

RELATIONSHIP OF KNOWLEDGE AND ATTITUDE OF MOTHERS TOWARDS GIVING BOOSTER IMMUNIZATIONS TO TODDLERS

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ABSTRACT

The direction of health development currently emphasizes promotive and preventive efforts without leaving out curative and rehabilitative aspects. Every child has the right to obtain basic immunization in accordance with the provisions. Immunization is carried out to prevent the occurrence of diseases that can be prevented by immunization. UNICEF supports government efforts to restore children's access to essential health services and to address the decline in routine immunization rates. The COVID-19 pandemic is the main cause of the decline in child immunization in Indonesia, causing supply chain disruptions and reducing the availability of health workers. This study used an analytic survey method with a cross-sectional approach. The number of samples in the study was 62. The research instrument used in collecting data was a questionnaire sheet. The results showed that out of 62 respondents with good knowledge and booster immunization, as many as 50 respondents (91%) did not do booster immunization, as many as 5 respondents (9%). Respondents with poor knowledge but who immunized included as many as 5 respondents (71%), and those who did not do booster immunization were 2 respondents (29%). Maternal attitudes of 62 respondents who had a positive attitude toward booster immunization were 50 respondents (100%). Negative maternal attitudes about booster immunization but still perform booster immunization as many as 5 respondents (42%), and do not perform booster immunization as many as 7 respondents (58%). From the statistical test results obtained, there is a significant relationship between knowledge of booster immunization in toddlers (p value = 0.000) and maternal attitudes towards booster immunization in toddlers (p value = 0.000). Maternal knowledge is very important in providing booster immunization. Without good knowledge, the mother will not necessarily understand the importance of booster immunization. Likewise with attitude; if the mother's attitude is positive, it will be better for booster immunization status. One of the factors that influences maternal attitudes is personal experience. This personal experience can create strong assumptions and have a direct influence on one's attitude.

Keywords: knowledge, attitude, booster immunizations, toddlers

1. INTRODUCTION

The purpose of health development, according to Law Number 36 of 2009, is to build socially and economically productive human resources through investments to increase awareness, willingness, and ability to live healthy for everyone in order to realize the highest degree of public health. To achieve this goal, health development is intended to increase

awareness, willingness, and ability to live a healthy life for everyone(1). The direction of health development currently focuses on promotive and preventive efforts without leaving out the curative and rehabilitative aspects. Programs that can be carried out in health development and can have a major effect on reducing infant mortality are preventive through

immunization(2).

Every child has the right to obtain basic immunization in accordance with the provisions. The purpose of vaccination is to stop diseases from happening that can be stopped by immunization. Immunization is one of the health interventions that is proven to be the cheapest because it can prevent and reduce the incidence of morbidity, disability, and death from diseases that can be prevented by immunization (PD3I). Continued immunization of under-five children is needed to maintain a high level of immunity so that it can provide optimal protection(3).

Disruptions to the primary healthcare system resulted in a significant decline in immunization rates. Millions of children became vulnerable to diseases that vaccines could have prevented. In 2021, there were 1.1 million children who had never received any vaccines. UNICEF supports government efforts to restore children's access to essential health services and to address the decline in routine immunization rates. Among the most important is the catch-up vaccination campaign, which resulted in measles and rubella vaccines being administered to 26.5 million children, polio vaccines to 1.3 million, and penta vaccines to two million children. By 2022, Indonesia will have achieved 94.6 percent basic immunization coverage(4).

The COVID-19 pandemic is the main cause of the decline in child immunization in Indonesia, causing supply chain disruptions and reducing the availability of health workers. Vaccine hesitancy among parents and caregivers, especially with multiple shots required for routine vaccines, has also affected vaccine uptake, along with misinformation and hoaxes regarding vaccines. Children who received their first measles and rubella vaccination dropped from 95 percent in 2019 to 87 percent in 2021. The number of 'zero-dose' children, or those who did not receive a

single dose of vaccine against diphtheria, pertussis, and tetanus (DPT), rose significantly from 10 percent in 2019 to 26 percent during the same period. This puts children at risk of contracting a range of preventable diseases(5).

The Ministry of Health of the Republic of Indonesia's 2020 surveillance and immunization results suggest that basic measles vaccination alone is not sufficient to achieve measles elimination goals. Therefore, socialization of measles vaccination for children aged 9 months to <15 years is needed to accelerate measles control. Measles vaccination for children aged 9 months to <15 years with high coverage (at least 95%) is expected to create herd immunity to break the transmission of the virus to the older cohort and maintain the cohort when reaching reproductive age(2).

According to the results of district/city health SPM data collection and performance indicators, in 2019, there were 4 districts/cities in South Sumatra Province that had reached 100% UCI, namely Musi Rawas, Palembang City, Pagar Alam, and Lubuk Linggau, while 13 other districts/cities were above 80%(6). The percentage of villages that achieved UCI in South Sumatra Province in 2020 was 89.1% (2,932 UCI villages out of 3,289 villages), which decreased compared to the 2019 UCI achievement of 93.7%(7). The percentage of villages that achieved UCI in South Sumatra Province in 2021 was 83.3% (2,740 UCI villages out of 3,289 villages), down from the 2020 UCI achievement of 89.1%(8). Ogan Komering Ulu District for the UCI indicator has decreased every year; in 2019, in Ogan Komering Ulu District, there were 153 UCI villages (97.5%), a decrease of 1.9% from 2018(9). For 2019 in Ogan Komering Ulu District, there were 153 UCI villages (97.5%), a decrease of 1.9% from 2018(10). The coverage of UCI villages/kelurahan in 2021 in Ogan Komering Ulu District is 127

villages/kelurahan (80.9%), a decrease of 8.5% from the 2020 achievement of 92.4%(11).

Research conducted by Sinabariba, M., found that mothers' knowledge about the importance of giving booster immunization to toddlers is in the sufficient category. This is due to many factors, one of which is the lack of information sources received by mothers(12). Research conducted by Afrilia, E.M., and Fitriani, A., found that mothers who have a positive attitude will affect the completeness of booster immunization(13).

Based on the description above, the researcher is interested in conducting a study entitled, The relationship between maternal knowledge and attitude towards booster immunization in toddlers at TPMB Desi Fitriani, AM. Keb Baturaja, in 2022.

2. METHOD

This study used an analytic survey method with a cross-sectional approach. The variables used in the study were independent variables (knowledge and attitude) and dependent variables (booster immunization). The research was carried out at TPMB Desi Fitriani, AM. Keb Baturaja, Ogan Komering Ulu Regency. The number of samples in the study was 62, which was the population of a mother who had children aged 1–5 years who came to the posyandu for immunization. The research was conducted in December 2022. Research instruments for collecting data using questionnaire sheets. Data processing occurs through the processes of editing, coding, tabulating, entry, and cleaning. The results of the study are presented in the form of a frequency distribution of each variable and show the relationship between the independent and dependent variables with a p value ≤ 0.05 .

3. RESULTS

1. Frequency Distribution based on Booster Immunization, Knowledge and Attitude of Mothers at TPMB Desi Fitriani, AM. Keb Baturaja, 2022

Table 1. Frequency Distribution based on Booster Immunization, Knowledge and Attitude of Mothers at TPMB Desi Fitriani, AM. Keb Baturaja in 2022

Variables	n (62)	% (100%)
Booster Immunization		
Yes	55	88,7
No	7	11,3
Knowledge		
Good	55	88,7
Less	7	11,3
Attitude		
Positive	50	80,6
Negative	12	19,4

The results of the study can be seen in Table 1. Of the 62 respondents who did not perform booster immunization, there were 7 respondents (11.3%). Respondents who performed booster immunization were 55 respondents (88.7%). Knowledge variables can be seen in the 62 respondents who obtained good maternal knowledge about booster immunization from as many as 55

respondents (88.7%) and poor maternal knowledge about booster immunization from as many as 7 respondents (11.3%). Maternal attitude variables were obtained from 62 respondents; positive maternal attitudes were 50 respondents (80.6%), and negative attitudes were 12 respondents (19.4%).

2. The Relationship between Maternal Knowledge and Attitude towards Booster Immunization in Toddlers at TPMB Desi Fitriani, AM.Keb Baturaja in 2022

Table. 2. Relationship between Knowledge and Maternal Attitude towards Booster Immunization in Toddlers at TPMB Desi Fitriani, AM. Keb Baturaja, 2022

Variables	Booster Immunization				n (62)	%	p value
	Yes		No				
	F	%	F	%			
Knowledge							
Good	50	91	5	9	55	100	0.000
Less	5	71	2	29	7	100	
Attitude							
Positive	50	100	0	0	50	100	0.000
Negative	5	42	7	58	12	100	

Table. 2 obtained the results of 62 respondents with good knowledge who performed booster immunization on as many as 50 respondents (91%), but did not perform booster immunization on as many as 5 respondents (9%). Respondents with poor knowledge but who immunized included as many as 5 respondents (71%), and those who did not do booster immunization were 2 respondents (29%). Maternal attitudes of 62 respondents who had a positive attitude toward booster immunization were 50 respondents (100%). Negative maternal attitudes about booster immunization but still perform booster immunization as many as 5 respondents (42%), and do not perform booster immunization as many as 7 respondents (58%).

From the statistical test results obtained, there is a significant relationship between knowledge of booster immunization in toddlers at TPMB Desi Fitriani, AM. Keb Baturaja Year 2022 (p value = 0.000) and maternal attitudes towards booster immunization in toddlers at TPMB Desi Fitriani, AM. Keb Baturaja Year 2022 (p value = 0.000).

Knowledge is the result of knowing done by humans about a certain object through a sensory process that is more dominant through the process of sensing vision with the eyes and hearing with the ears.

Knowledge, or cognitive, is dominant and very decisive in shaping a person's habits or actions (overt behavior)(14). Collins (2020) defines knowledge as knowledge and comprehension about an object that an individual possesses or that is shared by all (15). According to M. Sinabariba's research, mothers' awareness of the significance of providing booster vaccinations to toddlers falls into the sufficient category. This is due to many factors, one of which is the lack of information sources received by mothers(12). Most of the studies conducted by Rofiasari, L., and Pratiwi, S.Y., had less knowledge about the purpose of booster immunization (16).

Research that has been conducted on the knowledge variable is in line with research conducted by Negara, J.I., who found that there is a significant relationship between knowledge and the completeness of continued immunization in toddlers (p value = 0.000)(17). Salmarini, D.D., and Hidayah, N., in their research, found that there is a correlation between knowledge and booster immunization status in toddlers (p value = 0.000)(18). Salmarini, D.D., and Hidayah, N., in their research, found a correlation between knowledge and booster immunization status in toddlers, as well as a relationship between the level of maternal knowledge about

measles booster immunization (p value = 0.000)(19).

Maternal knowledge is very important in providing booster immunization. Without good knowledge, mothers will not necessarily understand the importance of booster immunization. If booster immunization and basic immunization are not accompanied by good knowledge, then the mother will not carry out or provide immunization to the child. Information from health workers plays a very important role in increasing mothers' knowledge about immunization, both basic and advanced.

Attitude, according to Cambridge (2021), is a feeling or opinion about something or someone(15). Attitudes are internal states that form and influence personal action choices toward groups of objects, people, or events (20). Attitude in general is the tendency to respond (positively or negatively) to certain people, objects, and situations, or, in another sense, attitude is a tendency to think, perceive, and act(21).

Research that has been conducted on the attitude variable is in line with research conducted by Salmarini, D.D., and Hidayah, N., who found that there is a correlation between maternal attitudes and booster immunization status in toddlers (p value = 0.014)(18). Mulyani, H.D., Rahmaningtyas, I., and Sendra, E., in their research, found that there was a significant relationship between maternal attitudes and the completeness of basic immunization provision (p value = 0.000)(22). Afrilia, E.M., and Fitriani, A.'s research revealed a significant correlation (p value = 0.001) between mother attitudes and toddlers' completeness of ongoing immunization(13).

The study's findings indicate that a mother's attitude plays a significant role in preserving her children's health. Specifically, when it comes to administering booster shots to toddlers, a positive mother's attitude is associated with better booster immunization

outcomes. One of the factors that influences maternal attitudes is personal experience. This personal experience can create strong assumptions and have a direct influence on one's attitude. If mothers have a positive attitude, then mothers tend to bring their children to receive immunization, both basic and advanced immunization (booster).

4.CONCLUSION

The respondents in the research that has been done know as much as 88.7% about booster immunization. The respondents in the study had a positive attitude toward carrying out booster immunization by as much as 80.6%, and mothers had good beliefs about booster immunization. There is a significant relationship between knowledge and booster immunization in toddlers. There is a significant relationship between maternal attitudes towards booster immunization and toddlers. Suggestions for future researchers are to add variables of maternal characteristics and sources of information received and look for correlations between variables that are more influential.

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