A study to assess the knowledge regarding immunization among mother residing at urban community areas of Bangalore

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Abstract

A study to assess the knowledge regarding immunization among mother residing at urban community areas of Bangalore So, the research conducting on knowledge of the mothers of under five children will help to assess them and provide health education on Immunization. The study was carried out in selected urban community, Yelachenahalli, Bangalore and 100 mothers of under five children were selected by non-probability convenient sampling technique. The result shows that majority of mothers, 27 (27%) of them had moderate level of knowledge, 72 (72%) had inadequate level of knowledge and remaining 1(1%) had adequate level of knowledge regarding Immunization. The findings of the study reveals that the majority of the mothers had inadequate knowledge of the mothers of under five children regarding Immunization. Hence, a pamphlet was developed in order to give the health education to the community.

Keywords: Knowledge; Immunization.

Introduction

India was one of the first countries to adopt the world health organization expanded programmer of immunization on (EPI). The program globally in 1974 and was initiated in India in 1978.

Since its inception considerable progress has been made in terms of education in disease burden. Immunization it the most effective known intervention to reduce the childhood morbidity and mortality.

In India though the coverage levels of immunization are in increasing in trends, but lot of deficiencies still remain according to the recent estimates of national family health survey (NFHS) 2015-16 report, percentage of children aged 12-32 months full's immunized was 68.1% in Telangana State.

In district level household and facility (DHAS4) 2012-13 report survey form Telangana percentage of children received full vaccination was 47.5%. 3, 4 many newer vaccines have been added recently in the national immunization schedule some of which are being implemented in phased manner throughout India. 5 some of the new vaccine (IPV) Rota virus vaccine, Rubella vaccine as MR vaccine replacing the measles containing vaccine first dose, (MCV) and few orders in the pipeline. 6. With addition of new vaccine, certain changes have been made in the existing schedule including addition of second dose of measles vaccine at 16-24 months and total 9 dose of VIT A every six monthly starting 9 months of age.

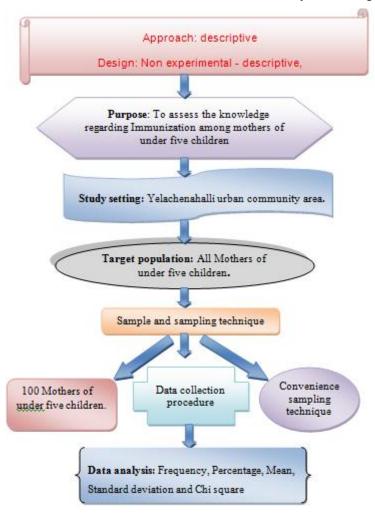
It is extreme important that the caretakers especially the mothers should be educated regarding these new vaccine and changes in the immunized completely appropriate to the age. Knowledge regarding immunization is key factor for immunization coverage regardless of other demographic characteristics including socio economic status hence the current study has been designed with an objective to assess immunization status of the children and to determine the knowledge regarding new vaccine and changes in the immunization schedule among the mothers.

Objectives:

- 1) To assess the knowledge regarding immunization among mothers.
- 2) To find out the association in pre test knowledge score regarding immunization among mothers with their selected demographic variables.

Research design

Non experimental – descriptive, design was used to assess the knowledge regarding Immunization among mothers of under five children in Yelachenahalli urban community area, Bengaluru.



Schematic Representation of Research Plan

Setting

The present study was conducted in Yelachenahalli urban community area, Bengaluru.

Population

The total population of the present study comprised of all mothers of under five children in Yelachenahalli urban community area, Bengaluru.

Sample

Mothers of under five children in Yelachenahalli urban community area, Bengaluru.

Sample size

The sample size of the present study consists of 100 mothers of under five children in Yelachenahalli urban community area, Bengaluru.

Criteria for sampling selection

Inclusion Criteria

The study includes

- 1. Mothers of under five children.
- 2. Mothers who are available at the time of data collection.

Exclusion criteria

The study excluded

- 1. Mothers who are not willing to participate in the study.
- 2. Mothers who cannot understand Kannada / English language

Sampling technique

Non probability – convenience sampling technique

Section -1: Demographic variables of mothers of Underfive children

Table-1.1: Frequency and percentage distribution of mothers according to age,

religion, Education, occupation and income of the family. n=100

| S/N | Demographic Variable | Samples | | |
|-----|----------------------|---------|----|--|
| | | n | % | |
| 1. | Age | | | |
| | a. 20 years & below | 10 | 10 | |
| | b. 21 -25 Years | 29 | 29 | |
| | c. 26-30 Years | 29 | 29 | |
| | d. 31 Years & above | 32 | 32 | |
| | | | | |





| S/N | Demographic Variable Samples | | ples |
|-----|-------------------------------|----|------|
| 2. | Religion | | |
| | a. Hindu | 90 | 90 |
| | b. Muslim | 06 | 06 |
| | c. Christian | 04 | 04 |
| | d. Others | 00 | 00 |
| 3. | Education of the mother | | |
| | a. Illiterate | 34 | 34 |
| | b. School education | 43 | 43 |
| | c. PUC | 18 | 18 |
| | d. Graduates | 05 | 05 |
| 4. | Occupation of the mother | | |
| | a. Unemployed | 40 | 40 |
| | b. Coolie | 36 | 36 |
| | c. Government employee | 03 | 03 |
| | d. Private employee | 21 | 21 |
| 5. | Family income | | |
| | a. Below Rs 2000 | 32 | 32 |
| | b. Rs 2001-4000 | 26 | 26 |
| | c. Rs4001-6000 | 19 | 19 |
| | d. Above Rs 6001 | 23 | 23 |
| 6. | Type of family | | |
| | a. Single parent | 21 | 21 |
| | b. Nuclear | 26 | 26 |
| | c. Joint | 38 | 38 |
| | d. Extended family | 15 | 15 |
| 7. | No. of children in the family | | |
| | a. One | 25 | 25 |
| | b. Two | 25 | 25 |
| | c .Three | 22 | 22 |
| | d. More than three | 28 | 28 |
| | Any previous knowledge on | | |
| 8. | Immunization | | |
| | a. Yes | 67 | 67 |
| | b. No | 33 | 33 |
| 9. | If yes source of information | | |
| | a. Television/radio | 15 | 15 |
| | b. News paper/Magazines | 11 | 11 |
| | c. Health personnel/Elders | 20 | 20 |
| | d. All the above | 21 | 21 |

Assessment of level of knowledge regarding Immunization among mothers of under five children

Table 2.1: Frequency and percentage distribution of level of knowledge regarding Immunization among mothers of under five children n = 100

| | Domain | Level of knowledge | | | | | |
|-----------|--------|--------------------|---|----------------------|---|-----------------|---|
| Sl. No | | Inadequate (<50%) | | Moderate (50-75%) | | Adequate (>75%) | |
| | | Frequency | % | Frequency | % | Frequency | % |
| | | | | | | | |

The above table shows that, at the initial assessment 01(01%) mother had inadequate knowledge, 27(27%) mother had adequate knowledge and rest of them 72(72%) had moderate knowledge.

Table 1.2: Mean, Standard Deviation and mean percentage of level of knowledge regarding Immunization among mothers of under five children. n= 100

| Sl. No. | Aspects of knowledge | Statements | Max. Score | Mean | SD | Mean (%) |
|------------|----------------------|------------|---------------|------|------|----------|
| 1. | General information | 20 | 20 | 8.16 | 2.54 | 40.8 |

The above Table 2.2.1 reveals the mean, SD and improvement of knowledge score on Immunization among mothers of underfive children. With regard to pre test Knowledge regarding Immunization among mothers of underfive children the pretest mean was 8.16(40.8%) and standard deviation was 2.54.

Section-3: Association between pre test knowledge regarding Immunization among mothers of anganawadi children with their selected demographic variables.

The results of Chi-square analysis show the outcomes of association between knowledge regarding Immunization with selected demographic variables. The chi square test was carried out to determine the association of knowledge regarding Immunization with selected demographic variables such as Age, Religion, Education of the mother, Occupation of the mother, Family income, Type of Family, No. Of children in the family, Any previous history of growth and development, If yes source of information.

The above result shows that the knowledge on Immunization was significantly associated with Age (χ^{2} =4.69, df=1), Religion (χ^{2} =4.88, df=1), Family income (χ^{2} =2.87, df=2), number of children in the family (χ^{2} =8.16, df=1) and not significantly associated with Education of the mother, Occupation of the mother, Type Of Family, No. of children in the family, any previous history of Immunization, If yes source of information at 5% (P<0.05).

Recommendation:

The same study can be conducted in different cities to compare the result. The same study can be repeated on large sample so as to generalized the result. The short-term training programme its effectiveness can be analysed through the pre-& post-test method. Similar kind of study can be conducted among different population.

Conclusion

The purpose of the present study was to assess the knowledge regarding immunization among mothers residing in urban areas of Bangalore city. The 100 sample were selected from yelachenahalli area of Bangalore city. Descriptive research design was used for the study. The content validity and reliability of the tool was done, which suggested that the tool was reliable. It was found that the tool had no major flaws and was used for the final study with the changes as per the experts and Guide. Based on the objectives, the collected data was analyzed by using descriptive statistics. In this study majority of mothers are having adequate knowledge regarding immunization.

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