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# Development of Animation Video Based Media as Health Promotion Media regarding Providing MP-ASI to Mrs. Baduta

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ABSTRACT

Early complementary feeding behavior (<6 months) is still common in Indonesia, especially in East Java. Based on the results of a preliminary study in one area of East Java, namely Wonocolo District, Surabaya City, it was found that 80% of mothers gave early complementary foods. Therefore, a special program is needed to reduce the rate of early complementary feeding behavior, one of which is by providing education using media as a tool. Animated video is the media most chosen by the target. The main focus of this research is the development of animated video media which includes feasibility and effectiveness. The type of R&D research applied in this study took a one group pre-test post-test trial design. There were 4 treatments given to 30 targets in the trial stage, namely the pre-test, the provision of animated video media viewed at the same time and place, assessing the media, and also the post-test. After conducting the validation test, this animated video was considered very feasible by experts, namely material experts and media experts. This animated video is also considered effective, seen from the results of the paired sample t-test which shows a sig value. (2-tailed) 0.000 which is <0.05. This means that there is a difference in the average value of knowledge before and after being given animated video media. This shows that this animated video electronic media is very feasible and effective as a health education media on appropriate complementary feeding.

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## INTRODUCTION

Exclusive breastfeeding must be given until the baby is 6 months old. This is strictly regulated in government regulations which define exclusive breast milk as breast milk given to babies from birth to 6 months of age, without being replaced or supplemented with other drinks or food (Government of the Republic of Indonesia, 2012). Breast milk is the best source of nutrition for babies, but after 6 months of age, babies need additional nutrition from foods called complementary foods for breast milk (MP-ASI).(Elis et al., 2022). This research also explains that providing complementary breast milk foods appropriately can provide nutrients to babies who can then develop their psychomotor and physical abilities optimally. Apart from that, it also teaches babies to have good eating habits (Elis et al., 2022). Providing MP-ASI at the right age can support children's cognitive and psychomotor growth and development, as well as encourage proper eating habits. (Tristanti, 2018).

The death rate for toddlers is still quite high, this is in accordance with the results of research by the World Health Organization (WHO) in Agestika et al., (2022) which states that directly or indirectly, 54% of toddler deaths throughout the world are caused by poor nutrition. and malnutrition. Apart from that, 45% of under-five deaths on a global scale are also caused by an imbalance in nutritional intake in toddlers, whether it is excess or deficiency (Agestika et al., 2022).

Furthermore, this research is also supported by the finding that two-thirds of children who died had bad eating habits, including not being given exclusive breast milk, having an inappropriate, unhealthy and unbalanced diet.

Currently, there are many practices of giving early MP-ASI. The types of early MP-ASI food that babies eat are biscuits, porridge, bananas, baby food made from processed industrial products, crushed rice and pudding (Marlina, 2021). Research conducted by Harahap et al., (2019) resulted in the finding of the types of food that are often given when new babies are born, namely water 13.2%, honey 14.3% and formula milk worth 79.8%, or other types such as water sugar, starch water, non-formula milk (soy milk, fresh milk), coffee, sweet tea, smooth banana, smooth porridge and smooth rice. The baby's first food is very dangerous because it can replace colostrum as the baby's first food, this is because colostrum is able to optimize the baby's immune system (Harahap et al., 2019). In addition, foods other than breast milk actually contain fewer antibodies, enzymes, nutrients and other anti-infective substances, this situation causes babies to suffer from diarrhea, pneumonia and sepsis (Harahap et al., 2019).

Giving MP-ASI before the age of 6 months can endanger the baby's health, according to Marlina (2021) there is a very high risk of contamination when giving MP-ASI too early (< 6 months), such as inflammation of the walls of the digestive tract which is very dangerous for the baby. and can reduce breast milk production because the baby is rarely breastfed. This research also explains that the habit of giving MP-ASI early contributes to many children's problems such as malnutrition, allergies and digestive disorders. The baby's digestive tract system is also not fully developed in the first months of life, therefore if complementary foods are given to breast milk from an early age, it can cause many health problems that affect the baby's growth and development (Yanti & Laksmi, 2020). The research also explains that in babies less than 6 months old, many cells in the digestive tract are not fully developed so they are not ready to absorb and break down nutrients, so babies are more susceptible to allergies. Therefore, exclusive breastfeeding is sufficient for babies up to 6 months of age,This is due to compositionExclusive breastfeeding is already enough for the baby's growth and development if controlled properly without any additional supplements(Yanti & Laksmi, 2020).

The behavior of giving early MP-ASI still often occurs in Indonesia, especially in the East Java area. Therefore, researchers conducted a preliminary study of one of the areas in East Java, namely Wonocolo District, Surabaya City. This is because in the Wonocolo District area we often find mothers who provide early MP-ASI. A preliminary study was carried out by distributing questionnaires to determine the baby's age when they were first given MP-ASI. The targets in this preliminary study were 50 mothers who had toddlers aged 6-12 months from 5 posyandu. The target for this preliminary study was determined based on a simple random sampling technique by randomizing all the names of posyandu in Wonocolo District, Surabaya City. The results showed that 80% of mothers gave MP-ASI when the baby was <6 months old. The rate of behavior of giving early MP-ASI in Wonocolo District is very high because mothers do not understand the correct way to give MP-ASI. Based on information from several respondents, the foods that are often given when babies are <6 months old are starch, strained bananas and porridge. This is done because babies cry easily and can't calm down if they only give them milk. Therefore, special attention is needed by

providing health education with appropriate methods to suppress the behavior of giving early MP-ASI.

Health promotion is an appropriate promotional step to prevent health problems, especially in suppressing the behavior of giving early MP-ASI. This step is carried out by providing education by utilizing the use of media as a means of education. The choice of method in health promotion is also something that needs to be considered for the success of a program that aims to change people's behavior (Ministry of Health of the Republic of Indonesia, 2016). According to Wahyuni et al., (2021), the method often used in health promotion is providing educational media to make it easier to convey health messages and also help increase target knowledge. Media is a means of displaying health messages so that they can be well received by the target and make it easier for the target to understand the information conveyed by the communicator.

To find out the right media for the target, researchers conduct a media needs analysis first. The subjects in this media needs analysis were 30 young women who lived in Wonocolo District. After analyzing media needs, it was found that as many as 60% of respondents had never received educational media regarding giving MP-ASI, while the other 40% had received education through print media such as posters, leaflets, flyers, booklets, and also flip charts. However, 30% of respondents considered the media less interesting, 20% of respondents considered the media difficult to understand, and 23% of respondents considered the media less informative in conveying health messages, especially regarding the correct provision of MP-ASI. On the other hand, respondents also stated that they had received education regarding providing MP-ASI through an outreach program using the lecture method. However, the majority of respondents also stated that the lecture method without using media as a means meant that respondents often forgot the material that had been presented. Therefore, the majority of under-aged mothers are still not well educated regarding the proper provision of MP-ASI. Existing health promotion media are also considered ineffective, as evidenced by the behavior of providing early MP-ASI which is quite high in Wonocolo District, Surabaya City.

Most respondents, or 77% of the total respondents, wanted educational media regarding giving MP-ASI in the form of animated videos. 67% of respondents chose landscape-sized animated videos, 77% of respondents chose animated videos equipped with moving images, writing and sound, 93% of respondents chose animated videos with varied color combinations, 100% of respondents chose animated videos in Indonesian, 100% of respondents choose information that is short, concise and clear, and 60% of respondents choose animated videos with a duration of 3-5 minutes. A literature review conducted by Sismulyani (2019) stated that outreach activities using electronic media in the form of animated videos were considered effective in increasing target knowledge. In fact, compared to other methods, animated videos are considered the most effective. The effectiveness of using animated video media is considered good because animated videos present an attraction for participants, especially animations that are equipped with sound (Sismulani, 2019).

In general, this research aims to develop animated video electronic media to educate young mothers about the proper provision of MP-ASI. The development of this media includes two specific objectives, namely to determine the feasibility of animated videos based on validation results by

material and media experts, and also to determine the effectiveness of animated videos based on the results of limited trials.

## METHOD

This type of research is Research and Development (R&D) which goes through 8 research stages. According to Sugiyono (2022), R&D procedures are; 1) potential and problems, where researchers explore problems in the field by conducting a preliminary study in Wonocolo District. Researchers distributed questionnaires about the age of toddlers when given MP-ASI, as well as short interviews with several respondents. 2) data collection, carried out by distributing media needs analysis questionnaires which aim to find out what kind of educational media respondents expect. At this stage, most respondents chose animated video media. 3) product design, researchers begin to design/draft the contents of the animated video. 4) design validation, this stage is carried out by material experts and media experts. There are 2 expert validators, namely 1 expert in the material field and 1 expert in the media field. 5) design revision, carried out by improving the media according to input from material and media experts. 6) trial, using a one group pre-test post-test design for 30 respondents, namely by giving a pre-test before being given animated video media. After that, respondents were asked to watch the animated video three times at the same place and time, then respondents were asked to fill out a post-test and also a media assessment questionnaire. 7) product revision, at this stage media improvements are made based on suggestions and input from respondents in order to perfect the animated video media. 8) production/publication, carried out by disseminating animated video media through the Posyandu WhatsApp group throughout East Java.

The feasibility of animated video electronic media is based on the results of validation carried out by material experts and media experts. Meanwhile, the effectiveness of animated video electronic media is based on the results of limited trials which were analyzed using a paired sample t-test to determine differences in the level of knowledge of respondents. Media is considered effective if the sig value. (2-tailed) in the paired sample t-test results < 0.05, which means there is a significant difference in knowledge scores in the pre-test and post-test data.

## RESULTS AND DISCUSSION

### Results

### Animated Video Eligibility

The feasibility of the animated video is assessed based on validation from material and media experts. Validation of the material was carried out by representatives from the East Java Provincial Health Service as well as experts in the field of public nutrition, especially regarding the proper provision of MP-ASI. The purpose of testing the validity of the material is to find out whether the material in the media is suitable as health education material. The following is table 1 which shows the scoring results after assessing the material in the animated video.

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**Table 1. Material Expert Assessment**

| No. | Aspect | Indicator | Maximum score/value | Score/grade | % | Category |
|---|---|---|---|---|---|---|
| 1. | Content quality | Material compatibility with literature | 4 | 4 | 100 | Very worthy |
| 2. | Quality of presentation | Logical and systematic presentation of material | 4 | 4 | 100 | Very worthy |
| | | Presentation of colorful and attractive images | 4 | 4 | 100 | Very worthy |
| | | The material in the video includes clear sources | 4 | 4 | 100 | Very worthy |
| 3. | Linguistic quality | The correct use of Indonesian makes it easier for the target to understand | 8 | 8 | 100 | Very worthy |
| | | There are explanations of difficult terms | 4 | 4 | 100 | Very worthy |
| | | Accuracy of sentence structure | 4 | 4 | 100 | Very worthy |
| **% average of all aspects** | | | | | **100** | **Very worthy** |

From table 1, the percentage score obtained from the item analysis correlates the score obtained from each question item with the maximum score for each question item. From all aspects, including language quality, presentation quality and content quality, the material in this animated video media received a perfect assessment percentage, namely 100%. This means that the material in this animated video media is very suitable for use. According to expert information, the material presented was good, short and clear, in accordance with what respondents wanted in the results of the media needs analysis.

Meanwhile, media validation was carried out by one of the Public Health Sciences lecturers at the State University of Malang who is competent in the field of developing health promotion media. The aim of conducting a media validity test is to find out whether the media is suitable as an educational medium for the target, especially regarding providing appropriate MP-ASI. This assessment is carried out based on the appearance and design elements of the animated video media that has been developed. Table 2 below shows the results of media validity tests by experts.

**Table 2. Media Expert Assessment**

| No | Aspect | Indicator | Maximum score/value | Score/grade | % | Category |
|---|---|---|---|---|---|---|
| 1. | Animation Video Size | Animation Video size suitability | 8 | 8 | 100 | Very worthy |
| 2. | Thumbnail Design | The harmonious appearance of the | 8 | 8 | 100 | Very worthy |

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| No | Aspect | Indicator | Maximum score/value | Score/grade | % | Category |
|---|---|---|---|---|---|---|
| | Animation Videos | layout elements in the thumbnails has consistency and unity | | | | |
| | | Do not use too many letter combinations | 8 | 8 | 100 | Very worthy |
| 3. | Content illustration | Correspondence between image and material | 8 | 6 | 75 | Very worthy |
| 4. | Animation Video Content Design | Consistency of layout placement location with distance between spaces | 8 | 7 | 87.5 | Very worthy |
| | | Don't use too many types of letters | 12 | 12 | 100 | Very worthy |
| 5. | Animation Video Quality | The resolution of the animated video is good and looks clear | 4 | 4 | 100 | Very worthy |
| | **% average of all aspects** | | | | **83.3** | **Very worthy** |

As with media assessments in terms of material, the percentage scores in table 2 were obtained from item analysis correlating the score obtained from each question item with the maximum score for each question item. There are suggestions given by media experts to improve animated videos, namely that the display regarding the explanation of the definition of MP-ASI should be made more attractive, with appropriate images and plot so that the voice dubbing does not give the impression of reading the text. Media expert assessments are reviewed from several aspects and indicators. There are 5 indicators that show a perfect score, namely 100%, and 2 other indicators show almost perfect numbers, namely the material clarity indicator with images getting a score of 75%, and the indicator for consistency of layout placement with distance between spaces getting a score of 87.5%. The percentage obtained from the media assessment based on the average of all aspects shows 83.3%, which means that animated videos are included in the very worthy category.

**Effectiveness of Animated Videos**

The trial was carried out on 30 respondents who certainly met the research criteria, namely mothers who had children aged 0-24 months, lived in Wonocolo District, were active in posyandu activities, were physically and mentally healthy, and were willing to become research respondents. At this stage, respondents were given pre-test questions to determine the respondent's initial level of knowledge before being given animated video media. Next, respondents were asked to watch the

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animated video three times at the same place and at the same time, then respondents filled out post-test questions to see any changes in respondents' knowledge after being given the animated video electronic media. The questionnaire given to participants used the Guttman rating scale. According to Sugiyono (2022), the Guttman rating scale is a scale used to obtain certain responses from respondents on a survey instrument, meaning that there are only two answer intervals, namely "yes-no". This is also applied in the instrument in this research which uses a measurement scale in the form of a checklist with "yes-no" answer choices, with the highest (correct) answer score being one and the lowest (incorrect) being zero. Table 3 below shows the scoring results on pre-test and post-test data based on each questionnaire question item.

**Table 3. Trial Results**

| No. | Questionnaire Questions | Correct answer | Frequency | | | |
|---|---|---|---|---|---|---|
| | | | *Pre-test* | | *Post-test* | |
| | | | n | % | n | % |
| **Understanding related to MP-ASI** | | | | | | |
| 1 | Complementary foods for breast milk (MP-ASI) are foods given in addition to breast milk to meet the nutritional needs of babies | Yes | 23 | 77 | 24 | 80 |
| 2 | MP-ASI is given when the baby is 6-24 months old | Yes | 17 | 57 | 24 | 80 |
| 3 | MP-ASI can be given when the baby is <6 months old | No | 14 | 47 | 21 | 70 |
| **Understanding related to the types of MP-ASI** | | | | | | |
| 4 | The right type of MP-ASI for babies aged 6-8 months is crushed food | Yes | 22 | 73 | 25 | 83 |
| 5 | Examples of mashed foods are rice cake, rice and fruit | No | 19 | 63 | 23 | 77 |
| 6 | The right type of MP-ASI for babies aged 9-11 months is solid food | No | 18 | 60 | 24 | 80 |
| 7 | Tim rice and chicken porridge are examples of soft foods | Yes | 18 | 60 | 25 | 83 |
| 8 | Examples of snacks are biscuits, fruit, boiled eggs and yogurt | Yes | 21 | 70 | 22 | 73 |
| **Understanding regarding the Frequency of Giving MP-ASI** | | | | | | |
| 9 | For babies aged 7-8 months, MP-ASI is given 3 times a day | Yes | 17 | 57 | 25 | 83 |
| 10 | For babies aged 6 months, MP-ASI is given 3-4 times a day | No | 16 | 53 | 22 | 73 |
| 11 | For babies aged 9-24 months, snacks are given 5 times a day | No | 22 | 73 | 26 | 87 |
| **Understanding related to the purpose of MP-ASI** | | | | | | |
| 12 | One of the goals of MP-ASI is to supplement breast milk nutrients, the production of which is starting to decline | Yes | 17 | 57 | 23 | 77 |
| 13 | Developing the baby's ability to swallow and chew is not the goal of MP-ASI | No | 23 | 77 | 27 | 90 |
| **Understanding the risks of MP-ASI** | | | | | | |
| 14 | Early MP-ASI (<6 months) can increase baby growth | No | 20 | 67 | 25 | 83 |
| 15 | Early MP-ASI (<6 months) causes babies to experience digestive disorders | Yes | 19 | 63 | 22 | 73 |

Table 3 shows the score obtained on the pre-test and post-test data. There are 15 questions covering 5 aspects, starting from understanding MP-ASI in general (definition and when you first give MP-ASI), types, frequency, purpose, and also the risks of MP-ASI. Table 3 shows an increase in respondents' knowledge. This can be seen through the increase in scores on pre-test and post-test data for each questionnaire question item. From the pre-test and post-test data, a paired sample t-

test was then carried out. This test was used to determine the average difference before and after being given media in the form of animated videos based on the scores obtained by each respondent.

From the pre-test results, the respondents' lowest score was related to the question regarding the time of giving MP-ASI. A total of 14 respondents (47%) answered correctly, namely they did not agree with the statement that MP-ASI can be given when babies are <6 months old. Meanwhile, the remaining 16 respondents (53%) agreed with the statement that MP-ASI can be given when babies are <6 months old. Therefore, it can be concluded that the majority of respondents still do not know that giving food other than breast milk should not be done when the baby is <6 months old. However, after being given animated video media, the respondents' knowledge increased, as many as 21 respondents (70%) answered correctly. Apart from that, the respondents' highest pre-post test score was on the question regarding the purpose of MP-ASI, namely 77% on the pre-test data and 90% on the post-test data. Overall, based on the percentage score for each questionnaire question item, there was an increase in respondents' knowledge of the pre-post test data.

After recapping the data, a paired sample t-test was carried out to determine the difference in the average knowledge scores of the pre-test (before being given animated video media) and post-test (after being given animated video media). The paired sample t-test in this study used SPSS software. Table 4 below shows the results of the paired sample t-test.

**Table 4. Paired Sample T-Test Results**

| | | *Sig. (2-tailed)* |
|---|---|---|
| Pair 1 | Pre test - Post test | ,000 |

Based on table 4, the p-value or Sig. (2-tailed) = 0.000 ($p < 0.05$). This shows that respondents' knowledge increased after being given media in the form of animated videos about giving MP-ASI. Therefore, this animated video about giving MP-ASI is considered effective as a health promotion medium. When the video was broadcast, the target's enthusiasm was also quite high, all the targets watched the video until the end and supported the researchers to immediately publish the educational video. The majority of targets also stated that it was easier for them to understand the content of the video because the messages conveyed were quite short, concise and clear. Moving animated images and a variety of colors also attract the target's attention, especially children who also watch the video seem happy and interested in moving images that contain aesthetic and entertainment elements. This can certainly build the mother's enthusiasm in learning about the correct way to give MP-ASI because the animated video media does not easily make the target bored and can be seen or listened to anytime and anywhere.

## Discussion

### Animated Video Eligibility

The source of the material is an important indicator for assessing whether animated video media is categorized as worthy of being a health promotion media. This is due to the widespread spread of false information circulating and the ease with which people can access various information via the internet or social media. Therefore, if the public cannot filter the right information, it is possible to get false information (hoaxes). In line with Sabrina's statement (2019)

which states that fake news circulating on social media in Indonesia seems to be a chain that has no end. This fake news is then created into content that continues to be produced, reproduced and disseminated continuously so that it becomes a phenomenon and culture that is considered normal (Sabrina, 2019). Therefore, in making electronic media, this animated video about giving MP-ASI uses material sourced from several sources article research was selected and validated by material experts from representatives of the East Java Provincial Health Service who are experts in the field of family nutrition, especially in providing MP-ASI. Simple, straightforward and easy to understand language is something that needs to be considered when assessing material. This animated video has been validated by material experts and received a good assessment where the material in the animated video uses simple, straightforward and easy to understand language. ByTherefore, overall, based on expert assessments, the material in the animated video is suitable for use as health education about providing appropriate MP-ASI.

The appearance of animated videos is also something that needs to be considered when developing videos as educational media. Animated videos can increase target understanding because they present an attractive media display. Research conducted by Siregar & Sukmawarti (2022) who developed animated video media in the school environment, especially elementary schools, shows that there is quite high target enthusiasm when given media in the form of animated videos, so that the message can be captured by the target quickly and is able to increase their knowledge. . Research conducted by Putri et al., (2022) regarding the impact of animated videos on students' knowledge at STIKES Sapta Bakti, states that learning through animated videos increases the target's knowledge of medical concepts. Changes in cognition were greater in the intervention group that received video media compared to the control group that did not receive video media, this is because video is a learning tool that makes learning outcomes and processes more efficient and effective (Putri et al., 2022).

The animated video in this research was made using the Canva application with landscape size. The type and size of letters (fonts) used in the design of animated video electronic media are also things that need to be considered. The font type in this video is Fredoka One, with a font size in the title section of 85, in the material content section of 61, and the reference source of 22. The animation in this video is taken from Canva elements and there are several real video examples of MP types. -ASI which is also taken from Canva. This animated video can be said to be a supporting medium or alternative media for baduta mothers in understanding the proper provision of MP-ASI. This animated video will be distributed on WhatsApp posyandu groups throughout East Java. Accessing this animated video can only be done using a gadget, be it a smartphone, tablet or computer. This animated video can be opened if there is an internet connection. If the internet connection is dead, the video playback may be delayed. To be able to watch offline, people can also download the video and save it in the gallery so they can watch it at any time. Overall, based on an assessment by media experts, this animated video is suitable for use as a health education medium regarding the proper provision of MP-ASI.

**Effectiveness of Animated Videos**

Similar research was also conducted by Suryani & Nadia (2022) who examined the influence

of video media on the nutritional knowledge of pregnant women at the Kenali Besar Jambi Community Health Center. The results showed that video media had an effect on nutritional education for pregnant women. Through videos, it is easier for pregnant women to understand their nutritional needs, starting from maintaining their diet, to fulfilling the nutrition that must be monitored every day. Similar research was also conducted by Azhari & Fayasari (2020) who compared health promotion strategies using animated video media and lectures in special interventions regarding breakfast behavior and adequate consumption of fruit and vegetables. These findings show that the impact of health education related to nutrition in the video group is more significant compared to the lecture group. The level of knowledge in the video group increased by 25%, while the lecture group increased by 11% (Azhari & Fayasari, 2020). This means that in this research, animated video media was considered more effective in delivering health messages compared to the lecture method. Research conducted by Setiyono (2021) in Kusumadani et al., (2022) also compared the effectiveness of health promotion methods using video media with counseling methods directly delivered by communicators such as the lecture method. It was found that education via video provided better results. significantly compared to using the lecture method.

Research related to the effectiveness of animated video electronic media was also conducted by Kusumadani et al., (2022) on students at SDN Ledok Kulon 3 Bojonegoro regarding knowledge of dental caries. The research results showed that students' knowledge about oral hygiene increased after watching the animated video. This research also provides information that it is easier for students to understand how to maintain healthy living behavior, especially regarding oral health. Apart from that, Dewi & Russanti (2020) also researched the level of practical knowledge of Fashion Design students through providing animated videos. The results showed that there was a significant difference between the target's level of knowledge before and after being given media in the form of videos. Similar research was also conducted by Triana et al., (2020) who examined the influence of educational media in the form of animated videos on the level of knowledge of teenagers regarding the dangers of smoking at SMAN 01 Muaro Jambi, also showing that there was a difference in the average level of knowledge of teenagers regarding the dangers of smoking between before and after being given educational media in the form of animated videos.

Animated video media is considered effective in conveying health messages. Mulyadi et al., (2018) stated that video media requires the sense of hearing and the sense of sight in conveying certain information, so that the information can be more easily understood and is considered more effective in conveying health messages to the general public compared to other methods which only involve just one sense. Furthermore, the research also states that video-based learning media can create a learning environment that is more fun, efficient and less boring so that targets can understand the messages more quickly. Video media also has several advantages, namely that it has its own charm, is interactive, and can be used repeatedly (Mulyadi et al., 2018). Health education using video media can be heard and seen so that it becomes easier for targets to capture the information that has been conveyed (Mulyadi et al., 2018). Overall, this research shows that this animated video about giving MP-ASI is effective in increasing the target's knowledge. This is proven by the results of the paired sample t-test which shows that there is an average difference in the pre-test and post-test data.

## CONCLUSION

Electronic media in the form of animated videos about giving MP-ASI is very suitable as a health education medium. This is based on the results of validity tests conducted by material experts and media experts. The overall result of the percentage assessment by material experts was 100%, and the percentage results of the assessment by media experts 83.3%, both of which are in the very feasible category. The animated video media is also considered effective in increasing target knowledge. This is based on the sig value. (2-tailed) on the results of the paired sample t-test which shows a significance value of 0.000 < 0.05, this means that there is a significant difference between the knowledge values in the pre-test and post-test data. Therefore, it can be concluded that animated video electronic media is very suitable and effective as a health promotion media regarding providing MP-ASI to under-aged mothers.

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