

Connection Mother's Knowledge by Giving Tetanus Toxoid Immunization in Rambung Island Plantation Village, Bahorok Health Center in 2021

Srimis Leini Saragih

North Sumatra Hajj University

ARTICLE INFO

Keywords:

Breastfeeding Counseling
Breastfeeding,
Knowledge.

ABSTRACT

Breastfeeding gives a child the best start in his life. It is estimated that more than one million children die each year due to diarrhea, respiratory disease and other infections because they are not breastfed adequately. 2021 years. This study uses this type of research. The population in this study is mothers who have babies aged 0-6 months, namely as many as 25 babies at the Dalu Ten Health Center, Tanjung Morawa District in 2021, the total sample of the population. Data analysis used Wilcoxon test 95%. The results of this study are that there is breastfeeding for infants 0-6 months before breastfeeding counseling is given at the Dalu Ten Health Center, Tanjung Morawa District in 2021, the majority of mothers do not breastfeed their babies, the difference in breastfeeding for infants 0-6 months before and after breastfeeding counseling, with p value $(0.005) < (0.05)$. The conclusion is that it can be concluded that these results prove that there is a significant effect of breastfeeding counseling on breastfeeding infants 0-6 months at the Dalu Ten Health Center Tanjung Morawa District in 2021. It is recommended that health workers further improve the quality of health services in providing breastfeeding counseling and improve regular understanding and information to the community in general about the importance of breastfeeding for infants 0-6 months.

E-mail:

srimis_leini@yahoo.co.id

Copyright © 2021 Science Midwifery.

1. Introduction

WHO estimates that 34,019 newborns die from neonatal tetanus, a 96% reduction from the situation in the late 1980s. In Indonesia, in 2015 there were 53 reported cases of neonatal tetanus from 13 provinces (West Sumatra, South Sumatra, Jambi, Bangka Belitung, West Kalimantan, Central Kalimantan, South Sulawesi, Central Sulawesi, Maluku, and Papua) with a total of 27 deaths. or CFR of 50.9%. Meanwhile, in 2016, it was reported that there were 33 cases of neonatal tetanus from 7 provinces (Aceh, West Sumatra, South Sumatra, Jambi, West Kalimantan, Gorontalo and Papua) with 14 deaths or a CFR of 42.4% (Kemenkes RI, 2017).

In Indonesia, many pregnant women do not check their pregnancies at health care facilities, so there are many cases of mothers who are not immunized with Tetanus Toxoid by trained health workers. The problem that may arise due to pregnant women who are not immunized with Tetanus Toxoid is the possibility of tetanus to the mother and baby. Immunization is one solution to prevent the occurrence of Tetanus Neonatorum (TN) in infants. It is important for pregnant women to be immunized to prevent the occurrence of tetanus in the mother and baby, because by immunizing the mother during pregnancy, the immunoglobulin molecule will be transferred from the mother to the baby through the placenta as passive immunity for the baby. Immunization is carried out in an effort to prevent and protect against Tetanus (Wiknjosastro, 2018).

The maternal mortality rate during childbirth in Indonesia is still very high. The high maternal mortality rate is caused by many things, including those related to birth attendants, place/delivery facilities. Deliveries assisted by health workers have been shown to contribute to a reduced risk of maternal death. Likewise with places/health facilities, if delivery is carried out in health care facilities, it

will also further reduce the risk of maternal death (Kemenkes RI, 2017). One of the causes of maternal and infant mortality is tetanus infection. Tetanus is an acute disease, spastic paralysis caused by a neurotoxin produced by the bacterium *Clostridium tetani* (Kemenkes RI, 2016).

Tetanus is more common in newborns or what is known as Tetanus Neonatorum. Maternal and neonatal tetanus is the most common cause of death due to delivery and handling of the umbilical cord is not clean or from wounds obtained by pregnant women before giving birth. Tetanus is characterized by painful muscle stiffness caused by a neurotoxin produced by the bacterium *Clostridium tetani* in anaerobic (closed) wounds. *Clostridium tetani* enters through open wounds and produces toxins that attack the central nervous system (Kemenkes RI, 2016). Based on a report from the Ministry of Health in 2017, the coverage of Tetanus Toxoid immunization in Indonesia is still quite low, this can be seen from the coverage of Tetanus Toxoid immunization for pregnant women in 2016 with a total of 5,312 pregnant women. 100 who did TT1 were 1,616,620 (30.43%), TT2 were 1,271,889 (23.94%). In 2015, with the number of pregnant women as many as 5,382,779 who carried out TT1 immunization as many as 1,646,480 (30.59%), TT2 as many as 1,453,554 (27%).

For the coverage of Tetanus Toxoid immunization for pregnant women in North Sumatra Province in 2020, with the number of pregnant women as many as 343,978 it was recorded that TT1 immunization was 4.34%, TT2 was 4.08%. In 2015, 347,747 pregnant women were recorded who carried out TT1 immunization of 11.01%, and TT2 immunization of 10.23% (North Sumatra Provincial Health Office, 2020). For the province of North Sumatra in 2020, there were no cases of tetanus neonatorum, it decreased in 2019, the Bahorok Health Center reported 1 case of tetanus neonatorum (North Sumatra Provincial Health Office, 2016).

Neonatorum Tetanus (TN) is tetanus in infants aged 3 and 28 days after birth and Maternal Tetanus (TM) is tetanus in pregnancy and within 6 weeks after delivery. When tetanus occurs the mortality rate is very high, especially when proper health care is not available. Currently, maternal and neonatal deaths from tetanus can be easily prevented by delivery and hygienic handling of the umbilical cord, and/or by immunizing the mother with the tetanus vaccine (Kemenkes RI, 2016). As an effort to control tetanus infection, which is one of the risk factors for maternal and infant mortality, the Tetanus Toxoid immunization program was implemented for women aged 15-49 years, consisting of women of childbearing age and pregnant women (Kemenkes RI, 2017).

Tetanus Toxoid is a very safe antigen and is also safe for pregnant women. There is no danger to the fetus if pregnant women receive Tetanus Toxoid immunization. Tetanus Toxoid will stimulate the formation of specific antibodies that have an important role in protecting against tetanus. Pregnant women who receive Tetanus Toxoid immunization in their bodies will form tetanus antibodies which will prevent the occurrence of Neonatorum Tetanus (Kemenkes RI, 2016). In order to reduce maternal mortality in Indonesia, the Ministry of Health implements the ETMN program or Maternal and Neonatal Tetanus Elimination. The Maternal and Neonatal Tetanus Elimination Program aims to reduce the number of maternal and neonatal tetanus cases to a level where maternal and neonatal tetanus are no longer a public health problem. (2015). Through immunization for pregnant women and promotion of hygienic health, maternal and neonatal tetanus can be eliminated as indicated by the number of tetanus cases which is less than 1 per 1000 live births in each district. Operationally, this status can be measured by the level of achievement of immunization and delivery assistance by health workers (Kemenkes RI, 2016).

Prevention of neonatal tetanus cases is carried out by immunization, which is a future health investment because disease prevention through immunization is the most effective way of protecting against infection and is much cheaper than treating someone if they have fallen ill and must be hospitalized. Immunization should be viewed not only as a clinical effort, but also as an epidemiological intervention and its success assessed with epidemiological parameters, namely how many cases and diseases can be prevented by immunization and outbreaks that can be stopped from transmitting (IDAI, 2017). Efforts are being made to increase immunization coverage, namely by paying attention to all aspects related to vaccines (vaccine availability, health promotion, availability of health workers),

One of the factors that can affect the provision of Tetanus Toxoid immunization to pregnant women is the need for knowledge, attitudes and awareness of the mother about the importance of Tetanus Toxoid immunization for herself and the baby she is carrying and the dangers that will be faced if exposed to the infection which can cause death in the baby. Tetanus Toxoid immunization is good for immunity against tetanus infection because the mother knows that Tetanus Toxoid immunization will provide immunity to the mother herself and her fetus. Where the level of knowledge will affect individual behavior. The more knowledge of mothers about the importance of health, the higher the level of

awareness of mothers to participate in posyandu or immunization activities. Besides that, The support of health workers for the immunization program for pregnant women by conducting health education will also support and strengthen the formation of maternal behavior to want to take advantage of health services such as implementing Tetanus Toxoid immunization during pregnancy. If all pregnant women want to carry out the Tetanus Toxoid immunization injection, the incidence of tetanus infection in postpartum mothers and newborns will decrease drastically and the health level of the Indonesian population will increase (Syafrudin et al, 2017).

Public awareness, especially pregnant women, to immunize Tetanus Toxoid is still very low, this can be seen by the low coverage of Tetanus Toxoid immunization. South Tapanuli Regency in 2017, which carried out TT1 immunization by 53.9%, TT2 immunization by 47.5%. For the working area of the Hutaraja Health Center in 2017 the number of pregnant women as many as 330 who carried out TT1 immunization as many as 138 (44.7%), who carried out TT2 as many as 99 (32%). From these data, the coverage of Tetanus Toxoid immunization in Indonesia, North Sumatra Province, Rambung Island Plantation Village, Bahorok Health Center has not yet reached the national target. The national target of all immunization programs is 80% (Ranuh, 2017).

According to previous research conducted by Djinimangale, et al. (2017) regarding the relationship between knowledge, education and support of health workers with Tetanus Toxoid immunization status in pregnant women in the working area of the Puskesmas Kao District, North Halmahera Regency in 2017 showed that out of 134 respondents, who had knowledge of good as much as 72 (53.7%), while for poor knowledge as many as 62 (46.3%) and respondents who have higher education as many as 44 (32.8%), while for respondents with low education as many as 90 (62.7 %). Then the respondents who had good support from health workers were 87 (64.9%), while 47 (35.1%). This study shows that there is a relationship between knowledge ($p = 0.000$), education ($p = 0$,

According to research by Wijayanti, et al (2013) regarding the relationship between knowledge of Tetanus Toxoid immunization and the provision of tetanus toxoid immunization to pregnant women at the Jambu Health Center, Semarang Regency, from 70 respondents, it showed that the level of knowledge of pregnant women was in the sufficient category as many as 26 people (37.1%). The distribution of the frequency of attitudes with positive attitudes was 44 people (62.9%) and the proportion of completeness of tetanus toxoid immunization in the complete category was 50 people (71.4%). This study showed that there was a relationship between knowledge ($p = 0.011$) and attitude ($p = 0.026$) with the provision of tetanus toxoid immunization to pregnant women. Knowledge of pregnant women affects health status, participation in health services will have a positive impact on maternal health, including the fetus in the womb. So that socialization of the importance of TT immunization needs to be carried out continuously (Notoatmodjo, 2018). Facts in the field show that there are some people who refuse to be given TT immunization because of the perception that women getting TT immunization will affect fertility and it will be difficult to get offspring (Achsin, 2017).

Based on a preliminary survey conducted by interviewing 3 pregnant women who were met in September 2021, information was obtained that 2 out of 3 pregnant women did not know about Tetanus Toxoid immunization both in terms of the meaning, benefits and goals of Tetanus Toxoid immunization for pregnancy, and also did not want to find out what Tetanus Toxoid immunization is. When checking her pregnancy at the health center, health workers give Tetanu Toxoid immunization to the mother without providing information or counseling about the importance of the Tetanus Toxoid immunization. so that mothers only get Tetanus Toxoid immunization without knowing the benefits. Then 1 pregnant woman knew about Tetanus Toxoid immunization but did not want to be given Tetanus Toxoid immunization because she felt it was not so important to have Tetanus Toxoid immunization during pregnancy because it had no impact on previous pregnancies even though she was not given Tetanus Toxoid immunization. The lack of knowledge of mothers about Tetanus Toxoid immunization is due to the lack of information-giving activities such as counseling from health workers to the community, especially pregnant women.

BeBased on a preliminary survey conducted by researchers at the Pustu Sei Litur, Sei Litur Tasik Village, Sawit Seberang District on June 26, 2021, it was found that several problems were known, namely the lack of health promotion activities at the Sei Litur Health Center in Tasik Village, Sawit Seberang District, so blindly mothers did not know what immunization was. TT during pregnancy and the importance of TT immunization for pregnant women, the low utilization of tetanus toxoid immunization services even though the immunization can be obtained free of charge at government health services, based on interviews with 5 pregnant women 4 pregnant women did not know about TT

immunization services in Pulau Plantation Village At the Bahorok Health Center there was 1 pregnant woman who knew about the Implementation of Tetanus Toxoid Immunization Services for Pregnant Women but did not know what TT immunization was.

2. Method

This study used an observational type of research. The population in this study were all pregnant women in the Pulau Rambung Plantation Village, Bahorok Health Center, as many as 63 pregnant women. The sample in this study was the total population of all pregnant women in the Pulau Rambung Plantation Village, Bahorok Health Center, as many as 63 pregnant women.. Analysis of the data used Test the chi square formula (kai squared)

3. Results and Analysis

3.1 Research Overview

Location This research was conducted in Pulau Rambung Plantation Village, Bahorok Health Center. The boundaries of the working area of the Bahorok Health Center are:

- a. North : Bordering attack road
- b. South side : Bordering karo district
- c. East : Bordering southeast aceh
- d. West Side : Bordering salapian district

In health services, the Bahorok Health Center serves: immunization programs, nutrition, family planning (KB), examinations for pregnant women, and services for the delivery process. The Bahorok Health Center has 4 midwives, 2 examination rooms, 2 delivery rooms, 2 postpartum rooms, 1 waiting room, 2 registration rooms and the puskesmas accepts BPJS for childbirth.

3.2 Research result

a. Characteristics of Respondents

The characteristics of respondents in the Pulau Rambung Plantation Village, Bahorok Health Center in 2021 in this study were grouped by age, education, occupation and parity. Characteristics of respondents are described in table 4.1 as follows:

Table 1

Characteristics of Respondents in Rambung Island Plantation Village, Bahorok Health Center in 2021

No	Demographic Data	Frequency	Percentage (%)
1	Age		
	<25 years old	25	39.7
	26-35 years old	33	52.4
	>35 years old	5	7.9
	Amount	63	100
2	Education		
	Elementary/Junior	18	28.6
	High (Low)	36	57.1
	High School (Secondary)	9	14.3
	D-III/ S-1 (High)		
	Amount	63	100
3	Work		
	Work	27	42.9
	Not yet working	36	57.1
	Amount	63	100
4	parity		
	Primipara	34	54.0
	Multipara	29	46.0
	Amount	63	100

Based on table 1. above, it is known that the characteristics of the respondents based on the age of the majority of respondents aged between 25-35 years were 33 respondents (52.4%), with the education level of the majority of respondents graduating from high school (SMA) as many as 36 respondents (57.1 %), and seen from the work of the majority of respondents not working as many as 36 respondents (57.1%). Judging from parity, most of them are primiparous mothers, namely 34 respondents (54.0%).

b. Knowledge of Mothers in Rambung Island Plantation Village, Bahorok Health Center in 2021
 Frequency distribution Mother's knowledge in Rambung Island Plantation Village, Bahorok Health Center in 2021 can be seen in table 2 below:

Table 2
 Frequency Distribution of Mother's Knowledge in Plantation Villages
 Rambung Island, Bahorok Health Center in 2021

No	Mother's Knowledge	Frequency	Percentage (%)
1	Good	7	11.1
2	Enough	35	55.6
3	Not enough	21	33.3
Amount		63	100

Based on table 2 above, it is explained that from the 63 respondents studied, the results showed that the majority of pregnant women had sufficient knowledge about TT immunization, namely 35 people (55.6%).

c. Provision of Tetanus Toxoid Immunization for Pregnant Women in Rambung Island Plantation Village, Bahorok Health Center in 2021

Frequency distribution Provision of Tetanus Toxoid Immunization for Pregnant Women in Rambung Island Plantation Village, Bahorok Health Center in 2021 can be seen in table 4.3 below:

Table 3
 Frequency Distribution of Tetanus Toxoid Immunization for Pregnant Women
 in Rambung Island Plantation Village, Bahorok Health Center in 2021

No	Giving Tetanus Toxoid Immunization	Frequency	Percentage (%)
1	given	26	41.3
2	Not given	37	58.7
Amount		63	100

Based on table 3 above, it can be explained that of the 63 respondents studied, the results were obtained, the majority of pregnant women were not given TT immunization as many as 37 people (58.7%), while those who were given were 26 people (41.3%).

3.3 Bivariate Analysis

a. Mother's Knowledge Relationship with Tetanus Toxoid Immunization in Rambung Island Plantation Village, Bahorok Health Center in 2021

Data analysis of the relationship between maternal knowledge and the provision of tetanus toxoid immunization in Rambung Island Plantation Village, Bahorok Health Center in 2021, can be seen in table 4.4 below

Table 4
 Cross Tabulation Maternal Knowledge Relationship with Tetanus Toxoid Immunization
 in Rambung Island Plantation Village, Bahorok Health Center in 2021

No	Mother's Knowledge	Giving Tetanus Toxoid Immunization				Total	p-value	
		given		Not given				
		f	%	f	%			
1	Good	5	7.9	2	3.2	7	11.1	0.000
2	Enough	21	33.3	14	22.2	35	55.6	
3	Not enough	0	0.0	21	33.3	21	33.3	
Total		26	41.3	37	58.7	63	100.0	

The results of table 4 can be seen from the number of respondents as many as 63 people, obtained from 7 respondents with good knowledge there were 5 respondents (7.9%) given tetanus toxoid immunization and 2 respondents (3.2%) were not given tetanus toxoid immunization. Furthermore, from 35 respondents with sufficient knowledge, 21 respondents (33.3%) were given tetanus toxoid immunization and 14 respondents (22.2%) were not given tetanus toxoid immunization. Meanwhile, of the 21 respondents who had less knowledge, there were 21 respondents (33.3%) who were not given tetanus toxoid immunization.

Based on the calculation of the Chi-Square test analysis, it is known that the significant p value is 0.000. Because the p value is smaller than 0.05 (0.000 < 0.05), the hypothesis is accepted so that in this study there is a significant relationship between maternal knowledge and the provision of tetanus toxoid

immunization in the Pulau Rambung Plantation Village, Bahorok Health Center in 2021.

3.4 Discussion

a. Knowledge of Mothers in Rambung Island Plantation Village, Bahorok Health Center in 2021a

Based on the results of the study, it was found that of the 63 respondents studied, the results showed that the majority of pregnant women had sufficient knowledge about TT immunization, namely 37 people (58.7%). These results indicate that there is still a lack of health promotion activities at the Pustu Sei Litur, Sei Litur Tasik Village, Sawit Seberang District, so that it is still blinding that mothers do not know what TT immunization is during pregnancy and the importance of TT immunization for pregnant women, and the low utilization of tetanus toxoid immunization services even though the immunization is can be obtained free of charge at government health services.

These results are in line with the research of Maryana and Sarmuli (2019) that pregnant women who have poor knowledge are because they do not know the schedule and distance for giving Tetanus Toxoid immunization. In addition, the mother's knowledge is not good because it affects the mother's education. Because education is also a factor that influences a person's perception of receiving better information.

Respondents based on the latest education of pregnant women are mostly high school graduates, namely respondents (57.1%). Although most of the mothers' last education was high school, proper health education about TT immunization was not given at high school, moreover the availability of sources of information about TT immunization was never accessed by them.

Respondents were further strengthened by the parity status that the mother had, from the results of the study there were (54.0%) respondents who had just had their first child, so that most of the mothers had not received information about TT immunization.

According to Notoadmojo in Yusriani (2018), knowledge is the result of knowing, and this occurs after people have sensed a certain object. The knowledge that a person has can be a motivation to behave and take an action for that person (Yusriani et al, 2018). From the results of existing research, pregnant women who were in the Pulau Rambung Plantation at Bahorok Health Center at the time of the study it was found that there were still many mothers' knowledge about TT immunization that was not correct because pregnant women only answered based on information from their own mother's experience obtained from health workers, friends. , information media and family.

b. Provision of Tetanus Toxoid Immunization for Pregnant Women in Rambung Island Plantation Village, Bahorok Health Center in 2021

Based on the results of the study, it can be seen that from the 63 respondents studied, the results obtained, the majority of pregnant women were not given TT immunization as many as 37 people (58.7%), while those who were given were 26 people (41.3%). These results show that pregnant women who do not receive or are not given Tetanus Toxoid immunization are due to their lack of knowledge about TT immunization, such as mothers who do not know the TT immunization schedule, and why TT immunization should be carried out. These results are in line with the research by Maryana and Sarmuli (2019) that the frequency of mothers who were not given TT immunization was more than mothers who were given TT immunization. According to him, this is influenced by the attitude of the mother who does not care about the tetanus toxoid immunization.

According to Notoatmodjo quoted in (Yusriani & Alwi, 2018), Attitude is a form of evaluation or feeling reaction, a person's attitude towards an object is a feeling of supporting or siding with the object. With the good attitude of a pregnant woman, it is an important role for pregnant women to want to do Tetanus Toxoid (TT) immunization. Tetanus Toxoid (TT) immunization is the formation of immunity to prevent diseases that can cause death to the mother and fetus (Sulistyawati, 2011). Giving Tetanus Toxoid Immunization aims to: prevent tetanus which can attack everyone, especially mothers in the process of childbirth and postpartum due to contamination by tetanus germs.

According to the researcher, this is due to a lack of desire and there are still many respondents' beliefs / beliefs about something that is still believed by the family for generations, besides that the mother believes that without being immunized the mother and fetus will be healthy and protected from tetanus infection so that the mother has negative perception of Tetanus Toxoid immunization

c. Mother's Knowledge Relationship with Tetanus Toxoid Immunization in Rambung Island Plantation Village, Bahorok Health Center in 2021

The results showed that of the 7 respondents who had good knowledge, most (5 respondents) were given TT immunization and 2 respondents were not given TT immunization. Of the 37 respondents who had sufficient knowledge, there were 21 respondents, most of them (21 respondents) were given TT

immunization and 14 respondents were not given TT immunization. Meanwhile, of the 21 respondents who lacked knowledge, all of them were not given TT immunization. Of these 21 respondents said that they did not know about TT immunization because they had never received information about TT immunization and stated that they did not consider TT immunization to be important because from their previous pregnancies they did not receive TT immunization but the birth and delivery process was not disturbed.

The results of the bivariate analysis using the Chi Square test showed that the value (p) = 0.000 or p value < 0.05. These results indicate that there is a significant relationship between maternal knowledge and the provision of tetanus toxoid immunization in the Pulau Rambung Plantation Village, Bahorok Health Center in 2021. The results of this study indicate that a mother who has good knowledge of TT immunization will understand the benefits of the TT immunization, both for herself and for the fetus she is carrying. This will motivate mothers to carry out complete TT immunization. On the other hand, mothers who have less knowledge about TT immunization do not consider TT immunization to be important because from their previous pregnancies they did not receive TT immunization.

The results of this study are in line with research conducted by Wijayanti, et al (2013) regarding the relationship between knowledge of Tetanus Toxoid immunization and the provision of tetanus toxoid immunization to pregnant women. Pregnant women with low knowledge did not do incomplete TT immunization compared to those with high knowledge. The results of this study are also in line with research conducted by Mariyana and Sarmauli (2019) which showed that there was a relationship between knowledge of pregnant women and the administration of tetanus toxoid immunization.

According to Yusriani, et al (2018) that knowledge is the result of knowing, and this occurs after people and sensing a particular object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears. Knowledge of pregnant women about TT immunization is also closely related to compliance with TT immunization.

The researcher assumes that there is a relationship between knowledge and the administration of tetanus toxoid (TT) immunization. There are still pregnant women who have good knowledge who have not done or have not received tetanus toxoid (TT) immunization, especially mothers who have less knowledge. Based on the results of research conducted during the study, it was found that mothers who did not immunize because there are several supporting factors such as previous experience where in pregnancy the mother did not do TT immunization and her child was born healthy and safe, so for the second pregnancy the mother also did not want to give tetanus toxoid (TT) immunization. is also a supporting factor why mothers do not want to give tetanus toxoid (TT) immunization.

3.5 Research Limitations

Limitations in research to see accurate knowledge is the need to support why mothers do not want to give tetanus toxoid (TT) immunization with the addition of family variables to see if the immunization can run, and good mother attitude so that mothers want to give tetanus toxoid (TT) immunization).

4. Conclusion

Based on the description of the results and discussion, it can be concluded that:

- Knowledge of mothers in the Pulau Rambung Plantation Village, Bahorok Health Center in 2021, the majority had sufficient knowledge, namely 37 people (58.7%).
- Provision of Tetanus Toxoid Immunization for Pregnant Women in Rambung Island Plantation Village, Bahorok Health Center In 2021 the majority of mothers were not given TT immunization, namely 35 people (55.6%).
- There is a significant relationship between maternal knowledge and the provision of tetanus toxoid immunization in Rambung Island Plantation Village, Bahorok Health Center in 2021, with p value = 0.000 ($p < 0.05$).

Reference

- Arikunto, S. 2016. *Prosedur Penelitian Suatu Pendekatan Praktik*. Edisi Revisi. Cetakan Kedelapan. Rineka Cipta: Jakarta
- Azizah, N. 2015. Pengetahuan Ibu Primigravida tentang Suntik Tetanus Toksoid dengan pelaksanaannya. *Jurnal Edu Health*. Vol. 5 No 2, September 2015 131.
- Depkes RI, 2017. *Modul Kegiatan Lima Imunisasi Dasar Lengkap*. Jakarta: Ditjen PP & PL, Jakarta. ,

2018. Pedoman Imunisasi Bagi Petugas Puskesmas. Jakarta
- Dinas Kesehatan Pustu Sei Litur Desa Sei Litur Tasik Kecamatan Sawit Seberang t. 2016. Profil Kesehatan Kabupaten Pakpak Bharat Tahun 2016. Dinkes Pustu Sei Litur Desa Sei Litur Tasik Kecamatan Sawit Seberang
- Dinas Kesehatan Provinsi Sumatera Utara. 2017. Profil Kesehatan Provinsi Sumatera Utara. 2017. Dinkes Provinsi Sumatera Utara
- Fauziah, S dan Sutejo, Ns. 2017 Keperawatan Maternitas Kehamilan. Kencana: Jakarta
- Hidayat, A.A. 2018. Metode Penelitian Kesehatan Paradigma Kuantitatif. Health Book: Jakarta
- IDAI. 2016. Pedoman Imunisasi di Indonesia Edisi Keempat Tahun 2016. Badan Penerbit IDAI: Jakarta
- Indrayani, 2016. Buku Ajar Asuhan Kehamilan. Trans Info Media (TIM): Jakarta
- Kemenkes RI. 2016. Cakupan Imunisasi TT. Depkes RI: Jakarta
- Kepmenkes RI. 2018. Keputusan Menteri Kesehatan Republik Indonesia Nomor: 1059/Menkes/SK/IX/2018 Tentang Pedoman Penyelenggaraan Imunisasi
- Lisnawati, Lilis. 2017. Sehat Melalui Imunisasi. Trans Info Media: Jakarta
- Maryono. 2016. Pengaruh Kompetensi Petugas Imunisasi Terhadap Pelayanan Imunisasi Tetanus Toksoid di Kabupaten Aceh barat Provinsi Nanggroe Aceh Darusslam. Thesis. Medan: Ilmu Kesehatan Masyarakat Universitas Sumatera Utara
- Muninjaya, A.A.Gde. 2018. Manajemen Kesehatan. Penerbit Buku Kedokteran: Jakarta
- Notoatmodjo, Soekidjo. 2018. Ilmu Perilaku Kesehatan. Rineka Cipta: Jakarta. 2014. Ilmu Perilaku Kesehatan. Rineka Cipta: Jakarta
- Pulungan S, Ali, 2016, Analisis Karakteristik Organisasi dalam Pencapaian Pelayanan Imunisasi Tetanus Toksoid Ibu Hamil di Puskesmas Medan Deli Kota Medan. Skripsi Mahasiswa FKM USU, Medan.
- Purwoastuti, E dan Walyani, S.E. 2015. Perilaku & Softskills Kesehatan. Pustaka Baru Press: Yogyakarta.
- Rukiyah, Ai Yeyeh dan Yulianti, Lia. 2018. Asuhan Neonatus, Bayi dan Anak Balita. Trans Media: Jakarta
- Saryono. 2018. Metode Penelitian Kesehatan. Mitra Cendikia: Jogjakarta
- Sarwono. 2018. Sosiologi Kesehatan. Refika Aditama: Jakarta.
- Suryati, E. 2015. Hubungan Pengetahuan dan Sikap Ibu Hamil dengan Pemberian Imunisasi tetanus Toksoid di Wilayah Kerja Puskesmas Maga Kecamatan Lembah Sorik Marapi Kabupaten Mandailing Natal Tahun 2015. Skripsi. Medan: Ilmu Kesehatan Masyarakat Universitas Sumatera Utara
- Undang - Undang Nomor 36 Tahun 2009 Tentang Kesehatan
- Wahab, A.S dan Julia, M. 2018. Sistem Imun, Imunisasi, dan Penyakit Imun. Widya Medika: Jakarta, 2018. Tetanus. Available from: <http://www.who.int/immunization/topics/tetanus/en/>, 2018. Maternal and Neonatal Tetanus (MNT) Elimination. Available from: http://www.who.int/immunization_monitoring/disease/MNTE_initiative/en/index1.html.