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RESEARCH ARTICLE
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KNOWLEDGE ON IMMUNIZATION SCHEDULE

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ABSTRACT

Introduction: Immunization is one of the most important and cost effective strategies for the prevention of childhood sickness and disabilities and thus a basic need for all children. Immunization schedule includes various vaccines which protects from the vaccine preventable disease including cervical cancer, diphtheria, hepatitis B, measles, mumps, pertussis, pneumonia, polio, rotavirus (diarrhea), rubella and tetanus.

Objective: The aim of the research was to assess the level of knowledge on immunization schedule among the mothers of under five year children in selected rural area of Visnagar.

Methodology: The research design selected for the study was non-experimental descriptive survey research design. Convenient sampling technique was used to obtain sample of hundred mothers of under five year children who satisfied the inclusion criteria. Structured knowledge questionnaire was used as data collection tool.

Conclusion: The result of study includes that the highest frequency of level of knowledge was 56 (56%) which indicates poor knowledge, 43 (43%) frequency indicates average knowledge and the lowest frequency was 1 (1%) which indicates good level of knowledge regarding immunization schedule, chi square analysis showed that there was no correlation between patient with demographic variable except area of residence, language and educational status.

Keywords: Immunization, strategies, prevention, disabilities, immunization schedule, knowledge, patient

Introduction

Immunization is one of the most commercial involvements to preclude the illnesses then progress existence probability. Immunization programs is one of the significant intermediations aimed at security of kids, children's after existence menacing situations, which are escapable besides the situation is a leading community strength involvement now the kingdom. Immunization Programmer's in India be situated announced in 1978 as Stretched Programmer's of Immunization. The preset extended motion in 1985 and be situated stretched as Worldwide Immunization Programmer's to remain realized in phased custom to shelter everything regions in the kingdom using 1989-90. UIP converted a quantity of Kid Subsistence too Innocent Maternity Programmer's happening 1992. These days, UIP is an essential element of the regime's battleship Multiplicative,

Motherly, Neonatal, Kid then Teenage Condition line of attack. India Worldwide Immunization Programmer's is unique of the leading in the domain in standings of magnitudes of preparation charity, the quantity of receivers, the amount of Immunization gathering systematized, the topographical feast in addition assortment of parts protected.[1]

Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines kindle the body's own immune system to protect the person against subsequent infection or disease. Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases and is estimated to avert between 2 and 3 million deaths each year.2

Mission Indradhanush, launched on 25 December 2014 under National Health Mission, aims to immunize all children under the age of 2 years, as well as all pregnant women, against seven vaccine preventable diseases i.e. diphtheria, whooping cough, tetanus, poliomyelitis, tuberculosis, measles and Hepatitis B. In 2016, four new additions have been made namely Rubella, Japanese Encephalitis, Injectable Polio Vaccine Bivalent and Rotavirus.3

METHODOLOGY

Research approach is the most significant part of any research. The suitable distinctive of the research approach be determined by upon the purpose of the research study which has been undertaken in order to achieve the main objectives of the study. Descriptive survey approach was used for this study to test the awareness of Mothers of fewer than five children concerning immunization schedule.

SR. NO	DEMOGRAPHIC VARIABLE	FREQUENCY	PERCENTAGE
1	**Age:-**		
	21-25 year	25	25%
	26-30 year	28	28%
	31-35 year	35	35%
	36-40 year	12	12%
2	**Area of Residency:-**		
	Rural	97	97%
	Urban	3	3%
3	**Language:-**		
	Gujarati	94	94%
	Hindi	3	3%
	English	3	3%
4	**Educational status:-**		
	Illiterate	8	8%
	10th pass	22	22%
	12th pass	50	50%
	Graduation	20	20%
5	**Source of knowledge:-**		
	Mass media	10	10%
	Family member	25	25%
	Health care provider	55	55%
	All of above	10	10%

SECTION A :-Frequency and percentage distribution of the sample according to the demographic variable in group.

SECTION B : Assessment of level of knowledge in immunization schedule among mothers under five children.

SECTION C : Identification of association between knowledge scores on immunization schedule of mother and the selected demographic variables.

TABLE 1: FREQUENCY AND PERCENTAGE DISTRIBUTION OF THE SAMPLE ACCORDING TO THE DEMOGRAPHIC VARIABLE IN GROUP SECTION

1. AGE IN YEAR:-

Regarding age category of the respondents has been divided into four different categories among mother of under five children in that highest score of mothers were 35% which indicate 31-35 years old and the lowest score were 12% which 36-40 years old and 35% mothers were 21-25 years old and other 28% mother were 26-30 years old.

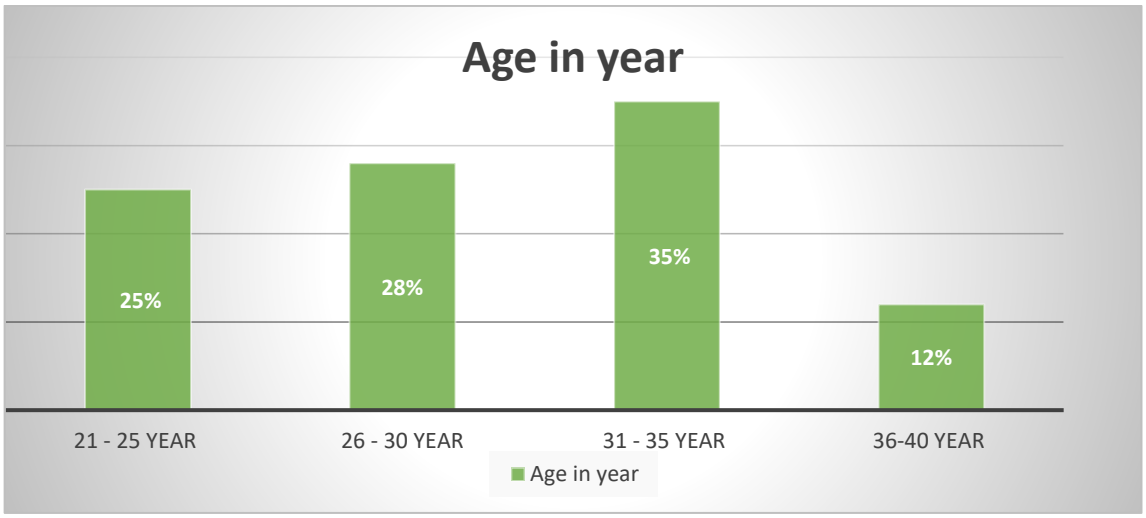

Fig no.1 column diagram showing percentage wise distribution according to their age.

2. AREA OF RESIDENCE:-

Regarding area of residence the highest percentage is 97% mother were lives in rural area and the lowest percentage is 3% mother were lives in urban area.

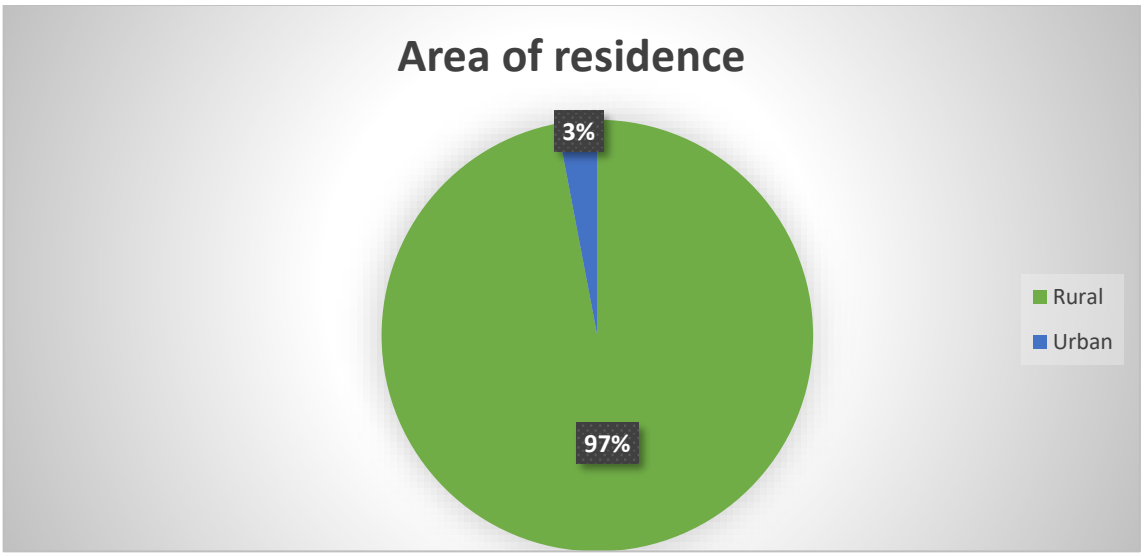

Fig no: 2 pie diagram showing percentage wise distribution according to their area of residence.

SECTION – B

TABLE NO 2: FREQUENCY AND PERCENTAGE REGARDING LEVEL OF KNOWLEDGE

SR NO	LEVEL OF KNOWLEDGE	FREQUENCY	PERCENTAGE
1	Poor	56	56%
2	Average	43	43%
3	good	1	1%

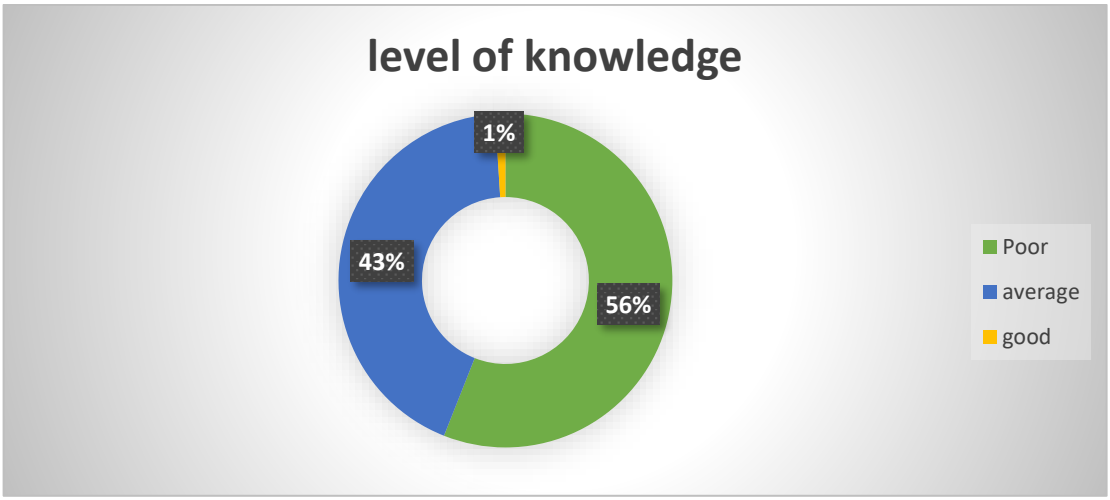

Fig. No-7 doughnut diagram showing percentage of level of knowledge.

SECTION – C

TABLE NO 3: ASSOCIATION BETWEEN THE KNOWLEDGE SCORES ON MOTHERS REGARDING IMMUNIZATION SCHEDULE AND DEMOGRAPHIC VARIABLES

SR NO.	DEMOGRAPHIC VARIABLE	FREQUENCY	LEVEL OF KNOWLEDGE			Chi-square X^2
			POOR	AVERAGE	GOOD	
1.	**Age:-**					
	21-25 year	25	16	8	1	$Z^2 = 4.05$
	26-30 year	28	15	12	1	P=0.66
	31-35 year	35	25	9	1	NS
	36-40 year	12	9	2	1	
2.	**Area of residence:-**					
	Rural	97	65	30	2	9.99 S
	Urban	3	1	1	1	
3.	**Language:-**					
	Gujarati	94	70	22	2	15.29 S
	Hindi	3	1	1	1	
	English	3	1	1	1	
4.	**Educational status:-**					
	Illiterate	8	5	2	1	14.79 S
	10^{th} and below	22	18	2	2	
	12^{th} pass	50	35	12	3	
	Graduation	20	6	10	4	
5.	**Sources of knowledge:-**					
	Mass media	10	6	2	2	Z^2= 5.8059
	Family member	25	13	10	2	
	Health care provider	55	37	15	3	P = 0.44528
	All of above	10	6	2	2	NS

S = Significant at 0.05 level

NS = Non-significant at 0.05 level

To identify the association between knowledge scores on immunization schedule of mothers and the selected demographic variables.
The table show above chi square is carried to find out the association between the knowledge on immunization schedule of the mothers of fewer than five children and demographic variables.

The result show there is a significant association between area of residence, language and education status but there was no association between age and source of knowledge.

Discussion:
A study to determine the level of awareness about Immunization schedule among the mothers of under five year children in rural area of Visnagar. For the investigation, a total of 80 samples were beneath five children 56 have Poor Knowledge 43 have average knowledge, and 01 have Good knowledge. Based on the study's goal, the outcomes are discussed.

OBJECTIVE
1. To assess the knowledge of mothers of under-five children regarding Immunization schedule.
2. To find the association between knowledge score of mothers of under five Children regarding immunization schedule with selected demographic Variables.

First Objective to assess the knowledge of mothers of under-five children regarding Immunization schedule. 55 %(G.K), (L.P)10%, (M.M) 10%, (F.M) 25% mothers were gain knowledge.

3. **Second Objective to find the association between knowledge score of mothers of under five Children regarding immunization schedule with selected demographic Variables.** there is a significant association between area of residence, language and education status but there was no association between age and source of knowledge.

Conclusion:
The Study finds that updating and improving mother of under-five children knowledge of Immunization Schedule.

Future work and challenges:
1. To draw broad generalizations, a study of a coparable nature that can be conducted with large, more diverse sample size and over a longer period of time would be more appropriate.
2. The nurse administrator should collaborative with governing bodies for the formulation of standard policies and protocols to emphasize nursing care of mothers and under five year children
3. Should conduct in service education programs and continuing education programs for immunization and immunization schedule Arrange and conduct workshops, conferences, seminars on immunization and immunization Schedule.
4. Must provide more opportunities for nurses to attend training programs of vaccination.
5. A Coparable study can be replied in another setting.

Author's contribution statement:
Payal T Vaghela and Patel Armi planned, designed, collected, and analyzed this data; Patel Amee.K, Parmar Harshida.H, Parmar Hiral.P, Parmar Dhruv.S, Vasava Ketan.M contributed to the final content and discussed the approach and findings.

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Conflict of interest:
There is no stated conflict of interest.

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