-protection. The significance of the use of animation media is in accordance with various research results that state that animated videos are able to increase knowledge, attitudes, and even healthy behavioral tendencies in school children because the delivery of material is carried out through visual illustrations that are attractive and easy to understand (Ojio et al., 2024; Suwanphan et al., 2025). In addition, the audiovisual approach also provides an opportunity

for participants to understand risky situations through visualized examples so that the learning process takes place more concretely than conventional lecture methods (Casañas et al., 2025). The literature also explains that the effectiveness of animation media is higher if the material is adjusted to the characteristics of the child's age and delivered using simple language and narratives that are close to the participants' daily lives (Molster et al., 2025). Thus, the results of PkM activities show conformity with scientific evidence that states that animated videos are an effective educational medium in improving children's health literacy.

3. *Answers to the Formulation of PKM Activity Problems*

The formulation of the problem of service activities focuses on how education using animated videos can increase knowledge of sexual violence prevention in elementary school children. Based on the results of the pre-test and post-test, observation data, documentation of the activity, and brief interviews during the implementation of the activity, it can be seen that participants experienced an increased understanding of forms of sexual violence, personal body parts that must be protected, how to say "no", stay away from the perpetrator, and report the incident to trusted adults. These results show that the objectives of the activity to increase the knowledge of the participants were successfully achieved according to the planned indicators and the results of the evaluation of the activities. The literature analyzed also showed similar results, namely that health education on sexual violence prevention consistently improved children's knowledge after educational interventions were provided (AS et al., 2023; Solehati et al., 2021). In addition to increasing knowledge, various studies also show an increase in awareness and self-protection skills after children receive health education using media that are appropriate for their age (Nurfitriyanie & Salim, 2023; Audini et al., 2023). Therefore, the answer to the formulation of the problem shows that the use of animated videos is an effective educational strategy in increasing children's understanding of sexual violence prevention in accordance with the results of activities and the synthesis of literature that has been analyzed.

4. *Contribution of Activities to Community Service Practices*

The implementation of community service activities makes a practical contribution to the development of a digital media-based health education model in the elementary school environment. The results of the activity show that animated videos can be used as a learning medium that is easy to apply by teachers and health workers because they do not require complex equipment other than video player devices. During the activity, teachers and schools also showed support for the implementation of the program by providing facilities, accompanying participants, and participating in all educational series. The documentation of the activity shows that there is collaboration between the service team, teachers, and students in the process of delivering material and evaluating activities. This contribution is in line with various studies that emphasize the importance of school involvement as the main environment in the implementation of sexual violence prevention programs in children (Hafshah et al., 2021; Solehati et al., 2022). The literature also explains that the involvement of teachers and educators is able to strengthen the success of educational programs because the material can be repeated in the learning process at school (Audini et al., 2023). Thus, this service activity not only increases the knowledge of participants, but also strengthens the school's capacity in developing a safer learning environment and supporting child protection.

5. *Practical Implications for Schools and Program Sustainability*

The results of the activity have practical implications that animated video media can be used as one of the supporting teaching materials in health education programs in elementary schools. Based on the documentation of the activity, participants were able to follow the material well, while teachers responded positively to the use of audiovisual media as a learning method. The findings show that educational materials can be reused in the next learning activity without requiring significant changes in substance. The literature synthesis also recommends the integration of animated videos into the health education curriculum as these media have been shown to increase knowledge, health literacy, and student engagement (Acosta & Pisarnturakit, 2026; Molster et al., 2025). In addition, the sustainability of the program can be strengthened through the implementation of regular education, teacher training, and parental involvement so that material on self-protection is not only understood at school but also applied in the family environment (Hafshah et al., 2021; Audini et al., 2023; Solehati et al., 2022). Thus, the results of this activity provide a practical basis for schools to develop educational programs for the prevention of sexual violence in a sustainable manner according to the needs of students.

CONCLUSION

Community Service activities regarding sexual education through animated videos as an effort to prevent primary sexual violence against children at SDN Singonegaran 2 Kediri City show that the goals of the program have been achieved based on all the data obtained from the activities obtained. The results of the pre-test and post-test evaluations showed an increase in the level of knowledge of participants after participating in education. Before the intervention, most of the participants were in the category of sufficient knowledge as many as 9 respondents (50.0%), the category of lack as many as 7 respondents (39.0%), and only 2 respondents (11.0%) had good knowledge. After the education using animated videos was given, the majority of participants moved to the good knowledge category as many as 12 respondents (67.0%), while the sufficient category became 4 respondents (22.0%) and the less category remained 2 respondents (11.0%). Statistical analysis of the results of the study also showed that there was a significant difference between the level of knowledge before and after the intervention, so that the animated video media used in this activity was proven to be effective in increasing participants' knowledge about the prevention of sexual violence in accordance with the data of the results of PkM. The findings are also in line with the synthesis of the literature which states that animated video media is able to increase health knowledge, health literacy, as well as children's understanding of the material presented because it combines visual, audio, and narrative elements that are in accordance with children's development (Acosta & Pisarnturakit, 2026; Ojio et al., 2024; Molster et al., 2025; Suwanphan et al., 2025). In addition, these results also support various studies on sexual violence prevention education that show that audiovisual media is effective in increasing children's knowledge, awareness, and self-protection skills (AS et al., 2023; Solehati et al., 2021; Nurfitriyanie & Salim, 2023).

The direct benefits of this activity can be seen from the increased understanding of participants about sexual education, forms of sexual harassment, the impact of sexual violence, and the steps that must be taken when facing dangerous situations. Based on the output of the activity, students are able to recognize the right actions as a form of self-

protection when facing potential sexual violence and understand the importance of reporting incidents to trusted adults. For the service team, the implementation of the activity provided learning that the use of educational media adapted to the characteristics of elementary school children was able to increase participant participation during the learning process.

Documentation and observation results during the activity also show that the delivery of material through animated videos makes participants more focused, actively participating in discussions, and easier to understand the material than conventional delivery. Based on these results, the sustainability of the program is recommended through the implementation of regular education in schools, the use of animated videos as a supporting learning medium, and the strengthening of collaboration between schools, teachers, parents, and health workers so that education on the prevention of sexual violence can be provided on an ongoing basis. These recommendations are in line with the literature that emphasizes the importance of integrating digital media in child health education, teacher and parent engagement, and continuous evaluation to sustain increased knowledge and strengthen children's self-protective abilities (Casañas et al., 2025; Hafshah et al., 2021; Audini et al., 2023; Solehati et al., 2022). Thus, this service activity provides real benefits for participants and schools as a preventive effort in increasing knowledge of sexual violence prevention in elementary school children, without adding findings beyond the data from the results of activities that have been obtained.

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