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FACTORS AFFECTING MOTHERS ON BASIC IMMUNIZATION STATUS IN INFANTS AGED 12-24 MONTHS IN BARINGIN RAYA VILLAGE WORKING AREA OF PAMATANG RAYA PUSKESMAS DISTRICT

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Abstract

The decline in the Infant Mortality Rate (IMR) in recent times illustrates an increase in the quality of life and public health services. The decrease in IMR was partly due to an increase in the coverage of infant immunization, an increase in the coverage of deliveries by health personnel, the placement of midwives in villages and an increase in the proportion of mothers with higher education. According to Ibrahim (2006) said that if basic immunization is carried out in a complete and regular manner, then immunization can reduce the morbidity and mortality of children under five by around 80-95%. Regular means adhering to the immunization schedule and frequency while complete basic immunization is having received all types of basic immunization when the child was less than 11 months old. The purpose of this study was to determine the factors that influence the mother's basic immunization status in infants aged 12-24 months in Baringin Raya Village, Working Area of the Pamatang Raya Health Center, Simalungun Regency, in 2016. The research method was carried out quantitatively with a descriptive correlation design with a cross approach. sectional. The subjects of this study were mothers who had babies aged 12-24 months who were recorded in the Baringin Raya Village in the working area of the Pamatang Raya Health Center, as many as 40 respondents. The sampling technique for the mother group was using purposive sampling. Statistical analysis used the chi-sguare test. Statistical results show that there is a relationship between age (p value = 0.001, OR=0.008), education (p value=0.004, OR=7.286), occupation (p=0.001, OR=0.086), number of living children (p value=0.000, OR=0, 014) and knowledge (p=0.00, OR=0.014). It is hoped that it will provide insight and knowledge about the importance of basic immunization in infants.

Keywords:**Mother, Immunization Status of Infants 12-24 months**

INTRODUCTION

The National Health System is a very effective form of health intervention in efforts to reduce infant and under-five mortality. The decline in the incidence of infectious diseases has occurred decades ago in developed countries that have carried out regular immunizations. Likewise, Indonesia was declared free of smallpox in 1972 and a significant reduction in the incidence of several infectious diseases has occurred since 1985, especially for diphtheria, tetanus, pertussis, measles and polio. Even now, polio has not been found since 1995 and it is hoped that in the next few years Indonesia will be declared polio-free (Ranuh, 2008).

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The epidemiological profile in Indonesia as an illustration of the level of public health still requires special attention. With immunization coverage: BCG 85%, DPT 64%,

Polio 74%, HB1 91%, HB2 84.4%, HB3 83.0% (Ranuh, 2008). The more the number of children, especially mothers who still have babies who are the third child or more, it will take a lot of time to take care of these children so that there is less time available for mothers to go to the immunization service (Reza, 2006).

In this regard, the researcher wants to examine the title "Factors Influencing Mothers on Basic Immunization Status in Infants Aged 12-24 Months in Baringin Raya Village Working Area of the Pamatang Raya Health Center, Simalungun Regency in 2016" is very important to study.

Formulation of the problem

Based on the background of this research, the authors formulate the problem whether there is a relationship between the factors that influence the mother to: Basic Immunization Status in Infants Aged 12-24 Months in Baringin Raya Village Working Area of the Pamatang Raya Health Center, Simalungun Regency in 2016.

METHODS

Research design

The research method was carried out quantitatively with a descriptive correlation design with a cross-sectional approach which is used to identify relationships that occur temporarily without the need for a control group and trials (Suyanto, and Salamah, 2009). To obtain information about the independent and dependent variables, the measurements were carried out together at the time of the study.

Population and Sample

The population is all research subjects (Arikunto, 2006). The population in this study were all mothers who had babies aged 12-24 months at the time of the study in Baringin Raya Village, Working Area of the Pamatang Raya Health Center, Simalungun Regency, namely 40 people. Determination of the age of 12-24 months is based on the consideration that in this age range it is estimated that a child under five should have received complete basic immunization. Sampling in this study used total sampling, where the entire population (total population) was taken as a sample of 40 people.

RESULTS AND DISCUSSION

The purpose of this study was to determine the factors related to the mother's immunization status in infants aged 12-24 months. The results of univariate analysis revealed that the age of the mother was <30 for 17 people and ≥30 years for 23 people. Mother's education is ≤9 years as many as 21 people and >9 years as many as 19 people. Mother's occupation is self-employed 13 people and farming 27 people. The number of children owned by mothers ≤2 people was 13 people and >2 children were 27 people. Knowledge of good mothers as many as 13 people and less knowledge as many as 27 people.

Correlation between Mother's Age and Immunization Status in Infants

Based on research on maternal age in the category < 30 years and maternal age ≥ 30 years, there was a significant relationship between maternal age and infant

immunization status with p = 0.001 and OR = 0.088. This study is in line with Reza (2006) with 2 categories <30 years and maternal age ≥30 years. There is a significant relationship between maternal age and infant immunization status with p=0.000 and QR=3.10.

Relationship between Mother's Education and Immunization Status in Infants

Based on research on maternal education in the category of education ≤ 9 years and education > 9 years, it can be concluded that there is a significant relationship between maternal education and infant immunization status with p=0.004 and OR=7.286. These results are in line with previous research. Reza (2006) the results of his research said that there was a significant relationship between mother's education and the completeness status of children's basic immunization with p-value = 0.010, Lienda (0009) the results of his research were mothers with low education had a risk of 3.14 times greater than their child's immunization status for incomplete compared to mothers with higher education.

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Relationship between Mother's Occupation and Immunization Status in Infants

Based on research on maternal occupation in Siabal-abal II Village, mothers with farming and mothers working as self-employed, it can be concluded that there is a significant relationship between maternal occupation and infant immunization status with p=0.001 and OR=0.086.

The results of this study are different from Lienda (2009) maternal occupation in the category of working mothers and not working, there is no relationship between maternal occupation and completeness of immunization with a p-value = 0.250. This is because working mothers, the proportion of children who do not receive complete immunization is almost the same as working mothers. Reza (2006) research results found no relationship between the mother's occupation of the basic immunization status of their children with a p-value = 0.902. The proportion of children who did not receive complete basic immunization was almost the same as children who had complete basic immunization for each group of mothers. This is because those selected as respondents are mothers who work in the non-formal sector or as housewives only.

Correlation between Number of Mother's Children and Immunization Status in Infants

Based on research on the number of mothers with the category ≤2 people and >2 people, it can be concluded that there is a significant relationship between the number of mothers' children and the immunization status of infants with a value of p = 0.000 and OR = 0.014. Visits to immunization service posts are related to the availability of time for mothers to seek immunization services for their children. Therefore the number of children can affect whether or not there is time for mothers to leave the house to get immunization

services for their children. A large number of children requires a lot of time for mothers to take care of their children, so there is not much time available for mothers to visit immunization service locations.

Relationship between Mother's Knowledge and Immunization Status in Infants

Based on research on maternal knowledge in the good category and poor knowledge, the results of the statistical test obtained p = 0.000. It can be concluded that there is a significant relationship between maternal knowledge and infant immunization status with OR = 0.014. The results showed that 100% of respondents were able to answer questions 3, 4 and 22 correctly, namely polindes or posyandu where to get immunization services, midwives/health workers who are allowed to carry out immunization actions and the purpose of giving measles immunization is to prevent measles from occurring. Question number 12, namely the schedule for administering polio, only 11 respondents answered correctly, the majority answered incorrectly by choosing an answer at any time. This research is in line with Reza (2006) which states that there is a relationship between mother's knowledge and completeness of basic immunization with p=0.036.

CLOSING

Conclusion

Based on the results of the study "Factors Influencing Mothers on Basic Immunization Status in Infants Aged 12-24 Months in Baringin Raya Village Working Area of the Pamatang Raya Health Center, Simalungun Regency in 2016" the conclusions were obtained:

1. There is a significant influence between maternal age and immunization status with the results of the chi sguare test p value 0.001 OR = 0.088 (0.020-0.393).
2. There is a significant influence between maternal education and immunization status with the results of the chi sguare test p value 0.001 OR = 0.088 (0.0200.393).
3. There is a significant influence between maternal occupational factors and immunization status with the results of the chi sguare test p value 0.001 OR = 0.086 (0.0180.415).
4. There is a significant influence between the number of children and the immunization status with the results of the chi sguare test p value 0.000 OR = 0.014 (0.001-0.145).
5. There is a significant influence between maternal knowledge and immunization status with the results of the chi sguare test p value 0.000 OR = 0.014 (0.001-0.145).

REFERENCES

Arikunto, S., (2006). Research procedure. Revised Edition VI, Jakarta: Rineka Cipta.

North Sumatra Province National Family Planning Coordinating Board, (2008). Preparing Mothers, Healthy and Quality Babies. Medan : BKKBN.

Dahlan, MS, (2008). Sraristik For Medicine and Health. Jakarta Salemba Medika.

Indonesian Ministry of Health, (2004). Immunization Program Policy. Jakarta Ministry of Health RI.

_____(2006a). Safe Injections and Immunizations

Heparitis B. Jakarta: Directorate General of PPM£&PL PATH, Ministry of Health, Republic of Indonesia.

_____ (2006b). Basic material for the Immunization Program Policy. Jakarta: Directorate General of PP&PL Ministry of Health RI.

_____(2009a). Basic Immunizations for Babies Aged 0-12 Months. Jakarta : Directorate General of PPM&PL Ministry of Health RI.

_____(2009b). Improving the Coverage and Quality of Immunization Services at the Puskesmas. Jakarta : Directorate General of PPM&PL Ministry of Health RI.

_____(2009c). Management of Vaccines and Vaccine Chain at Health Center Level. Jakarta : Directorate General of PPM&PL Ministry of Health RI.

Simalungun District Health Office. (2015). Simalungun District Health Profile 2015. Simalungun: Simalungun District Health Office. ----(2015). P2P&PL Sub-Division Annual Report. Simalungun: Simalungun District Health Office.

Gunawan, (2009). The Influence of Maternal Characteristics and Socio-Cultural Environment on the Administration of Hepatitis B Immunization to Infants 0-7 Days in Langkat District. Medan : TesisSekolahPascasarjanaUSU. http://repository.usu.ac.id/bitstream/123456789/6743/1/09E01845.pdf. obtained July 14, 2016.