



Relationship Of Mother's Knowledge Level With Basic Immunization Completeness In Children At Posyandu Bungatanjung Ciamis

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ABSTRACT

Immunization is a program that is much needed in the prevention of various infectious diseases and avoiding disabilities and child mortality. One of the efforts carried out by the government is by providing counseling to mothers to bring their children to get immunizations, especially carrying out 5 Complete Basic Immunizations, namely Hepatitis B, BCG, Polio, DPT, Measles and also striving to ensure access to services in areas reached by work the same as across other sectors. This is to determine the relationship between the mother's level of knowledge and the completeness of basic immunization for children at the Bungatanjung Posyandu, Cigembor Village, the working area of the Ciamis Health Center. The research method in this study is to use quantitative research methods with a cross-sectional research design, a population of 47 mothers, and sampling using a total sampling method. The results of the study showed that there were 30 people (78.9%) in good category knowledge, 8 people in poor category knowledge (21.1%), 33 people (86.8%) who completed basic immunization in the complete category, and 5 incomplete categories. (13.2%) with a statistical p-value of 0.022. The conclusion of this study is that there is a significant relationship between the level of maternal knowledge and the completeness of basic immunizations for children at the Bungatanjung Posyandu, Cigembor Village, the working area of the Ciamis Health Center.

Keywords: *Knowledge, Completeness of Basic Immunization, Posyandu*

Introduction

Progress in a nation needs a healthy successor so that it needs to be nurtured from the age of infants, children and adolescents which makes one of the preventions to save the nation's children, one of which is immunization (Putri Handayani 2019).

Immunization is a program that is very much needed in preventing various infectious diseases and avoiding disability and child mortality (Rofiasari 2020). According to WHO data in 2010 recorded as many as 4.5 million deaths from 10.5 million deaths annually in the world occur due to infectious diseases that can be prevented by immunization. According to WHO, the prevalence of childhood immunization globally is DPT by 83%, Polio by 84%, Measles by 84%, Hepatitis B by 79%, and BCG by more than 80%. The percentage of immunization in the world globally continues to increase from year to year (Lubis et al 2018).

Based on WHO data, in 2018 it was estimated that 19.4 million children worldwide could not achieve routine immunizations such as 3 doses of the DPT vaccine. Around 60% of these children live in 10 countries namely Angola, Brazil, Democratic Republic of Congo, Ethiopia, India, Indonesia, Nigeria, Pakistan, Philippines and Vietnam. Monitoring data at the Country level is critical to helping countries prioritize and adjust vaccination strategies and operational plans. Vaccination carried out in immunization activities is an effort to prevent death in children. According to the World Health Organization (WHO) (2019), the immunization coverage of member countries has reached 90% and an estimated 85% of children worldwide have achieved immunization. There are 19.3 million children who have not been fully vaccinated and remain at risk of developing the disease.

Immunization coverage in Indonesia in children who get immunizations aged <24 months. (Immunization for children aged 1 month received immunization of Hb 0-BCG-Polio 1, children aged 2 months received immunization of DPT-HB- Hib I-Polio 2, children aged 3 months received immunization of DPT-HB-Hib 2-Polio 3, children 4 months receiving DPT-HB-Hib 3-Polio immunization 4) . According to DPT-Hb3/DPT-Hb-Hib3 in 2013 it was 75.6% and in 2018 it was 61.3%. While the proportion of MCH book ownership in children (0-59 months) in 2013 was 53.4% and in 2018 it was 65.9% (Riskasdas 2018). Immunization coverage in Universal Child Immunization (UCI) villages in West Java Province from 2008 to 2016 tends to increase by 66%, in

2008 to 2015 increased by 1.5%, in detail per district/city. Meanwhile, in 2016 the coverage of UCI villages/kelurahan was 5,483 villages/kelurahan out of 5,962 in West Java (92%), spread over 27 regencies/cities with coverage between 75%-100% of regencies/cities whose coverage is still below the average The provinces are Bandung Regency, Garut Regency, Cimahi City, Cirebon Regency, Cianjur Regency, Ciamis Regency, Cirebon City, Subang Regency, and Kuningan Regency (Simanjuntak M.Samuel 2019).

Complete basic immunization coverage at the Ciamis Health Center for children who carry out complete immunizations in early 2020, namely January to August complete immunization (82.4%) (UPT Puskesmas Ciamis, 2020). Immunization coverage in Cigembor Village in 2020, the target toddlers who must carry out immunizations consist of 30 boys and 27 girls, of which 57 children. The immunizations carried out in January to August were 36 children (63.2%). Immunization Coverage from the table above which consists of 7 villages in

the working area of the Ciamis Health Center, the lowest achievement of the target is Cigembor Village which is only 36 children (63.2%) (UPT Puskesmas Ciamis, 2020).

In terms of the negative impact on children who do not receive complete immunizations, they will be at risk of contracting or developing diseases that can be prevented by immunization against tuberculosis, diphtheria, polio, and measles. However, it could allow the child to get meningitis or meningitis which is known as a disease that is dangerous to health so that it can infect anyone, both adults, children and infants (Yopi Wulandhari 2018).

According to the Indonesian Demographic and Health Survey, the maternal and child mortality rate in 2019 was 59.16 per 100,000 live births, a far decrease compared to 60.79 per 100,000 live births in 2018. In Indonesia, 153,681 children die every year, meaning that every day there are 421 children who die. die equal to 2 children every minute. The high child mortality rate in Indonesia causes a decline in the level of public health where efforts are needed to reduce this mortality rate (Ridmadhanti 2019).

The government has intensified efforts to meet the Complete Basic Immunization (ILD) target carried out in Indonesia. One of the efforts carried out by the government is by providing counseling to mothers to bring their children to get immunizations, especially carrying out the 5 Complete Basic Immunizations namely Hepatitis B, BCG, Polio, DPT, Measles and also trying to ensure access to services in areas reached by working. the same as across other sectors, ensuring the availability of vaccines and conducting training for health workers (Natalia et al 2019).

Immunization program as described based on Surah An-Nisa verse: 9 Which means: "And let fear of Allah those who if left behind them weak children, who they worry about (their welfare). Therefore let them fear Allah and let them speak the truthful words" (QS An-Nisa: 9) and according to HR. Muslim No 041 Which means: "Be earnest to get what is useful for you and ask Allah for help (in every matter) and never feel weak" (HR. Muslim No. 041).

Based on the verses of the Qur'an and Hadith above regarding immunization programs that must be carried out based on mother's knowledge about immunization to protect children so that they are always healthy, immune and protected from various diseases, and parents must maintain the survival of children so that in the future children become a strong generation, not as a weak generation. The immunization program is held as an effort to form a mother/parent's effort to protect or prevent her child from various kinds of disease threats that can occasionally attack her child's body, so that with this effort mothers/parents do not feel weak or afraid without any effort to maintain the health of their children. one of them is to carry out an immunization program in a timely and complete manner.

Immunization in the program is very important where knowledge of the mother is the most important thing for the health and development of children. Although mothers have been given counseling related to immunization by the government. However, there are still many children who have not received complete immunizations, this is due to various reasons such as the mother's knowledge of knowledge about bringing to the Posyandu or Puskesmas to get immunizations for fear of her child getting sick or hot (Rizal 2020).

Mother's knowledge greatly influences behavior and attitudes because if the mother knows and understands something that can take a stand and act far from what she knows, therefore a mother's knowledge in immunization is very important. Because an understanding of the immunization program for children is very important. Mother's knowledge can be obtained from education or observation and information obtained,

through the knowledge gained to make changes that can be influenced by the behavior of the development of children and mothers, all activities carried out in carrying out the implementation of child immunization are none other than the results of immunization and the low awareness of mothers obtained from education, it will increase mother's knowledge in providing basic immunization to children from an early age (Neila Hidayati 2020).

The implementation of immunization is carried out according to Wawan, et al (2011), stating that good knowledge of mothers about immunization affects the completeness of their children's basic immunizations because mothers who have extensive knowledge will get a lot of information about the benefits of basic immunization in children for children's immune systems in the future. come. On the other hand, the lack of knowledge of mothers about the benefits of basic immunization in children will be susceptible to disease due to weak immune systems (Ira Jayanti 2018).

Objective

Based on a preliminary study on 5 mothers of children who were immunized at the Ciamis Health Center. When interviewed about immunization knowledge, 3 mothers knew the meaning, purpose, benefits, types of immunization, administration, and impact and 2 mothers knew the meaning, goals, benefits, giving, and impacts but did not understand the types of immunization. Meanwhile, when interviewed and saw the MCH book on completeness of immunization for children, there were 3 mothers immunizing their children completely and 2 mothers not completing their child immunizations because the child was sick when they were about to carry out immunization so it was rescheduled by the Ciamis Health Center. Therefore, researchers are interested in conducting research on "The Relationship of Mother's Knowledge Level with Completeness of Basic Immunization for Children at Posyandu Bungatanjung, Cigembor Village, Ciamis Health Center Working Area.

Method

This research design uses quantitative research methods with a cross-sectional research design. The population used in this study were all mothers who had children above 9 months to 48 months at the Bungatanjung Posyandu, Cigembor Village. The working area of the Ciamis Health Center was 47 people. The sampling method uses the Total Sampling technique. The sample in the study was 38 people, 9 people did not attend because there were children who did not come because of illness and there was a need. The instrument used is a questionnaire sheet about immunization knowledge with a Guttman scale (yes or no). Data processing used univariate analysis to determine the frequency distribution and bivariate analysis to determine the relationship between variables with the statistical test of chi-square prevalence ratio of 95%.

Results

1) Mother's Knowledge Distribution

The results of the research on the distribution and percentage of knowledge of mothers at the Bungatanjung Ciamis Posyandu can be seen in table 1:

Table 1 Distribution of Mother's Knowledge Frequency at Posyandu Bungatanjung Ciamis

Mother's Knowledge	Frequency (n)	Percentage (%)
Good	30	78,9%

Less Good	8	21,1%
Total	38	100%

Mother's Knowledge is good. Based on table 1 shows that the highest frequency distribution of maternal knowledge is in the good category as many as 30 people (78.9%) while the less category is 8 people (21.1%).

2) Distribution of completeness of basic immunization Research results distribution and percentage

Completeness of immunization for children aged 9 months-48 months at Posyandu Bungatanjung Ciamis can be seen in table 2:

Table 2 Frequency Distribution of Complete Basic Immunizations for Children at the Bungatanjung Ciamis Posyandu

Completeness of Imunization	Frequency (n)	Percentage (%)
Complete	33	88,8%
Incomplete	5	13,2%
Total	38	100%

Based on table 2 shows that the frequency distribution of complete immunization is 33 people (88.8%) while incomplete as many as 5 people (13,2%).

3). The relationship between mother's level of knowledge and completeness of basic immunization for children at Posyandu Bungatanjung Ciamis.

Table 3 Relationship between mother's knowledge level and completeness of basic immunization for children at Posyandu Bungatanjung Ciamis

Mother's Knowledge	Completeness of Imunization				Total		P Value
	Complete		Incomplete		n	%	
	n	%	n	%			
Good	28	93,3	2	6,7	30	78,9	0,022
Less Good	5	62,5	3	37,5	8	21,1	
Total	33	86,8	5	13,2	38	100	

Based on the results of the cross tabulation in table 3 above, it can be seen that from 28 (93.3%) knowledge of mothers with good categorization with complete completeness level, 2 respondents (6.7%) have good knowledge with incomplete immunization completeness, 5 respondents (62, 5%) have less knowledge with complete completeness level and 3 respondents (37.5%) have less knowledge with incomplete completeness level.

The results of the statistical test with chi square based on the mother's knowledge variable showed that the p-value was 0.022, which means that the p-value <0.05 so the hypothesis was accepted. This means that there is a relationship between mother's knowledge and completeness of basic immunization for children at Posyandu Bungatanjung Ciamis

Discussion

Knowledge of mothers at Posyandu Bungatanjung Ciamis

Based on the frequency distribution of maternal knowledge, the highest was in a good category as many as 30 people (78.9%).), do not understand the types of immunization. Judging from the characteristics of the mother's age of children under five, the majority of mothers aged 26-35 years were 29 people (76.3%), aged 26-35 years including early adulthood.

Early adulthood is a period of transition from adolescence to adulthood. Physically, early adulthood shows a perfect appearance in the sense that the growth and development of physiological aspects have reached the peak position. They have endurance and excellent health levels so that in carrying out various activities they appear to be initiative, creative, energetic, fast and proactive, whereas according to Mubarak's theory (2013 in Putri Handayani 2019) that age has a

close relationship with knowledge. The age of the mother will increase to a certain extent, so it can increase one's knowledge in experience and the level of thinking becomes more mature or mature, so it can be said that with increasing age a person will experience changes in terms of knowledge.

Knowledge is the result of knowing and occurs after people make senses (sight, hearing, touch, taste and smell) of a particular object. Cognitive knowledge is a very important domain in shaping one's behavior. This proves that the knowledge of mothers as role models has been carried out quite well so far, such as in providing basic immunizations to their children and understanding something that can take an attitude and act far from what they know. So the knowledge of a mother in immunization is very important. Because an understanding of the immunization program is very important for the benefit of children (Neila Hidayati, 2020).

Mother's knowledge can be obtained from education, information, culture, experience, age and occupation. Judging from the research I got, the highest education at the secondary level has good enough knowledge, but it will be better at the tertiary level. Through the knowledge gained by humans in making changes. All activities carried out in carrying out child immunization are nothing but education, it will increase mother's knowledge in providing basic immunization to children. Besides, it is estimated that knowledge is not the only factor that can affect the completeness of immunization. So even though according to the level of knowledge a mother understands the importance of immunization, if it is not supported by other factors such as age and support from health workers, the provision of basic immunization to children will not be fulfilled (Ira Jayanti 2018).

The results of the study concluded that there is a relationship between knowledge of complete basic immunization with the level of knowledge of the mother, the higher the level of knowledge of the mother, the more complete the basic immunization for children.

An overview of the completeness of immunization for children at the Bungatanjung Ciamis Posyandu

The results of the study on the aspect of completeness of immunization showed that most of the children in the Bungatanjung Posyandu, Cigembor Village, had complete immunization status as many as 33 people (86.8%), giving complete immunization because they had high awareness of disease prevention. While 5 people were incomplete (13.2%), incomplete immunization was partly caused by the fact that at the time of immunization the

child was sick. The completeness of basic immunization is influenced by awareness and knowledge, where the knowledge of the Posyandu Bungatanjung, Cigembor Village is mostly good, the majority of respondents are high school education (47.4%), because someone with high knowledge will tend to have good health behavior to immunize their children completely.

The results of this study also go with the research of Lubis et al (2018), which states that mother's knowledge affects the immunization status of their children, where children who have mothers with good basic immunization knowledge will have complete basic immunization status compared to mothers who have poor knowledge of immunization. This can be done through extensive information search. The more information they have, the more they can influence or increase their knowledge of a person and raise awareness of the importance of immunizing their children completely.

The completeness of basic immunization in children is influenced by the level of knowledge. With good knowledge makes mothers know the correct information about immunization so that it will affect the completeness of complete basic immunization in children. Immunization is a reaction between antigens and antibodies to provide immunity to children by introducing vaccines into the body so that the body makes anti-substances to prevent certain diseases. While basic immunization is the first type of immunization that must be given to children from birth to protect their bodies from certain diseases by including Hepatitis B-0, BCG, Polio, DPT and Measles vaccines. While complete basic immunization is a series of activities in government programs carried out in various health agencies. If the child is not fully immunized, it will have an impact, namely diseases such as tuberculosis, diphtheria, hepatitis B, polio, and measles (Natalia et al 2019).

The results of the study concluded that the completeness of immunization greatly affects the health of children, so that children must be fully immunized to grow and develop and make a healthy successor of the nation so that it needs to be nurtured from the age of infants, children and adolescents which makes one of the preventions to save the nation's children. the other is by immunizing

Relationship between mother's level of knowledge and completeness of basic immunization for children at Posyandu Bungatanjung Ciamis

The relationship between the mother's knowledge level and the completeness of basic immunization for children shows that the statistical test results obtained by chi square analysis showed that there was a significant relationship between the mother's level of knowledge and the completeness of basic immunization for children at the Bungatanjung Posyandu, Cigembor Village, Ciamis Health Center working area, with a p-value of 0.022. smaller than $\alpha = 0.05$.

This study is in line with the results of research by Natalia et al (2019) with the title "The relationship between mother's knowledge and completeness of basic immunization for children 1-3 years at Padang Health Center in 2018" which said that there was a relationship between the level of knowledge and completeness of basic immunization, according to the results of the chi test. square obtained a p-value of 0.003 (p-value <0.05). This shows that mother's knowledge affects immunization status in children, where children who have mothers with good immunization knowledge will have complete basic immunization status compared to children with mothers who have poor knowledge of basic immunization.

A person's knowledge is influenced by many factors, one of which is education. Mother's level of education and knowledge greatly influences the implementation of child

immunization activities, both formal and non-formal education. This shows that the importance of mother's knowledge about immunization has a relationship with the mother's actions in providing basic immunization to children. Mothers who have a lot of positive information about immunizations will provide complete basic immunizations to their children, and vice versa mothers who have little information about immunizations will not provide complete basic immunizations for their children (Yopi Wulandhari 2018).

The results of the study that the conclusion illustrates that the fulfillment of complete basic immunization depends on the quality of mother's knowledge about basic immunization. Thus, it can be said that the higher the mother's level of knowledge about immunization, the greater the potential for children to receive complete basic immunization.

Conclusion

Based on the results of the research entitled the relationship between the mother's level of knowledge and the completeness of basic immunization for children at the Posyandu Bungatanjung Ciamis which has been discussed in previous chapters, it can be concluded as follows:

1. Mother's knowledge is in the good category 30 people (78.9%).
2. Children who received complete immunization were 33 people (86.8%).
3. There is a significant relationship between the mother's knowledge level and the completeness of basic immunization for children at the Posyandu Bungatanjung Ciamis with a p-value of 0.022 which is smaller than $\alpha = 0.05$.

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