

Mom's Knowledge Regarding Basic Immunization To Babies In The Sigumpar Public Health Center Area Year 2021

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ABSTRACT

Immunization is an effort to provide immunity to infants and children by introducing vaccines into the body to make antibodies to prevent certain diseases. There are 22.6 million children in the world who are not covered by routine immunization. More than 13% of Indonesian children have not received complete immunization for various reasons, whereas complete immunization can protect children from epidemics, disability and death. The percentage of measles immunization nationally is 82.1%, DPT/HB1 immunization is only 3.3%, the number of diphtheria cases is 78.4%, this achievement has not met the 90% target which is Indonesia's commitment to the regional scope. Not achieving the immunization target is caused by various things, one of which is lack of knowledge from mothers about immunization. This study aims to determine the knowledge of mothers about giving basic immunization to babies in the work area of the Sigumpar Health Center, Tobasa Regency. The type of research used is descriptive, the population in this study is mothers who have babies 0-12 months and the research sample is 31 people who are taken by doing accidental sampling. The results of this study indicate that the majority of mothers' knowledge is in good category (67.7%) about giving basic immunization to babies at the Sigumpar Health Center, Tobasa Regency. direct visits so as to increase visits and maternal compliance in providing immunizations to their children so as to prevent disease for the baby's body.

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1. Introduction

The Sustainable Development Goals (SDGs) were declared on September 25, 2015 at the United Nations Headquarters New York by 193 countries as a commitment to the Global Development Agenda. The Sustainable Development Goals are a continuation and refinement of the Millennium Development Goals (MDGs) which have been implemented during the period 2000-2015. The SDGs are an improvement from the previous Global Development Agenda, because development commitments do not only focus on human development, but also environmentally friendly economic development and environmental development. The SDGs place humans as central actors and connoisseurs of development outcomes aimed at human well-being. One of the goals of the MDGs listed in point 4 (MDG 4) is to reduce child mortality through immunization. Immunization is an effort to provide immunity to infants and children by introducing vaccines into the body to make antibodies to prevent certain diseases (Salsia. A & Endah A, 2018). [1]. According to the World Health Organization (WHO), in 2018 there were around 20 million children in the world who did not get complete immunizations, some even did not get immunized at all. In fact, to get community immunity (herd immunity) requires high immunization coverage (at least 95%) and evenly distributed. However, currently there are still many Indonesian children who have not received complete immunizations. There are even children who have never been immunized at all since birth. [2].

One of the efforts to reduce the level of morbidity and mortality in children is immunization. Immunization is an effective and efficient strategy in improving national health status by preventing six deadly diseases, namely: tuberculosis, diphtheria, pertussis, measles, tetanus and polio. WHO launched the Expanded Program on Immunization with the aim of increasing immunization coverage for children around the world.

More than 13% of Indonesian children have not received complete immunization for various reasons. Immunization is considered to be the most effective health measure. Parents are expected to complete their child's immunizations so that all children are free from diseases that can actually be prevented through immunization. Immunization is the most effective and efficient public health effort in preventing several dangerous diseases. History has recorded the large role of

immunization in saving the world community from illness, disability and even death from diseases such as smallpox, polio, tuberculosis, hepatitis B which can lead to liver cancer, diphtheria, measles, rubella and congenital rubella syndrome. Syndrome/CRS), Tetanus in pregnant women and newborns, Pneumonia (lung inflammation), Meningitis (inflammation of the lining of the brain), to Cervical Cancer caused by infection with Human Papilloma Virus (Kemenkes, 2020). [3].

Based on the Kemenkes (2019), shows data on diseases that can be prevented by immunization, namely Diphtheria cases in 2018 spread in almost all regions in Indonesia. The number of diphtheria cases in 2018 was 1,386 cases, the number of deaths was 29 cases, with a CFR of 2.09%. The number of diphtheria cases in 2018 increased dramatically, almost doubled compared to 2017 (954 cases).[4]. However, the number of deaths from diphtheria decreased from 2017 (44 cases). By province, the highest number of cases was in East Java, with 385 cases. Meanwhile, there are 5 provinces where there are no cases of diphtheria, namely D.I Yogyakarta, West Nusa Tenggara, East Nusa Tenggara, Central Sulawesi, and West Papua. The spread of suspected measles cases is almost in all provinces of Indonesia. There were 8,429 suspected cases of measles, much lower than in 2017 which was 15,104 cases. The most suspected measles cases were in Aceh (1,619 cases), DKI Jakarta (578 cases), DI Yogyakarta (546 cases), and South Sumatra (505 cases). [4].

This research was conducted in the working area of the Kassi-Kassi Public Health Center Makassar with a sample of 55 mothers with 9-month-old babies who were selected by accidental sampling. The data was obtained through primary data from interviews and checking the MCH book. The results of this study indicate that 60% of respondents have a low level of knowledge with incomplete basic infant status and 40% with complete infant basic status, 11.1% of respondents have sufficient knowledge level with incomplete infant basic status and 88.9% with infant's baseline status is incomplete. the basic status of the baby is complete and 100% of the respondents have a high level of knowledge with the basic status of the baby is complete (Nirwana Loddo, Armanto Makmun, Zulfiyah Surdam, Nabila Said Amri, 2019). [5].

From the data obtained from the Sigumpar Health Center Work Area in January-July 2019, the Sigumpar Health Center Working Area there were 103 mothers who had babies 0-12 months. From interviews with 5 mothers of infants aged 0-12 months which showed the results of research at the Sigumpar Health Center, 4 mothers did not know the meaning, and did not know the purpose, and only 1 (one) of these mothers had the basic research status of the baby they had. A preliminary study was also conducted on employees of the Sigumpar Health Center who participated in posyandu activities in the working area of the Sigumpar Health Center, the number of babies who came to the Posyandu was only slightly compared to the number of babies in the Posyandu area. From 103 babies aged 0-12 months, it was recorded that the complete workmanship was from January 81 babies, February 75 babies, March 83 babies, April 86 babies, May 91 babies, and June 93 babies. From this data, it can be seen that the number of visits to the Posyandu or Sigumpar Health Center is not optimal in carrying out exercises. Based on the above phenomenon, the researcher feels it is important to research about "Mother's knowledge about basic consent for babies at the Sigumpar Health Center, Tobasa Regency".

2. Method

The type of research conducted is descriptive quantitative to determine the respondent's knowledge about the provision of basic immunization to infants at the Sigumpar Health Center, Tobasa Regency. The study was conducted in April 2021.

Data was collected by giving a questionnaire. Mother's knowledge about basic immunization with 22 statements with answer choices a, b, c and d. The test is used. After obtaining the results, the data will be processed using frequency analysis and descriptive analysis.

3. Results

TABLE 1.
FREQUENCY DISTRIBUTION OF RESPONDENTS BASED ON DEMOGRAPHIC DATA AT THE SIGUMPAR HEALTH CENTER 2021

No.	Karakteristik Responden	Frekuensi (F)	Persentase (%)
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1	Usia		
	< 17 tahun	9	29
	18-25 tahun	13	41.9
	26-35 tahun	8	25.8
	36-45 tahun	1	3.3
	Total	31	100.0
2	Pendidikan		
	SMP	4	12.9
	SMA	19	58.1
	Perguruan Tinggi	9	29
	Total	31	100.0
3	Pekerjaan		
	Petani	19	61.3
	PNS	2	6.5
	Wiraswasta	10	32.2
	Total	31	100.0
4	Agama		
	Islam	15	48.4
	Protestan	14	45.1
	Katolik	2	6.5
	Total	31	100.0

The results showed that the characteristics of mothers based on maternal demographics showed that the majority of mothers were in the age range of 18-25 years by 41.9%, with the majority of high school education at 58.1%, with the majority being farmers / gardening by 61.3%, and the majority being Muslim by 48.4%. . The frequency distribution of respondents can be seen in table 1.

TABLE 2

DISTRIBUTION OF FREQUENCY AND PERCENTAGE OF MOTHER'S KNOWLEDGE OF BASIC IMMUNIZATION FOR BABIES AT THE SIGUMPAR HEALTH CENTER 2021

Pengetahuan	Frekuensi	%
Cukup baik	10	32.3
Baik	21	67.7
Total	31	100

Table 2 describes the results of data analysis on 31 respondents, it was found that the mother's knowledge about giving basic immunization to infants at the Sigumpar Health Center 2017 was good, the majority were 21 people (67.7%).

4. Discussion

Mother's Knowledge about Giving Basic Immunization to Babies at Sigumpar Health Center 2021

The results of data analysis on 31, showed that the patient's family had knowledge of 21 people (67.7%) about basic giving to infants at the Sigumpar Health Center, Tobasa Regency because it was supported by work, age and experience. This is in line with research conducted by Mulyani S, Nyimas N, and Abdul Haris (2017) at the Paal Merah II Health Center Jambi City in November 2017 which showed that 22.7% of respondents had low knowledge, 46.4% had moderate knowledge, and (30.9%) have high knowledge. Mother's knowledge about providing basic assistance to babies at the Sigumpar Health Center, Tobasa Regency as much as 67.7% of respondents, because these mothers will realize how important it is (measles, Polio, HB, DPT and BCG) and mothers get a lot of information about the basis of information media, printed media as well as from local nurses and midwives, from the questionnaire it was known that the mothers answered the correct statements including the objectives, schedule, side effects of the study. At the time of the study there were also

respondents who had good knowledge, this was due to ignorance and lack of awareness of bringing babies to study because they basically did not know about basic knowledge, seen from the statements that were able to be explained in the questionnaire when the research was known about the meaning, purpose, schedule, side effects for some of the statements could not be answered correctly and while the mother's research was under schedule. [6].

A person's knowledge and attitudes play an important role in developing behavior (Silaen H. 2021). The results showed that the majority of mothers were in the age range of 18-25 years by 43.3%, 26-35 years by 26.7%. Age greatly affects knowledge, the older the age it will increase the knowledge of the individual. According to Azdwar, (2005), knowledge functions so that humans have a basic urge to want, to seek Reasoning and organize their experiences, the elements of experience that were originally inconsistent with what is known to the individual will be arranged, rearranged or changed in such a way that it is achieved. a consistency that builds and develops knowledge. [7].

Attitude, knowledge and cognitive are very important domains for the formation of one's actions. Rogers theory (1974) in the book Notoatmodjo (2007), reveals that before people adopt new behavior (new behavior), within the person there is a sequential process, namely: Awareness (awareness) where the person is aware in the sense of knowing in advance about the stimulus (object), Interest (feeling interested) in the stimulus or object. Here the subject's attitude has begun to arise, Evaluation (weighing) on whether or not the stimulus is good for him, Trial in which the subject begins to try to do something in accordance with what is desired by the stimulus, Adoption where the subject has behaved in a new way in accordance with knowledge, awareness, and attitude to the stimulus.

According to Notoatmodjo in Yuliana (2017), knowledge is the result of human sensing, or the result of someone knowing about objects through their senses (eyes, nose, ears, and so on). So knowledge is various kinds of things that are obtained by a person through the five senses. Knowledge of why humans are driven by the urge to want, to seek reasoning and organize their experiences, elements of experience that were originally inconsistent with what is known by the individual will be arranged, rearranged or changed in such a way that a consistent knowledge is built and developed. [8].

The results also showed that from a socio-economic point of view, the patient's family had a farmer/gardening job as many as 19 people (61.3%), as many as 9 people as self-employed (30.3%). A person's work generally has an important impact in minimizing a person's exposure to disease and adding insight from the individual. Work is all efforts to foster personality and develop human abilities physically and spiritually that lasts a lifetime (Fitriani in Yuliana, 2017)

The results of data analysis obtained as many as 18 people (58.1%) high school education. Kurniawan (2017), said that education is education is transferring values, knowledge, experience and skills to the younger generation as an effort for the older generation in preparing the life functions of the next generation, both physically and spiritually. The higher the level of education, the easier it is to absorb knowledge. [9].

One of the factors that influence knowledge is information (Fitriani in Yuliana 2017). The more information entered, the more knowledge gained about health). Things that can be done to increase knowledge include improving communication with others, avoiding good information. This research is related to PUSPITASARI research. A (2017) The results of complete basic immunization knowledge are mostly sufficient (42.4%), most immunization goals are sufficient (41.2%), most immunization schedules are sufficient (35.3%), most immunization benefits are lacking (64.7%), most of the various immunizations were lacking (47.1%), the results of most of the side effects of immunization were good (41.2%), most of the immunization schedules were good (35.3%), most of the immunization AEFIs were lacking (47.1%), most of the understanding of immunization is lacking (41.2%) [10].

At the time of the study, the researcher conducted interviews with several mothers about the information obtained, mothers received information related to basic immunization through mass media and health cadres who were near their homes. The type of information that mothers need from cadres is related to the type, purpose and benefits of immunization in general. Knowledge or cognitive is a very important domain in shaping one's actions (over behavior). A high level of knowledge is better at knowing, understanding and complying with what is the responsibility to meet the needs of children, namely by immunizing their children according to a specified schedule (Kemenkes RI, 2019). Therefore, it is necessary to make more efforts by the

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health office through the Health Center by providing more information and actually registering immunization visits).

5. Conclusion

Based on the results of research that has been carried out at the Sigumpar Health Center, Tobasa Regency, the conclusion of this study is that the mother's knowledge about giving basic immunization to infants at the Sigumpar Health Center, Tobasa Regency, was mostly good as many as 21 people (67.7%).

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