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ORIGINAL ARTICLE



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Level of Immunization Among 0-5 Years of Children's

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ABSTRACT

The population continues to underutilize the most popular and cost-effective public health intervention, immunization. Knowing that over 2 million children still lose their lives to diseases for which vaccines are easily accessible at a very low cost is incredibly heartbreaking. The study's Holy Grail is to link parental awareness, behaviour, and child vaccine coverage. When a couple becomes parents for the first time, the cost of childhood vaccinations or immunizations can seem tremendous. In addition to safeguarding the child from various illnesses including polio, tetanus, and diphtheria, vaccinations also keep the other children healthy by lowering the prevalence of illnesses that can be passed from child to child. Vaccination coverage is a secondary way to assess child health care from the perspective of public health because there are numerous immunization campaigns done annually to raise awareness about the spread of children diseases. Nearly 80% of parents are unaware that not all vaccines are offered as part of the national programme and that some vaccines are given as part of the immunization schedule and must be taken in addition to the regular immunizations. To assess the level of immunization status among 0-5 years of children's visiting to selected Primary Health Centre, Pashan, Pune City. Quantitative Research Approach was used, in this study The samples were selected using Non Probability Purposive Sampling technique. The study findings depicts that majority of doses of vaccination taken were of BCG and Hepatitis B vaccine which is 100%, also majority of 90% of children were vaccinated with all 3 vaccines at time of birth. Around 16.67 % of doses were missed by the children and majority of 70% of PVC vaccine was completed. Also 100% of polio vaccine, majority of 83.33% of HIB vaccine were completed by the children of 0-5 years. Majority of 80 % of children didn't show any side effects and about 93.33% of mothers believed giving vaccine to child at birth is need as well as beneficial for good health status

KEY WORDS: level, Immunization, Children's

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INTRODUCTION

The population continues to underutilize the most popular and cost-effective public health intervention, immunization. Knowing that over 2 million children still lose their lives to diseases for which vaccines are easily accessible at a very low cost is incredibly heartbreaking. The study's Holy Grail is to link parental awareness, behaviour, and child vaccine coverage. When a couple becomes parents for the first time, the cost of childhood vaccinations or immunizations can seem tremendous. In addition to safeguarding the child from various illnesses including polio, tetanus, and diphtheria, vaccinations also keep the other children healthy by lowering the prevalence of illnesses that can be passed from child to child [6, 7].

Vaccination coverage is a secondary way to assess child health care from the perspective of public health because there are numerous immunization campaigns done annually to raise awareness about the spread of children diseases. Nearly 80% of parents are unaware that not all vaccines are offered as part of the national programme and that some vaccines are given as part of the immunization schedule and must be taken in addition to the regular immunizations [3].

Giving a person or child a vaccination to stave off disease is known as immunizing them. Immunity (protection) acquired through immunization is comparable to immunity acquired from exposure to disease, except that you receive a vaccine as opposed to the actual disease. This is why vaccines are such effective medical treatments. The majority of vaccines are administered via needle (injection), although some are also administered orally or via nasal spray (nasally). Your body is deceived into believing it has the disease when you receive an immunization. It produces antibodies that kill the microorganisms. These antibodies endure a long period in your body and retain their memory of how to combat the pathogen [4, 5].

As of March 2015, India reported 33,761 flu cases and 2035 fatalities. The worst hit states are Gujarat and Rajasthan. Between December 2014 and May 2015, 266 pregnant North Indian women experienced febrile ARI, and 50 of them (18.8%) had positive influenza tests (A/H1N1pdm09 in 41, A/H3N2 in 8, and

influenza B Yamagata in 1). According to a study, influenza viruses significantly increase the risk of morbidity and mortality in North Indian pregnant women with ARI. Influenza infection may result in preterm delivery or abortion [1].

In the future, if the disease's germs get into your body, the antibodies will kill them so you won't get sick. After receiving the vaccine, the majority of people are completely immune to the illness. Rarely, those who have received the vaccination may still get the illness because the vaccine only offers a minimal level of protection. People with immune system-related medical disorders are more likely to experience this^{4,5}. The most important method for protecting children and future generations from the spread of infectious diseases is still vaccination. Being immunized in a timely manner contributes to the eradication of diseases that could spread in the present and in the future. The person is safeguarding not only himself but also other community members by making sure that family members and themselves are immunized and by adhering to the immunization schedule established by the American Government. More vaccinations mean fewer infections and a lower risk of disease spread [7, 9]. To assess the level of immunization status among 0-5 years of children's visiting to select Primary Health Centre, Pune City.

MATERIAL AND METHODS

Quantitative Research Approach was used, in this study.

Sampling Technique in the study was: Non Probability Purposive Sampling technique

Setting: Primary health center of Pune

Sample size was 30.

INCLUSION CRITERIA

Children aged range between 0-5 years

Willing to participate

EXCLUSION CRITERIA

Non voluntary for participation

Unable to provide the data

The tool was developed by referring journals, articles, books and was modified to the researcher's interest and the expert's opinions.

Description of the Tool

The tool had Structured Questionnaire and Likert scale and the tool has been divided into four sections -

Section A: Demographic Data

Section B: Structured Questionnaire on Level of immunization

RESULT

The result was divided in II Sections:

Organization of the study findings

Section I: Distribution of demographic variables of mothers of 0-5 years of children.

Section II: Level of Immunization status of 0-5 years of children in terms of frequency and percentage.

Section I

Table 1: Distribution of demographic variables of mothers of 0-5 years of children. N=30

Age		Frequency	Percentage (%)		
a	0-1 years	9	30%		
b	2-3 years	13	43.33%		
С	4-5 years	8	26.67%		
Weight		Frequency	Percentage (%)		
a	Normal	25	83.33%		
b	Overweight	1	3.33%		
С	Low	4	13.33%		
Siblings		Frequency	Percentage (%)		
a	1	12	40%		
b	2	6	20%		
С	No Siblings	12	40%		
Type of Delivery		Frequency	Percentage (%)		
a	Normal	18	60%		
b	Emergency cesarean	4	13.33%		
С	Elective cesarean	8	26.67%		

Type of Family		Frequency	Percentage (%)	
a	Joint Family	18	60%	
b	Nuclear Family	10	33.30%	
С	Single Parent Family	2	6.67%	
Age	of the mother at the time of	Frequency	Percentage (%)	
	delivery			
a	18-20 years	3	10%	
b	21-23 years	11	36.67%	
С	24-26 years	6	20%	
	Health Status of Baby	Frequency	Percentage (%)	
a	Healthy	30	100%	
b	Unhealthy	0	0%	
С	On Medications	0	0%	
	Mother Education Status	Frequency	Percentage (%)	
a	Secondary	7	23.33%	
b	Higher Secondary	14	46.67%	
С	Graduate	9	30%	

SECTION II

Analysis of level of Immunization status of 0-5 years of children in terms of frequency and percentage.

Table II: Description of level of immunization of 0-5 years of children in terms of frequency and percentage. N=30

percentage. 14-50								
QUESTIONS	Frequency	Percentage (%)	Frequency	Percentage (%)				
BCG vaccine is done for your child	30	100 %	0	0 %				
Have your child taken complete dose for HEP-B vaccine?	30	100%	0	0 %				
Have your child taken all the 3 vaccines at the time of birth?	27	90%	3	10 %				
Did your child miss any dose of vaccine	5	16.67%	25	83.33%				
Have your child taken a complete dose of PVC?	21	70%	9	30 %				
Did your child had any side effect of the taking complete dose of vaccines?	6	20%	24	80 %				
Have your child taken complete dose of polio virus vaccine?	30	100%	0	0 %				
Have your child complete dose of HIV?	25	83.33%	5	16.67 %				
Giving vaccine to a child at birth time is good?	28	93.33%	2	6.67 %				
Are you aware about the vaccine chart that should be given to your child during the age of 0-5 years?	25	83.33%	5	16.67 %				

The above table depicts that the majority of doses of vaccination taken were of BCG and Hepatitis B vaccine which is 100%, also majority of 90% of children were vaccinated with all 3 vaccines at time of birth. Around 16.67 % of doses were missed by the children and majority of 70% of PVC vaccine was completed. Also 100% of polio vaccine, majority of 83.33% of HIB vaccine were completed by the children of 0-5 years. Majority of 80 % of children didn't show any side effects and about 93.33% of mothers believed giving vaccine to child at birth is need as well as beneficial for good health status

DISCUSSION

A cross-sectional study was conducted in Togo on incomplete immunization among kids between the ages of 12 and 23 months. There were 1261 total samples studied during the study, the majority of which were women. After adjusting for both individual and contextual level variables, the percentage of children with

complete immunization coverage was 72.3 percent. Children whose mothers had completed secondary school or higher were 33 percent less likely to have incomplete immunization coverage than children whose mothers had no education [2].

Another survey done on the Determinants of complete immunization among senegalese children aged 12–23 months: evidence from the demographic. There were 2199 kids in the analysis, ages 12-23 months. Based on information from vaccination cards or maternal recollection, the interviewers gathered data on vaccine uptake. The factors that influence receiving all recommended vaccines for children were determined using both univariate and multivariate logistic regression models. Based on information from vaccination cards and mothers' memories, the prevalence of full immunization coverage among boys and girls was 62.8 percent. 37.5 percent of people had had all the vaccinations shown on their vaccination cards. Three doses of the pentavalent vaccine, the third dosage of the polio vaccine, and the first dose of the measles vaccine all had specific coverage rates of 94.7 percent, 72.7 percent, 82.6 percent, and 82.1 percent, respectively. We discovered that mothers who could present a vaccination card. The factors that were associated with full childhood immunization were having at least a secondary education having four antenatal visits 3.10 95 percent, and having been born in a medical facility. Additionally, children were less likely to be fully immunized if they resided in the eastern administrative districts of the nation. Hence the investigator has concluded that, the country's (more than 80 percent) and the world's targets for full vaccination coverage among children between the ages of 12 and 23 months were not met (90 percent). Full immunization was linked to geographic location, mother's features, prenatal care, and access to medical resources. These results underline the need for creative approaches built on a comprehensive strategy to remove the obstacles to infant immunization in Senegal [3].

CONCLUSION

Innovative tactics, such as the use of electronic cards and stepping up sensitization campaigns, must be implemented in order to meet the national objective of 90 percent coverage in the area of immunization.

Ethical Aspects of the stud

- ➤ The study was sanctioned by the ethical committee of the institution
- Permission from the concern authority of college and primary health center was obtained
- > Study was explained to the participants and informed consent was taken from the participants.

Any Conflict of Interest: Nil

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