



**IMMUNIZATION STATUS AND ASSOCIATED FACTORS AMONG CHILDREN OF
TRIBAL AND RURAL AREAS: A CROSS SECTIONAL PROSPECTIVE STUDY**

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ABSTRACT

Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by vaccination. Vaccines stimulate the body's own immune system to protect the person against subsequent infectious diseases and are estimated to avert over between 2 and 3 million deaths each year. For the protection of our child's immunity it is required to protect them in a while by using some protective agents like vaccines. Immune system of childhood is varied from the way of adulthood it may concerns. Childhood immunization is little bit varied from others. Many more vaccination schedules are applied for the same to continue to work in a whole. First half of the year of their health is really associated with their mothers health status. Igg antibodies are really worthy for that and they are helpful to the others also. These antibodies are really helpful in certain years only after that it is wear off and it may leads to certain disease condition of the child too. Lack of good knowledge and positive attitude about childhood immunization was believed to be the root cause for resurgence of VPDs. Knowledge and education of mothers are very important in case of immunization. Questionnaire started with awareness of immunization criteria that is have to ask about the awareness particularly how much they are aware about the criteria. Options set are a little, moderate, very much and not at all. Generally zero to five years are preferred for immunization and five to 12 years also included because they also need immunization in special purposes or option receiving purposes. Total 255 cases have been taken for the survey. Here X 2 value detected as 25.88 and P value found as zero. 78.9% of them are higher in their income status and only 0.4% of them are fund as less than 1500. Sex distribution found as 48.2% of them were male and 51.8% of them were females. Most were SSLC qualified mothers that is 54.5%, graduates are found to be 12.5%. Sample 10.6% were not at all had awareness about immunization. 17.6% were found as very much aware about immunization. 116.

INTRODUCTION

Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by vaccination. Vaccines stimulate the body's own immune system to protect the person against subsequent infectious diseases and are estimated to avert over between 2 and 3 million deaths each year. It is one of the most cost effective health investments, with proven strategies that make it accessible to even the most hard to reach and vulnerable populations. It has clearly defined target groups; it can be delivered effectively through outreach activities; and vaccination does not entail any major lifestyle changes. Parents are constantly concerned about the health and safety of their children and they may take many steps to shield them. Vaccines work to safe guard children from illness and death caused by infectious disease. Disease prevention is the key to public health. It is always better to prevent a disease than to treat it. Vaccines facilitate to avoid infectious diseases and save lives. Vaccines are responsible for the control of many infectious diseases that were once common in this country, including polio myelitis, diphtheria, pertussis, rubella, mumps, and tetanus. Vaccine

preventable diseases have a costly impact, resulting in doctors' visits, hospitalizations, and premature deaths. For the protection of our child's immunity it is required to protect them in a while by using some protective agents like vaccines. Immune system of childhood is varied from the way of adulthood it may concerns. Childhood immunization is little bit varied from others. Many more vaccination schedules are applied for the same to continue to work in a whole. First half of the year of their health is really associated with their mothers health status. Igg antibodies are really worthy for that and they are helpful to the others also. These antibodies are really helpful in certain years only after that it is wear off and it may leads to certain disease condition of the child too. Many parents have poor understanding of vaccine preventable diseases (VPD) and many believe in false propagations about the contents, side effects and effectiveness of vaccines. Lack of good knowledge and positive attitude about childhood immunization was believed to be the root cause for resurgence of VPDs. Knowledge and education of mothers are very important in case of immunization. Is there any difference between the tribal and rural factors, economic factors and their

believes. Associated factors are considered for the same. Knowledge attitude and practice are the main factors behind every successful immunization level in the country. If we are improving the same by some arrangements of educational programs and some aids are helping for that.

MATERIALS AND METHODS

Infectious diseases are the most relevant or prevalent one in the Maternity cases. Different kinds of mortality and morbidity are reported in case of maternal life. Depression cases like posted depression and pre depression in the Maternity also very important for giving birth to a normal healthy child. Knowledge also provided good role in the case of infancy and its growth. Growth assessment there are certain rules and graphs are there to plot in between to make clear about the development. In the delivery face there are lots of information given to mother, she needed to follow the conditions. Asha workers and Anganwadi workers are more effectively more attention to the mothers and new-borns. First we have to develop an awareness to the mothers as the new-borns are healthy citizens of tomorrow. Where different National schemes are there to interpret and giving awareness to the unaware people about vaccinations. Different cultures are there in India's various sites. A cultural difference makes these attitude and changes. Early circumstances and several constraints are deliberated suggest economic criteria's, cultural ideals, caste tenets, religion wise categorization etc. All these parameters have to be corrected and these years there are almost despoiled by themselves. Healthcare professional can access these parameters by assessing the children's immunization full coverage cards during school admissions. Nowadays school admissions only possible by producing immunization coverage cards to the school authority. A pilot study has done to assess the questionnaire and the results of that study made more

valid questionnaire making and familiar questions were added to assess the same. In rural areas and tribal areas there are many differences in their attitude, behaviour and their perceptions. Tribal population are very different in their cultures their values, jobs and all everything in their lives. Cross sectional observational study. Mostly parents or caregivers of the children under the age of 0 to 12 years are selected parents or caregivers are one who makes children healthy safe and they ensure and convey cultural and other important values to their life infancy is the stage of developmental Chore. Sample is calculated according to the formula From the calculation relative Precision decide confidence level and expected proportions are calculated. Pvalue is the determinate which uses for some of the statistical data's which determined to evaluate the true value of null hypothesis value.

RESULT AND DISCUSSION

Awareness campaigns and that take place in various regions of the country it can give a huge value towards the program this is a necessary condition in veg understanding of the impacts of disease condition and disease awareness involved in the understanding of the Other medical conditions so as to be improved because the preventive Health Care technician has to be improved lack of awareness and inaccurate information sometimes affect the preventive choose goals of improving knowledge about something improve the science. Study age groups considerably distributed in to many types typically started from zero age and up to the level of twelve or fifteen. Zero age is selected for the purpose of collecting the samples variably from BCG vaccine taking purpose. Bacillae calmitte Guerin is the full form of BCG vaccination and its available in all PHCs and private sectors and general sectors. Generally this vaccine is very important in childhood.

Age	Case		Control		Total		χ^2	df	p
	N	%	N	%	N	%			
<1 years	60	23.5	43	17.1	103	20.4	25.88	5	0.000
1-2 years	74	29	51	20.3	125	24.7			
2-3 years	46	18	62	24.7	108	21.3			
3-4 years	35	13.7	48	19.1	83	16.4			
4-5 years	28	11	14	5.6	42	8.3			
>5 years	12	4.7	33	13.1	45	8.9			
Total	255	100	251	100	506	100			

In this study age distributed in to less than one year, one to two, two to three, three to four, four to five, and greater than five. Generally zero to five years are preferred for immunization and five to 12 years also included because they also need immunization in special purposes or option receiving purposes. Total 255 cases have been taken for the survey. Here X^2 value detected as 25.88 and P value found as zero.

Demographics is the variable term which is associated with the study of details of various socio cultural areas

study terms. Very different area study give various results in terms of various situations. By studying socio demographic details the income of a family is very important because in case of private sector family income and it are very predictable one and these predictions have to be followed by many of the persons. In general vaccination purpose the income of a family assisted with factors like government sector deliver which is associated with delivery of free of coast in case of government sector and of free vaccinations.

Sex	Case		Control		Total		χ^2	df	P
	N	%	N	%	N	%			
Male	123	48.2	181	72.1	304	60.1	30.07	1	0.000
Female	132	51.8	70	27.9	202	39.9			
Total	255	100	251	100	506	100			

Education	Case		Control		Total		χ^2	df	p
	N	%	N	%	N	%			
Below SSLC	0	0	12	4.8	12	2.4	154.43	3	0.000
SSLC	139	54.5	239	95.2	378	74.7			
Plus two	84	32.9	0	0	84	16.6			
Graduate	32	12.5	0	0	32	6.3			
Total	255	100	251	100	506	100			

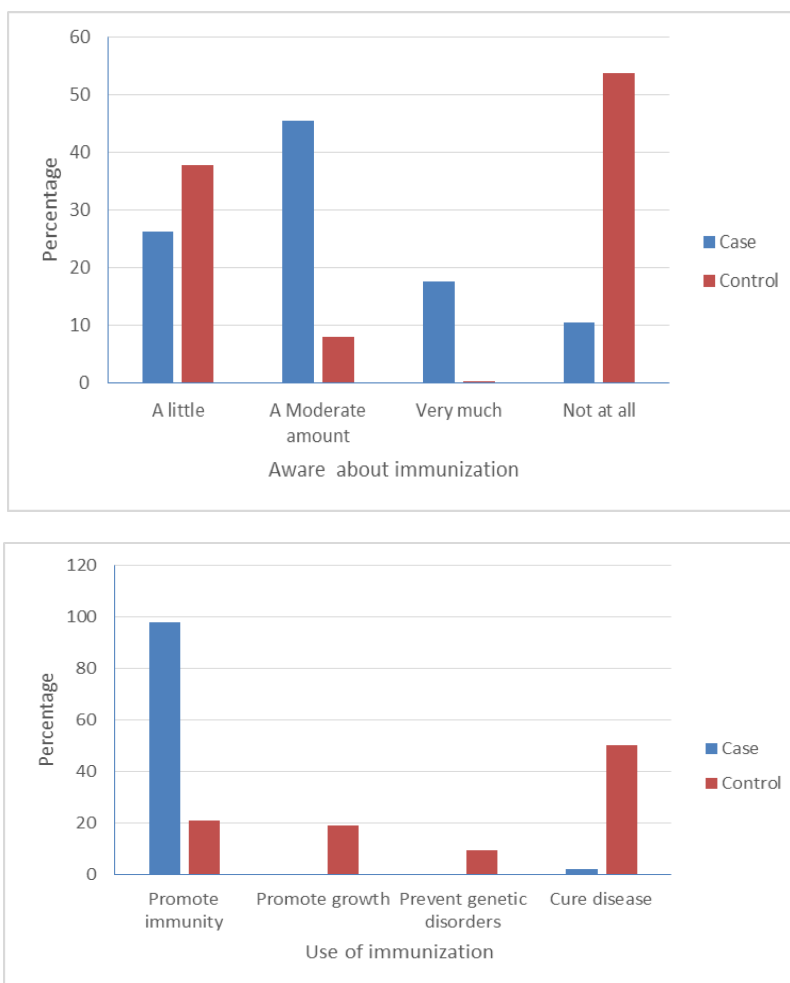
Income	Case		Control		Total		χ^2	df	p
	N	%	N	%	N	%			
<1500	1	0.4	0	0	1	0.4	5.59	3	0.134
1501-5000	38	14.9	1	100	39	15.2			
5001-10000	14	5.5	0	0	14	5.5			
>10000	202	79.2	0	0	202	78.9			
Total	255	100	1	100	256	100			

Gender distribution is the major concerns of my study. Gender mainly includes male and female. In special region of our country still encouraging all duties to the male children only because of gender inequality cases. Actually most importantly females and males are equal quality filled persons who are importantly encourage to do all activities related to all duties especially in families. Some region considerations are very different because region and custom wide very different situations are facing by different country setup. In north region especially in rural areas some kind of follow ups are there in case of gender. In that area and tribal areas they are preferably doing all too male children. Their perceptions are Very different. In some of the parents reviewed that they are giving more preference to female children because of they are the responsible one and they give birth to another generation.

Of the total 255 sample size 72.2% were employed and 27.8% were unemployed. Sometimes employment affected immunization because of lack of time and at that condition they preferably doing with their care givers. Jayant et al studied about the awareness and practice of parents about immunization and literacy rate found as high in their study. Phuken et al deliberated the urban area education level of mothers were showed significant level in the coverage of immunization. Advanced education level of women are more prevalent to improve the highest rate of children immunization. J.C Ohro et al also studied about the immunization coverage and parent occupation nature. Of the total 255 sample 10.6% were not at all had awareness about immunization. 17.6% were found as very much aware about immunization. 116 were found as moderately known about immunization. This moderation has to be improved. Only 17.6% were having very much awareness towards the immunization. General awareness has to be improved and thereby we can

improve the status of immunization. χ^2 value found as 186.67 and P value found as 0.000.

Ricco et al reported that subjects selected on their study positively behaved towards the questionnaire and mean range found as 0.0-75.0. Overall 29.9% of total sample can identify the compulsory vaccines. In contrast to their study 9.1% have only very much knowledge about the vaccination. Rawan Habib et al stated that there is a need of educational programs to effectively improve their knowledge to awards general vaccination. Ahammed addulla saleh also stated that parent's knowledge relatively affected the awareness of immunization. Similar to their studies it is proved that 9.1 % found to have very much knowledge about immunization. So there is a need of educational programs which need to be improved.



98% of samples were answered that its essential found 5% of them were answered as not essential. X^2 value found as 36.22. Essentially they were aware, but in the control study 17.9% of them were answered as not essential, it has to be improved. Anna Lewandowska et al studied about parental knowledge about vaccination that is 36% of parents had very much satisfied about the immunization schedule and had good opinion. Use of immunization is another parameter. There is a strong need in the case of relevance of this question like usefulness. The options included here are promote health, prevent from genetic disorders and prevent growth of child etc. Already questions have proven that it has to be improved in case of knowledge. Opinion cases are very different in studies.

CONCLUSION

Immunization as most prevalent procedure in most health issues like community or a disorder over laugh scenario. Of these pandemic situation the associated destructure procedures has been undertaken and these valid process. In 2021 in a worldwide calculation of 25 million children missed out over all vaccination. Since 2009 there are most number of cases in the same. W H O calculated and reported that about 80% of the infants taken diphtheria tetanus pertussis vaccination. The disease is very danger of illness which cause it is the ability of the infant's.

Including covid-19 vaccination about 25 vaccines are introduced last year. Globally sheep vaccine taken are 71% in 2021. In 2021 81 percentage of children taken first dose of measles. As a part of routine immunization second dose administration is also preferred to the schedules. Mumps is also a viral disease which affect parotid glands and sign of the disease is swelling of face side is under ears and fever headache other major symptoms. Public Health measures have to be included in the vaccination coverage weighs. Increase vaccination coverage there should be an adequate measuring strategies like improve school and three laws, submitting fulfil schedules rebuild with full immunization have to be documented. Most of the hospital have improved Health Care members who have to be monitored. Software measures also can be incorporated to check the details of articulate child in a particular Panchayath. Maternity on my own words it can be improved through constant positive counselling method. Quality improvement also and other factor which is critical one to ensure the Healthcare.

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