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THE RELATIONSHIP OF KNOWLEDGE AND ATTITUDE OF MOTHERS ABOUT BASIC IMMUNIZATION IN INFANTS 0-12 MONTHS IN THE WORK AREA HEALTH CENTER EVEN IN AUGUST WEST TOBELO SUB DISTRICT, NORTH HALMAHERA

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ABSTRACT

Background Immunization is a system the displacement of the antibodies that is done by giving the vaccine. Immunization work by stimulating the immune system is able to recognize bacteria and viruses and produce substances (antibodies) that serves to destroy bacteria and viruses. Research purposes This study aims to determine the relationship of knowledge and attitude of mothers about basic immunization in infants 0-12 months in the work area health center even in august west tobelo sub district, Nort Halmahera year 2019. This type of research using analytical survey method to view the between relationship of knowledge and attitude of mothers about basic immunization in infants 0-12 months. place of research health center kusuri. Research time march-april year 2019. Research sample 26 respondent.

Based on the results of the research relationship between knowledge and mother attitude to basic immunization to infants 0-12 months. Of the 26 respondents based on knowledge of mothers the most ie less know number of respondents 14 knowledge able enough percentage 53,85%. While the attitude of mothers towards immunization full basic the most ie agree 25 respondents with a positive attitude with the amount of the percentage of 96,15%.

The results of statistical tests (SPSS) Chi-Square of knowledge of mothers with basic immunization results show that the value of $p = 0.000$ is

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smaller than the value $p < 0,005$, and the results of statistical tests (SPSS) Chi-Square of attitude of mothers with basic immunization results show that the value of $p = 0.004$ is smaller than the value $p < 0,005$.

INTRODUCTION

Knowledge is defined as an introduction to the reality, truth, principles and rules of an object. While attitude is defined as evaluative style, feeling and tendency of reaction to the object at hand. (1)

Immunization is a passive anti-body transfer system. In this case immunization is done by giving the vaccine. Immunization works by stimulating the immune system, the system against the body's natural diseases. A healthy immune system is able to recognize bacteria and viruses and produce substances (antibodies) that function to destroy these bacteria and viruses. (2)

According to the latest immunization data from the World Health Organization (WHO) from 2014 Indonesia is included in the 10 countries with the largest number of measles cases in the world, the Indonesian Ministry of Republic health records measles and rubella in a period of 5 years very much as for cases of measles and rubella starts from 2014-2018 out of 57,056 cases. 8,964 positive for measles and 5,737 positive for rubella. Where there were 12.9 million infants nearly 1 in 10 did not receive vaccines in 2016 and an estimated 6.6 million infants who received the first dose of a vaccine containing diphtheria-tetanus-pertussis (DTP) did not complete the full DTP 3 immunization series (DTP 3) and measles in 2016. Since 2010 the percentage of children who have received routine immunizations has stopped at 86% (116.5 million babies). Without a noticeable change in any country or region in the past year. (3)

The immunization program is an effort to protect the population against certain diseases. The immunization program is given to populations deemed vulnerable to contracting infectious diseases, namely infants, school-age children, women of childbearing age, and pregnant women. Every baby must get five complete basic immunizations (LIL) consisting of: 1 dose of BCG, 3 doses of DPT, 4 doses of polio, 3 doses of hepatitis B and 1 dose of measles. Of the five complete basic immunizations required, measles is an immunization that receives more attention as evidenced by Indonesia's commitment to the scope of ASEAN and SEARO to maintain measles immunization coverage by 90%. This is related to the reality that measles is one of the main causes of death in children under five. . Measles

prevention has a significant role in reducing the under-five mortality rate. (4)

In Indonesia, immunization coverage from 2013-2018 BCG immunization (86.9%), HB immunization <7 days (83.1%), DPT-HB 2 immunization, POLIO 3 (61.3%), DPT-HB 3 immunization, POLIO 4 (67.6%) and Measles immunization (77.3%). (5)

Coverage of immunizations in infants in North Maluku province in 2016 showed that from the target number of babies as many as 21,070 babies, BCG immunization coverage (74.9%), HB immunization <7 days (66.1%), DPT-HB I immunization, immunization POLIO 1 (79.2%), DPT-HB 2 immunization, POLIO 3 (76.8%), DPT-HB 3 immunization, POLIO 4 (75.4%) and Measles immunization (77.3%), it appears that the lowest immunization coverage is hepatitis B immunization (66.1%) aged 0 months or less than 7 days, where the target coverage for complete basic immunization is 91%. (6)

Coverage of infant immunization services based on data from the Health Office in North Halmahera Regency in 2017 consisted of 148 villages with 3,348 infants, fulfilling immunization coverage of 75.5% while the target of the health service was 80% and in 2018 of 168 villages with babies 3,966 people fulfilled immunization coverage of 86.5% while the target of the health service was 83%. Where the coverage of BCG immunization (83%), HB immunization (73%), DPT-HB I immunization, POLIO 1 immunization (90%), DPT-HB 2 immunization, POLIO 3 (88%), DPT-HB 3 immunization, POLIO 4 (88%) and Measles immunization (86%). (7)

The initial data that I got from the puskesmas in 2017 was 92% complete basic immunization coverage of 156 babies. Where the coverage of BCG immunization (69%), HB immunization (22%), DPT-HB I immunization, POLIO 1 immunization (93%), DPT-HB 2 immunization, POLIO 3 (100%), DPT-HB 3 immunization, POLIO 4 (86%) and Measles immunization (91%) and in 2018 complete basic immunization coverage was 73% of 143 babies. Where the coverage of BCG immunization (57%), HB immunization (22%), DPT-HB I immunization, POLIO 1 immunization (57%), DPT-HB 2 immunization, POLIO 3 (69%), DPT-HB 3 immunization, POLIO 4 (65%) and Measles immunization (58%) (8) and preliminary data from 2019 January to March mothers who brought babies to follow basic immunizations were 26 mothers. Based on the above background, the writer is interested in taking the title of the research "Relationship of mothers' knowledge and attitudes about

the provision of complete basic immunization in infants from 0 to 12 months in the Work Area of the Public Health Center in K pure District, Tobelo Barat, North Halmahera Regency

METHODS

The method used in this study is to use analytic survey methods to see the relationship of knowledge and attitudes of mothers to complete basic immunization of infants from 0 to 12 months in the Work Area of the Public Health Center in the West Tobelo District, North Halmahera Regency. (19) instruments conducted in this study conducted interviews directly with respondents to obtain data that could support this research.

RESULTS

Overview of Research Sites

The health center is a health center in Tobelo Barat District, North Halmahera District, which was targeted in this study, with an area of 29,764 km², population, 6,629, consisting of 5 villages and 3,824 JKN participants with the following regional boundaries:

- North side, bordering the East Tobelo District.
- The south is bordered by North Kao
- West side, bordering West Kao district
- East side, bordering South Tobelo District.

Description of Research Results

This type of research uses analytical survey methods to see the relationship of knowledge and attitudes of mothers to complete basic immunization of infants from 0 to 12 months in the Work Area of the Public Health Center in the West Tobelo District, North Halmahera Regency, from 26 samples that have been collected as is, without analyzing and making conclusions that are generally accepted.

Characteristics of Respondents

Table 1. Distribution of Respondent Frequencies by age in the working area of the Puskesmas in the Kikut District, West Tobelo, North Halmahera Regency.

Age	Frequency	Percentage
18-30	18	69,23%
31-40	7	26,92%
41-50	1	3,85%
Total	26	100%

Based on the data in table 2 shows that from 26 respondents obtained the number of ages 18-30 as many as 18 people (69.23%) and 41-50 as many as 7 people (26.92%) and 41-50 as many as 1 person (3.85%) .

Table 2. Distribution of Frequency of Respondents by education level in the Work Area of the K pure Health Center in the District of Tobelo Barta, North Halmahera Regency.

Education	Frquency	Percentage
18-30	18	69,23%
31-40	7	26,92%
41-50	1	3,85%
Total	26	100%

The results of the data in table 3 show that from 26 respondents with a background of education Not Completed as many as 2 Respondents (7.70%) Primary school as much as 4 respondents (15.38%), SMP as many as 3 respondents (11.53%), SMA 14 respondents (53.85%), D3 A total of 1 respondent (3.85%) and Bachelor are 2 respondents (7.70%).

Table 3. Distribution of Frequency of Respondents by Occupational Level in the Work Area of the West Kmahe Tobelo Health Center in North Halmahera Regency.

Work	Frequency	Percentage
IRT	22	84,61%
Honor	1	3,85%
WidWife	1	3,85%
Teacher	1	3,85%
Self-employed	1	3,85%
Total	26	100%

The results of the data in table 4 show that respondents who did not work (IRT) were 22 respondents (84.61%), salaries were 1 respondent (3.85%), Midwives were 1 respondent (3.85%), Teachers were 1 respondent (3.85%), and Wiraswata with 1 respondent (3.85%).

Table 4. Distribution of Frequency of Respondents by Income per KK in the work area of PUSKUSMASKUS District, West Tobelo District, North Halmahera Regency.

Monthly Percentage	Frequency Percentage
Rp 500.000	19
Rp. 1.000.000	3
Rp > 1.000.000	4
Total	26

Based on the data in table 5. shows that from 26 respondents the amount of income per household of Rp 500,000 There are 19 people (73.09%), Rp 1,000,000 there are 3 people (11.53%) and Rp> 1,000,000 as many as 4 people (15.38%).

Table 5. Distribution of Frequency of Respondents Based on the age of infants in the Work Area of the Public Health Center in K Kecamatan District of West Tobelo, North Halmahera Regency.

Age of baby	Frequency	Percentage
0-5 Months	4	15,38%
6-1 Months	22	84,62%
Total	26	100%

The results of the data in table 6 show that respondents based on infant age 0-5 months were 4 respondents (15.38%) and 6-11 months were 22 respondents (84.62%) .The results of the data in table 5.3 showed that respondents were based on the type of immunization Complete as many as 25 respondents (96.15%) and No immunization as much as 1 respondent (3.85%).

Univariate Analysis

Univariate analysis was performed to see the frequency distribution of data from the dependent and independent variables in research on the Relationship between the level of knowledge and the attitude of the mother regarding complete basic immunization in infants 0-12 months.

Table 6. Frequency Distribution based on the level of knowledge of mothers about complete basic immunization in infants 0-12 months in the Work Area of the Public Health Center in the West Tobelo District, North Halmahera Regency.

Level of knowledge	Frequency	of Presentation
Good	7	26,92%
Sufficient	14	53,85%
Less	5	19,23%
Total	26	100%

Based on table 7 shows the relationship between the level of knowledge of mothers about complete basic immunization in infants, both 7 respondents with a presentation of 26.92%, enough 14 respondents with a

percentage of 53.85% and less than 5 respondents with a percentage of 19.23%.

Table 7. Frequency distribution based on mother's attitude about complete basic immunization in infants from 0 to 12 months in the work area of the Public Health Center in the Kikut District of West Tobelo, North Halmahera Regency.

Attitude of Respondents	Frequency of	Presentation
Positif	25	96,15%
Negatif	1	3,85%
Total	26	100%

Based on table 8 shows the mother's attitude about complete basic immunization in infants, positive 25 respondents with a 96.15% presentation, negative 1 respondent with a percentage of 3.85%.

Table 8. Frequency Distribution Based on complete basic immunization in infants from 0-12 months in the Work Area of the K pure Health Center, Tobelo Barat District, North Halmahera Regency.

Type of Immunization	Percentage	Frequency
Complete	25	96,15%
Immunization Incomplete	1	3,85%
Total	26	100%

Based on table 9 shows the complete basic immunization in infants, complete 25 respondents with 96.15% presentation, incomplete 1 respondent with a percentage of 3.85%

Table 9. Frequency distribution based on the level of knowledge of mothers about complete basic immunization in infants 0-12 months in the Work Area of the Public Health Center in the Kzur District of West Tobelo, North Halmahera Regency.

Complete basic of immunization	mother's knowledge					
	Good		Enough		Less	
	f	N	f	n	F	N
Complete	7	26,92%	14	53,85%	4	15,38%
Not complete	0	0%	0	0%	1	3,84%
Total	7	26,92%	14	53,85%	5	19,23%

Based on Table 10 shows the relationship of the level of maternal knowledge of basic immunization, good knowledge with complete basic immunization there are 7 respondents with a percentage of 26.92%, enough knowledge with complete basic immunization there are 14 respondents with a percentage of 53.85% and less knowledge with complete basic immunization 4 respondents with a percentage of 15.38%. Good knowledge with incomplete basic immunization 0%, sufficient knowledge with incomplete basic immunization 0%, and incomplete basic immunization knowledge of 1 respondent with a percentage of 3.85%.

Table 10. Frequency distribution based on the attitude of the mother regarding complete basic immunization in infants 0-12 months in the Work Area of the Public Health Center in the K Samarinda District, Tobelo Barat District, North Halmahera Regency.

Complete basic immunization	of Mother's attitude				Total	P value	
	Positive		Negative				
	f	N	f	N			
Complete	25	96,15	0	0%	25	96,15	0
Incomplete	0	0%	1	3,85	1	3,85	0
Total	25	96,15	1	3,85	26	100	0

Based on table 11 shows the mother's attitude towards complete basic immunization to infants 0-12 months, complete basic immunization with a positive attitude There are 25 respondents with a percentage of 96.15% while negative attitudes that follow a complete basic immunization There are 0 respondents with a percentage of 0% and basic immunizations incomplete with positive attitude There are 0 respondents with a percentage of 0% while negative attitudes that follow basic immunization are incomplete There are 1 respondent with a percentage of 3.85%.

Relationship of Mother Knowledge and Attitudes About Complete Basic Immunization in Infants 0-12 Months

Relationship between mother's level of knowledge and complete basic immunization. the most

knowledgeable consisting of 14 respondents with a percentage of 53.85% and the least number of mothers who carry babies following the complete basic immunization were lacking knowledge of those consisting of 4 respondents with a percentage of 15.38%.

Relationship between mothers' attitudes toward giving complete basic immunizations to infants 0-12 months, the most number of mothers who bring babies to follow basic immunizations complete with positive attitudes There are 25 respondents with a percentage of 96.15% and at least mothers who bring babies to follow immunizations in complete markets with negative attitude There are 1 respondent with a percentage of 3.85%. and it turns out this research is in line with previous studies that have never been done by Selvia Emilyya 1.23

DISCUSSION

Knowledge or cognitive is a very important domain for the formation of one's actions (overt behavior). Knowledge can also be defined as an introduction to the reality, truth, principles and rules of an object. While attitudes are defined as evaluative styles, feelings and tendencies for reactions to the object at hand.

Knowledge and attitude of mothers can be influenced by various causes including: mother's age, mother's education, mother's occupation, income per kk, and baby's age where these results can be seen from the highest achievements of the five categories of demographic data as follows:

The most frequent distribution of frequency based on maternal age is between 18-30 years with a percentage (69.23%) and the lowest is 41-50 years with a percentage (3.85%). The highest frequency distribution based on education was 14 respondents (53.85%) and the lowest was D3 with a percentage (3.85%), the highest frequency of distribution based on occupation was housewives with a percentage (84.61%) and the lowest was honorary, midwife and teacher with a percentage of 3.85%. The frequency distribution based on income per household shows that from 26 respondents, the highest amount of income per household is Rp 500,000 with a percentage (73.09%) and the lowest is 1,000,000 with a percentage (11.53%). And the results of this study are in line with research conducted by Miftahol Hudha and Atik Choirul Hidajah 21. Based on the age of most mothers among the ages of 21-30 years with a percentage (61.8%). based on the most IRT jobs with a percentage of 47.9%. The most

education is high school with 29 respondents 54%. In daily life work education and income is the main thing where that the better a person's education will make it easier for someone to get access to work and the better a person's job income increases so that it can affect the quality of one's life, where income the good can maintain the level of one's health which can easily reach health facilities in the community or other health care centers.

Distribution of frequency based on infant age of 26 respondents is 6-12 months old baby with 22 respondents (84.62%). Frequency distribution based on complete basic immunization which mostly follows complete basic immunization consists of 25 respondents with 96.15 presentations % and incomplete 1 respondent with a percentage of 3.85%. This is not in line with research conducted by Indriyati Mantang, .22 which is where those who took part in basic but incomplete immunizations are at most with a percentage of 62.5% and complete immunizations at 37.5%.

Relationship of Mother Knowledge and Attitudes About Complete Basic Immunization in Infants 0-12 Months

Relationship between mother's level of knowledge and complete basic immunization. the most knowledgeable consisting of 14 respondents with a percentage of 53.85% and the least number of mothers who carry babies following the complete basic immunization were lacking knowledge of those consisting of 4 respondents with a percentage of 15.38%.

Relationship between mothers' attitudes toward giving complete basic immunizations to infants 0-12 months, the most number of mothers who bring babies to follow basic immunizations complete with positive attitudes There are 25 respondents with a percentage of 96.15% and at least mothers who bring babies to follow immunizations in complete markets with negative attitude There are 1 respondent with a percentage of 3.85%. and it turns out this research is in line with previous studies that have never been done by Selvia Emilya 1.23

CONCLUSION

Based on the results of the study above, the researcher can conclude that there is a significant relationship between maternal knowledge in giving complete basic immunization where the Chi-Square statistical test results in knowledge of mothers with complete basic immunization obtained values ($p = 0,000 < 0.05$). Then the null hypothesis is rejected and alternative hypotheses are accepted.

Based on the results of the study above, the researcher can conclude that there is a significant relationship between maternal attitudes in giving complete basic immunizations where the Chi-Square statistical test results in knowledge of mothers with complete basic immunization obtained values ($p = 0.004 < 0.05$). Then the null hypothesis is rejected and alternative hypotheses are accepted.

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