

RELATIONSHIP BETWEEN PARENTAL ATTITUDES AND THE COMPLETENESS OF BASIC IMMUNIZATION IN CHILDREN AGED 9 - 24 MONTHS AT SIANTAN SELATAN PUBLIC HEALTH CENTER YEAR 2024

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ABSTRACT

The background of the research is the Decline in Complete Basic Immunization Achievement at the Siantan Selatan Health Center, if this continues to occur it will have an impact on children's health. The purpose of the study was to analyze the relationship between parental attitudes and the completeness of basic immunization in children aged 9-24 months at the Siantan Selatan Health Center in 2024. The research design used an analytical survey with a cross-sectional study approach. The population is all parents who have children aged 9-24 months who meet the inclusion criteria, with a sample population of 50 respondents. The sampling technique used the purposive sampling technique. Data collection using questionnaires and observation sheets. Univariate analysis with frequency distribution, with the results of the study, namely the majority of parents have a good attitude towards complete basic immunization, namely 25 people (50%) and the least attitude of parents is lacking with a total of 11 people (22%). In the basic immunization completeness variable, the majority of parents who became respondents did not complete basic immunization in children, namely 30 (60%), the rest completed complete basic immunization 20 (40%). And bivariate analysis using the Chi Square statistical test, with a P value of $0.000 < 0.05$, the conclusion is that there is a significant relationship between parental attitudes and the completeness of basic immunization in children aged 9-24 months at the Siantan Selatan Anambas Health Center in 2024. It is hoped that parents will be more active in seeking information about basic immunization that should be given to children so that there are no more children who do not complete basic immunization.

Keywords: Immunization, Parental Attitudes, Completeness of Basic Immunization.

INTRODUCTION

Every year 1.5 million children die from diseases that can be prevented by immunization according to the World Health Organization (WHO). The infant and toddler mortality rate in Indonesia is very high, which causes a decline in the level of Public Health (Haya & Destariyani, 2020). One form and effort in preventing neonatal, infant and toddler deaths is through immunization carried out by health workers or health services. There are approximately 20 million children who do not receive complete immunization and some children do not receive any immunization at all. Indonesia is one of the countries where the number of toddlers does not receive complete immunization (Ministry of Health of the Republic of Indonesia, 2019).

The high mortality rate in infants and toddlers requires government involvement at the national level, namely by supporting and maintaining supervision of this Immunization program. In order to reduce the mortality rate in infants and toddlers, and this program continues to be promoted by the government. Immunization is one of the preventive measures in improving the health status of the community which is given and started since the baby is born. Infant health services are standard services by health workers which are carried out at least 4 times a year, namely the first at the age of 29 days, - 3 months, once at the age of 3-6 months, once at the age of 6-9 months, and once at 9-11 months (Ministry of the Republic of Indonesia, 2011).

Immunization is one type of effort made to provide immunity to children by inserting vaccines into the body to create

anti-substances to prevent certain diseases, while the vaccine itself is a material used to stimulate the formation of anti-substances, which are injected into the body (Mahayu, 2014). One of the goals of immunizing babies is to avoid diseases in toddlers that can be prevented by immunization (PD3I). The purpose of immunization is so that diseases (PD3I) can be prevented by immunization to the maximum (Healy et.al, 2014).

This disease can be suppressed and eliminated by providing complete immunization in the community environment. Complete basic immunizations given are Hepatitis B, BCG, DPT, polio, and measles. This immunization must be given appropriately and adjusted to the age of the baby, so that the vaccine given forms immunity in the baby's body to prevent PD3I diseases including hepatitis B, tuberculosis, polio, diphtheria, pertussis, tetanus, and measles.

Immunization programs have proven effective in controlling diseases, this program can be effective if supported by quality services, starting from services at health centers, village health posts and health posts as well as other private services. The Ministry of Health targets that in 2014 all villages and sub-districts will reach 100% UCI (Universal Child Immunization) or 90% of all babies in the villages and sub-districts will receive complete basic immunization consisting of BCG, Hepatitis B, DPT-HB-Hib, Polio and measles.(Linni Susila Harianja et al., 2022)

Based on data taken from the Basic Immunization Coverage Figures in Indonesia itself, it can be shown from the

number of toddlers who have not received basic immunization, namely from 26.4 million toddlers in Indonesia, 3.9 million or around 14 percent of them have not received basic immunization. Immunization achievement reported by the Ministry of Health increased in 2019 by 93% (Ministry of Health, 2022). Judging from the Renstra target, complete basic immunization coverage in Indonesia has not met the target of the Ministry of Health's Strategic Plan (Renstra). In 2020, the national basic immunization coverage was 83.3%. This figure has not met the 2020 Renstra target of 92.9%. Complete basic immunization coverage in 2020 was the lowest complete basic immunization coverage in the period 2011-2020 as an impact of the COVID-19 pandemic (Ministry of Health of the Republic of Indonesia, 2020).

In the Riau Islands Province, the Achievement of the Percentage of Ages 0-11 Months Who Received Complete Basic Immunization has decreased from the Previous Year. In 2022, the achievement of Complete Basic Immunization (IDL) was 92.5% of the target of 90%, while in 2023 it was 73.69% of the target of 100%. From the Population Control and Family Planning Health Service of Anambas Islands Regency in 2024, the percentage of complete basic immunization achievement was only 12.42% of the target of 100%, and the percentage of children aged 12-24 months who received complete toddler follow-up immunization was only 21.16% of the target of 100%. Immunization coverage data obtained from the Siantan Selatan Health Center was 70.5% in 2023 and in

2024 it was 9.23%, the last data was taken in May 2024.

The results of this immunization achievement were obtained from the Siantan Selatan Health Center, which is located on small islands in the Siantan Selatan sub-district. Many factors affect the achievement of immunization, including the fact that many parents still refuse to immunize their children due to the lack of parental awareness of the importance of immunizing their children, even though they have been educated.

From the results of the researcher's interview with 5 parents of children aged 9-24 months who did not receive complete and timely basic immunization, several factors were obtained, one of which was that parents were reluctant to bring their children to the integrated health post and refused to be immunized for various reasons such as 3 mothers who said that if their child was injected, the child would become fussy and the child's father could not sleep/rest and they felt disturbed, so the father did not allow his child to be immunized again. While 2 mothers said that the grandmother/grandfather of their child did not give permission for their grandchild to be injected because they felt disturbed if their grandchild was fussy. The attitude of parents who do not want their child to have a fever after immunization is the same as Pratiwi Sulistiyan's research which said that the reason parents do not give immunizations to their children is because of other people's experiences about children who are still sick even though they have been immunized, even they get information that the vaccine used contains non-halal ingredients.

From the attitude of parents who do not want to provide complete basic immunization to their children, this is what makes the achievement of immunization in the South Siantan Health Center decrease. This problem is in line with research that has been conducted by other researchers in various places, namely;

From the research results, it was found that respondents who had a negative attitude towards basic immunization were 23 (45.1%) respondents, while respondents who had a positive attitude towards basic immunization were 28 (54.9%) respondents. In psychology, attitude refers to a series of emotions, beliefs and behaviors towards certain objects, people, things or events. Attitudes are often the result of experience or education, and attitudes can have a strong influence on behavior. Attitude is a person's closed response to a stimulus or object, either internal or external, so that its manifestation cannot be seen directly, but can be interpreted first from the closed behavior. (Apriyani & Noviyani, 2024).

The results of this study are in line with research conducted by Talib & Albar (2021), on the analysis of factors in providing complete basic immunization to infants which showed that 94.3% of respondents had a positive attitude. The results of this study are also in line with research conducted by Nugrawati (2019) on the relationship between knowledge and attitudes towards complete immunization in toddlers which showed that 77.5% of respondents had a good attitude. According to the researcher's assumption, the positive attitude of

respondents towards providing basic immunization in this study was related to the respondents' knowledge of basic immunization. Attitude is a person's tendency to act, think and perceive which is formed from personal experience, culture, knowledge and others.

Based on research conducted by Kartika (2021), the level of maternal behavior regarding immunization shows that mothers who have a good level of behavior are 81% (22 people) compared to mothers who have a sufficient level of behavior which is 19% (5 people), there are no mothers with bad levels of behavior. the manifestation of behavior can be through knowledge and attitudes, but an attitude is manifested in action. Thus, these results are in line with Lawrence Green's 1980 theory which states that behavior is influenced by predisposing factors, including knowledge, in addition to knowledge, attitudes, values, culture and beliefs of parents.

Judging from several opinions and research results above, several factors that cause incomplete basic immunization are the influence of parental age, level of knowledge, education, trust, and family support, and parental attitudes. The decline in the achievement of complete basic immunization at the Siantan Selatan Health Center that researchers found was the many attitudes of parents who refused to immunize their children, if this continues to happen it will have an impact on the achievement of immunization in the following year and affect children so that strong antibodies are not formed and children will be

susceptible to diseases that can be prevented by PD3I.

In the South Siantan Health Center, there has never been a study related to the Relationship between Parental Attitudes and the Completeness of Basic Immunization in Children Aged 9-24 Months. Based on the data above, the researcher decided to conduct a study on "The Relationship Between Parental Attitudes and the Completeness of Basic Immunization in Children Aged 9-24 Months at the South Siantan Health Center, Anambas in 2024.

RESEARCH METHODS

This research was conducted in South Siantan Anambas Health Center, WR Soepratman Street, Gunung Kuak, Airbini Subdistrict, South Siantan District, Anambas in July - August 2024. This study uses a research design analytical survey by using a cross-sectional study approach. The population in this study amounted to 57 respondents. Samples were taken using Purposive Sampling is sampling technique from population members that is carried out randomly without paying attention to the strata in the population. The number of samples in this study was 50 people.

The independent variable in this study is the attitude of parents. Whereas The dependent variable in this study is Basic Immunization Completeness. The instrument in this study used a questionnaire for respondents.

Data analysis using univariate analysis to determine the frequency distribution of independent or dependent variables and bivariate analysis to see the relationship between independent and dependent variables. Data analysis was

processed using SPSS version 27 with the test Chi Square. This study used data collection techniques that included 3 stages, namely preparation, implementation and final stage.

RESULTS AND DISCUSSION

1. Research result

Based on the research results entitled The Relationship Between Parental Attitudes and Completeness of Basic Immunization in Children Aged 9-24 Months at the Siantan Selatan Anambas Health Center in 2024". Respondent frequency distribution data was obtained based on the research results, as follows:

A. Univariate Analysis

In this study, there are two characteristics of respondents, namely age, gender, occupation, education and age, as shown in the following table:

Table 4.1
Frequency distribution of respondents based on characteristics Respondents at the Health Center South Siantan. N=50

Pekerjaan	F	%
Bekerja	38	76%
Tidak Bekerja	12	24%
Total	50	100%
Pendidikan	F	%
SD	5	10%
SMP	13	26%
SMA	18	36%
PT	14	28%
Total	50	100%
Umur anak	F	%
9 - 12 bulan	7	14%
13 - 16 bulan	19	38%
17 - 20 bulan	13	26%
21 - 24 bulan	11	22%
Total	50	100%

In Table 4.1 Distribution of respondents based on Employment Level shows that the highest employment level is working as 38 people (76%) and the lowest employment level is not working as 12 people (24%). In the frequency distribution of Education shows that the Education group as the highest High School Education group is 18 people (36%) and the Elementary School Education group as the lowest Education group is 5 people (10%). In the frequency distribution shows that the majority of parents who are respondents have babies aged 13 - 16 months, namely 19 people (38%), and the lowest with the age of 9 - 12 months, namely 7 people (14%).

Table 4.2
Frequency Distribution Based on
Parents' Attitudes about Basic
Immunization
Complete N=50

Sikap	N	Persentase (%)
orang tua		
Baik	25	50%
Cukup	14	28%
Kurang	11	22%
Total	50	100%

Table 4.2 shows that the majority of parents who were respondents had a good attitude towards complete basic immunization, namely 25 people (50%) and the fewest parents had a poor attitude with a total of 11 people (22%).

Table 4.3
Frequency Distribution Based on
Completeness of Immunization
Complete Basics N=50

Kelengkapan Imunisasi	n	Persentase (%)
Lengkap	20	40
Tidak lengkap	30	60
Total	50	100

Table 4.3 shows that the majority of parents who responded did not complete basic immunization for babies, namely 30 (60%), the rest completed complete basic immunization.

B. Bivariate Analysis

Bivariate analysis is used to identify the relationship between two variables, namely the independent variable and the dependent variable. In this analysis, two measurements are taken for each observation. In bivariate analysis, the samples used can be paired or independent with their treatments. Bivariate analysis is a type of analysis that is used according to the conditions of the number of variables. This seemingly simple analysis can produce a very useful test. Bivariate analysis in this study aims to determine The Relationship Between Parental Attitudes and Completeness of Basic Immunization in Children Aged 9-24 Months at the Siantan Selatan Anambas Health Center in 2024. The statistical test used is the chi-square test.

Table 4.4
The Relationship between Nurse
Performance and Patient
Satisfaction

		Kelengkapan Imunisasi				Total	<i>p- value</i>	
		Dasar						
		Tidak Lengkap		Lengkap				
		n	%	n	%	n	%	
Sikap Orang Tua	Kurang	11	22%	0	0%	11	22%	0,000
	Cukup	14	28%	0	0%	14	28%	
	Baik	5	10%	20	40%	25	50%	
Total		30	60%	20	40%	50	100%	

The results of the chi-square test showed that there was a relationship between parental attitudes and complete basic immunization in children aged 9-24 months at the Siantan Selatan Anambas Health Center in 2024, showing a significant value of $p = 0.000$, a value of $P < \alpha$ where $P < 0.05$ can be interpreted that H_a is accepted, which means that there is a relationship between parental attitudes and complete basic immunization in children aged 9 - 24 months at the Siantan Selatan Anambas Health Center in 2024.

DISCUSSION

In the discussion of this research, it is adjusted to the existing theory and compared with the reality found in the field. The results of this study are made according to the variables studied.

a. Parental Attitude

Based on the research results, it shows that the percentage of parental attitudes shows that the majority of parents who were respondents had a good attitude towards complete basic immunization, namely 25 people (50%) and the fewest parents had a

poor attitude with a total of 11 people (22%).

Attitude is a tendency of a person's response to a stimulus or an object. According to (Arifin, 2014) attitude is a tendency of behavior to do something with a certain method, technique and pattern towards the surrounding world, either in the form of people or certain objects.

Attitude is a person's tendency to act, think and perceive which is formed from personal experience, culture, knowledge and others. Attitude is often the result of experience or education, and attitude can have a strong influence on behavior. Attitude is a person's closed response to a stimulus or object, either internal or external, so that its manifestation cannot be seen directly, but can be interpreted first from the closed behavior. (Apriyani & Noviyani, 2024).

Attitude is a learned tendency to respond in a consistently favorable manner to a particular object. If we have a positive attitude about our work, we will automatically work longer. Attitudes drive us to perform in specific ways in specific contexts. Which means that attitudes influence behavior at different levels (Wibowo, 2013). Individual attitudes have significant significance in the decision-making process, especially in the context of ensuring that children receive comprehensive basic immunization. Changing individual attitudes is also a complex task.

From the results of the study, related theories and events that

apply in the field, here the researcher assumes that education, work experience and age of children affect the way of thinking and behaving and how a person's ability to receive information so that the person is able to behave according to the information and knowledge he gets, where it can be concluded by the researcher the attitude of parents in this study when answering the questions given, the majority of mothers answered that they would provide immunization according to the schedule that has been set, this is a good attitude even though it will interfere with the parents' activity schedule, but parents prefer to provide immunization according to the schedule given.

b. Completeness of Basic Immunization for Children Aged 9 - 24 Months

Identification of the completeness of basic immunization in children aged 9-24 months found that most parents did not complete basic immunization in their children. This study showed that the majority of parents who were respondents did not complete complete basic immunization in infants, namely 30 (60%), the rest completed complete basic immunization.

In Riska's research (2015) it was stated that there was an influence of parental education on basic immunization compliance, where people with low levels of education tended not to comply with carrying out basic immunization completeness. Likewise, working

parents have an influence on the completeness of basic immunization in children (Izhar, 2023). This is influenced by the level of education, where this completeness is influenced by the level of education, according to (Proverawati & Andhini, 2015) The level of education and knowledge of parents greatly influences the implementation of child immunization activities, both formal and non-formal education. The higher the level of education and knowledge of a person, the more they will need health service centers as a place for treatment for themselves and their families. With higher education, insight and knowledge will increase and they will increasingly realize that health is so important for life that they are motivated to visit better health service centers, especially to complete basic immunization.

c. Relationship of Parental Attitudes with Completeness of Basic Immunization in Children Aged 9-24 Months

Based on the statistical test of the relationship between parental attitudes and the completeness of basic immunization in children aged 9 - 12 months, a *p value* was found =0,000 with thus *p Value* smaller than the value of a (0.05), which means that there is a significant relationship between the relationship between parental attitudes and the completeness of basic immunization in children aged 9-12 months at the Siantan Selatan Anambas Health Center in 2024.

Based on the chi square statistical test on the basic immunization completeness table, it shows that out of 50 respondents found, the researcher stated that there were 25 (50%) respondents whose parents' attitudes were good, where there were 20 (40%) respondents who completed basic immunization and 5 (10%) respondents who did not complete basic immunization, there were 14 (28%) respondents whose parents' attitudes were sufficient, where there were 0 (0%) respondents who completed basic immunization and 14 (28%) respondents who did not complete basic immunization, there were 11 (22%) respondents whose parents' attitudes were lacking, where there were 0 (0%) respondents who completed basic immunization and 11 (22%) respondents who did not complete basic immunization.

From the results obtained, respondents whose parental attitudes are good, where there are 20 (40%) respondents who complete basic immunization and 5 (10%) respondents who do not complete basic immunization, a good attitude but there are 5 respondents who do not complete basic immunization, this is because Although parents understand the importance of immunization, they may not have sufficient or clear information about the immunization schedule, the types of vaccines needed, or the location where vaccines can be obtained, Busy schedules and daily routines can make it difficult for parents to make time for

immunization visits, especially if they have to take time from work or other responsibilities, There are times when communication between parents and health workers is not effective enough. If information about the vaccine schedule or the importance of immunization is not conveyed clearly, parents may not realize when or where they should complete it. This is the reason why parents' attitudes are good but they do not complete basic immunization.

Attitude is a person's closed response to a stimulus or object, whether internal or external, so that its manifestation cannot be seen directly, but can be interpreted first from the closed behavior.(Apriyani & Noviyani, 2024). The results of this study are in line with previous research, namely that there is a relationship between attitudes and complete basic immunization (Octaviani, 2015).

Based on the results of the respondent attitude questionnaire at the Siantan Selatan Anambas Health Center in 2024, there was a relationship with the attitude of the completeness of basic immunization in children, respondents had a good attitude towards the completeness of basic immunization as seen from the respondents' answers which were found to be more positive than those with less positive attitudes.

The results of this study are also in line with (Yulianti, 2018) which states that there is a relationship between mothers' attitudes about basic immunization and the completeness of basic

immunization in the Sekincau Health Center work area of West Lampung Regency because with a supportive attitude, someone will be better at providing perceptions according to what they know. Likewise, in line with the research of Yanti Riani (2020) which states that there is a significant relationship between attitudes and the completeness of basic immunization. The results of this study are also in line with research conducted by Nugrawati (2019) on the relationship between knowledge and attitudes towards complete immunization in toddlers which showed that 77.5% of respondents had a good attitude.

Based on observations made by researchers, it can be concluded that the attitudes of parents who have children at the Siantan Selatan Anambas Health Center in 2024 mostly have good attitudes, because the better the attitudes of parents there, the better it will be for the growth of children because the child is not easily attacked by infectious diseases. where in connection with the research conducted so that the completeness of immunization at the Siantan Selatan Anambas Health Center in 2024 is more improved in good attitudes and understanding of the importance of immunization to fulfill the completeness of complete basic immunization in their children to avoid all other infectious diseases.

CONCLUSION AND SUGGESTIONS

A. Conclusion

Based on the results of the research that has been conducted, the following conclusions can be drawn:

1. Of the 50 respondents, the majority showed that the majority of parents who were respondents had a good attitude towards complete basic immunization, namely 25 people (50%).
2. Of the 50 respondents, the majority showed complete basic immunization, namely the majority of parents who were respondents did not complete complete basic immunization for their children, namely 30 (60%).
3. There is a relationship between parental attitudes and the completeness of basic immunization in children aged 9-24 months at the Siantan Selatan Anambas Health Center in 2024 with a P Value of $0.000 < 0.05$.

B. Suggestion

1. For Health Workers
For health workers to further increase knowledge about mothers' attitudes regarding the completeness of basic immunization, provide education through counseling on basic immunization or distribute several brochures related to the completeness of basic immunization.
2. For Health Centers
For health centers, they should further increase promotion about complete basic immunization,

for health centers, they should be more sensitive to parents who do not complete basic immunization for their children and detect early parents who have a less than good attitude towards basic immunization so that visits can be made to the parents' homes to learn more about how important it is to complete basic immunization.

3. For Educational Institutions

This research can be used to improve and develop students' knowledge about basic immunization completeness research so that parents do not refuse their children to be immunized.

4. For Respondents

For parents seeking information and knowledge about immunization in the right place and from the right person, such as attending counseling or asking authorized health workers, and understanding the importance of immunization and the need to increase awareness to want to take their children to be immunized considering the importance of immunization so that children do not get infectious diseases.

5. For Further Research

Can be used as a data source and to continue research with variables and discussion of parental attitudes towards the completeness of basic immunization in children aged 9-24 months.

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