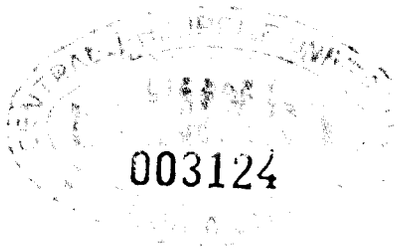
IMMUNIZATION STATUS OF UNDER FIVE CHILDREN: THE INFLUENCE OF KNOWLEDGE AND ATTITUDE OF CAREGIVERS IN SELECTED BARANGAYS IN ROXAS CITY



A Thesis

Presented to
The Faculty of the College of Nursing Graduate Programs
Central Philippine University

In Partial Fulfilment
of the Requirements for the Degree
MASTER OF ARTS IN NURSING

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APRIL 2016

CHAPTER I

INTRODUCTION

Background and Rationale of the Study

Immunization services provided by the government through its prime mover- the Department of Health (DOH) is a significant act to combat common health threats especially the newborn. With its constant utilization, the government assumed lesser mortality and better life for all children. Through the launch of the Expanded Program on Immunization (EPI) in 1986, the government envisioned to have ninety-five percent (95%) coverage of routine immunization among children especially those aging zero to five years of age. It was also emphasized that follow-up campaigns should be needed to every barangay to guarantee full and sustained protection for children (Duque, 2007).

Immunization has not yet realized its full potential, however. As of end-2013, 21.8 million children under 1 year of age worldwide had not received the three recommended doses of vaccine against diphtheria, tetanus and pertussis containing vaccine (DPT_3), and 21.6 million children in the same age group had failed to receive a single dose of measles-containing vaccine. Given an estimated annual cohort of 133.6 million surviving infants, an additional 11.2 million children would need to have been reached during 2013 to attain 90% DPT_3 coverage globally. (http://data.unicef.org/child-health/immunization.html May, 2015)

According to the World Health Organization, there is an estimated 1.4 million deaths among children under five years of age due to diseases that could have been prevented by routine vaccination such as Measles, neonatal Tetanus, Polio, and Hepatitis-

B. This represents fourteen percent (14%) of global total mortality in children under five years old (WHO, 2012).

In the Philippines, six of ten children 12-23 months (62 percent) were fully immunized; that is, they received the seven basic vaccinations before their first birthday. More than 90 percent of the children received BCG, DPT1, polio1 and Hepa-B1. The proportion of children receiving the third dose of DPT, polio and Hepa-B is lower (85 percent, 83 percent and 74 percent, respectively) as is the proportion receiving the measles vaccination (78 percent). Coverage is lowest for H. Influenza type B (HIB), with only 33 percent given. (NDHS, 2013)

In western visayas, it is noted that the coverage of vaccination of BCG is 99 percent, DPT 1 – 96.9 percent, DPT 2- 92.9 percent, DPT 3 – 89.8 percent, Polio – 96.9 percent, Hepa B – 95.9 percent, and Measles – 85.2 percent.(NDHS, 2013) Although this is an indication of high immunization coverage, there is still a portion of the population who were not fully immunized.

In the province of Capiz, particularly in the City of Roxas, records of the local City Health Unit show that there is a drop in the immunization rate among children. In 2011, Barangay Adlawan has only 27 fully immunized children, way too low from their target which is sixty (60) per year (45percent). In addition, in one Barangay, there were only seventeen (17) children who were fully immunized while their target is thirty (30) beneficiaries (56 percent). The same case happens in Roxas City where there are sixty six (66) beneficiaries, only twenty three (23) (35 percent) achieved a full immunization process. In 2012, 3,509 out of 4,347children (80.72 percent) were fully immunized, leaving 838 children not receiving full immunization. In the following year (2013), 3,773

out of 4,487 children (84.09 percent) were fully immunized. And in 2014, out of 4,596 children, there were 3,739 children (81.98 percent) were fully immunized, leaving 857 children who were not fully immunized. (City Health Office of Roxas, 2015). This data of the City Health Unit shows that despite of the rate expectancy of EPI among its target beneficiaries in the National level, many localities such as Roxas City experience a lower turnover, which means many children are not yet fully immunized. This further revealed that even with the existing effort by the government to provide programs such as the EPI or free immunization, there are still many mothers/caregiver who failed to effectively comply with the implemented immunization plan.

Republic Act 10152 which is known as the "Mandatory Infants and Children Health Immunization Act of 2011, signed by the President Benigno C. Aquino III in July 26, 2010. The law includes basic immunization for children under five years of age, including other types that will be determined by the secretary of health. Specifically, this bill provides for all infants to be given the birth dose of the Hepatitis B vaccine within 24 hours of birth.

The Department of Health (DOH) has launched a program entitled "Expanded Program of Immunization" which has a major goal of decreasing the mortality and morbidity among children against the most common vaccine preventable diseases. Specifically, this program aims to: immunize all infants and children against the most common vaccine preventable diseases; sustain the Polio free status of our country; eliminate Measles infection; eliminate maternal and neonatal Tetanus; control Diptheria, pertussis, Hepatitis-B and German Measles and lastly; to prevent extra pulmonary Tuberculosis among children.

The said program focused on three strategies which include: 1.) Reaching every barangay (REB) strategy- which aims to decrease drop-outs among children vaccinated, 2.) Supplemental Immunization Activity (SIA), and lastly, 3.)Strengthening Vaccine-Preventable Diseases Surveillance.

Despite of the massive campaign by the Philippine government where they allocated a large sum of money (1.8 billion pesos) against these vaccine preventable diseases for the immunization of all infants, children, women, and older persons nationwide, still the problem exists. This might be due to poor maternal care, inequity and diminishing health human resource. Another factors that could be considered are poor compliance to laws and policies, fragmented local health delivery system and lack of understanding of the disease process and its severe effect. Moreover, they might be unaware that everyone is vulnerable in acquiring this disease.

Fighting measles was a real battle in the Philippines in 2014 with the final measles tally on the archipelago at 58,010 cases, according to the World Health Organization (WHO). This includes 110 people who lost their lives to this**very contagious virus.** This represented a nine-fold increase in cases in the Philippines compared to 2015, when the total cases were 6,497 and 26 deaths. The measles outbreak prompted Philippines health officials to institute a mass vaccination campaign last fall, **Ligtas sa Tigdas**, in an effort to get the outbreak under control.For the first nine months of 2015, the Philippines has only seen 3,052 cases and three deaths. Much of this can likely be attributed to mass measles vaccination campaignsin September and October of 2014.http://outbreaknewstoday.com (Posted by Robert Herriman)

A high percentage of immunization was observedin some areas like Western Visayas (Region VI) which ranges from 85-95% to all vaccine-preventable diseases and is almost on the level of envisioned target of the Department of Health. It is notable that among the seven recommended vaccines measles has lowest percentage. In Roxas City as of 2015 there were only 82 percent who are fully immunized which is quite low to the said target percentage. Furthermore, in the Barangay level which is too low to the DOH target of Fully Immunized was noticed which rangesonly from 35 percent to 56 percent. For every single percentage of miss out immunization means a life at risk (risk of having the disease and a risk of death among children).

Despite of many studies about immunization a low compliance still prevails. Thus, it is the intention of this study to find out how knowledge, and attitudeof caregivers influence the immunization status of their children at selected barangays in Roxas City, Capiz.

Objectives of the Study

This study aimed to determine the immunization status of under five children and the influence of knowledge and attitude of caregivers in selected barangays inRoxas City. The study further determined the relationship between selected personal characteristics and the caregivers knowledge and attitude towards immunization and the immunization status of their under five children.

Specifically, this study aimed to:

1. determine the personal characteristics of the caregivers' in terms of age, sex, civil status, educational attainment, and monthly income;

2. determine caregivers' level of knowledge about Immunization;

3. determine caregivers' the attitude towards Immunization ;

4. determine the immunization status of caregivers' of children;

5.determinewhether there is a significant relationship between the caregivers' personal characteristics and their knowledge about immunization;

6. determine whether there is a significant relationship between thecaregivers' personal characteristics and their attitude towards immunization;

7. determine whether there is a significant relationship between the caregivers' personal characteristics and the immunization status of their children;

8. determine whether there is a significant relationship between the caregivers' knowledge about immunization and the immunization status of children;

9.determinewhether there is a significant relationship between the caregivers' knowledge and attitude on immunization; and

10. determine whether there is a significant relationship betweenthecaregivers' attitude and the immunization status of respondents' children.

11. determine whether there is a significant relationship betweenthecaregivers' knowledge and the immunization status when attitude is controlled.

Hypotheses of the Study

The following hypotheses were tested in this study:

1. There is no significant relationship between the personal characteristics of caregivers according to age, sex, civil status, educational attainment, and monthly income and level of knowledge;