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# KNOWLEDGE, ATTITUDE AND PRACTICE (KAP) REGARDING IMMUNIZATION IN PUBLIC HEALTH

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Abstract: Prevention of disease is the requirement of this era. The morbidity and mortality resulted by the disease and increasing cost of treatment demands us to emphasize more over the prevention. Immunization is the most successful part of preventive medicine (Pildat, 2014). The aim of this study is to search on the immunization system and to assess the knowledge of public regarding immunization and the common misconception among parents. Study findings show that our immunization system is not up to the mark and also there are many misconceptions in public regarding immunization (WHO, 2012).

Keywords: immunization, preventive medicine, Faisalabad.

## 1. INTRODUCTION

Pakistan is a developing country with many health problems. The Expanded program of immunization (EPI) was introduced in Pakistan in 1978. It includes immunization against T.B, polio, Diphtheria, Pertussis, tetanus and measles (WHO, 2012)

At present 15 % mortality of children under 5 years of age contributes to 50 % of total deaths in Pakistan under 5 years. Mortality rate is high which is 94 /1000 live birth (Pakistan Demographic health survey, 2006-2007). Enhancing maternal knowledge of immunization impacts infant immunization a lot <sup>(O)</sup>Owais, 2011). Pakistan is one of these countries where polio is endemic <sup>(I)</sup>UNICEF, 2009.) Immunization coverage survey display that 1 in every 5 children is not immunization (Resdev,2013). One of the estimates show that every year about 90000 children acquire paralytic polio vaccine (W.H.O Genneva,2002). The key reason that EPI has not gained its goals are insufficient service delivery, unavailability of vaccinators, poor service utilization. Long distance to EPI centers, cost to reach these sites and outreach of services were reasons for 12.6% of mothers failing to immunize their children through these centers (Gov. of Pakistan[coverage evaluation survey 2006]. Islamabad, 2007).

## **Objective**

- 1 my objectives were to assess the knowledge about immunization in public
- **2.** To assess attitude of general public about immunization.
- 3. To assess the vaccination coverage in our community.
- **4.** To assess the practice on EPI schedule in public.



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#### Significance

One of the greatest achievements of public health is immunization. Vaccination has greatly reduced the burden of infectious diseases. The diseases one prevalent in the community are now rarely seen after introduction and use of vaccines against their causative agents. One of the examples is the small pox which once was prevalent disease has now been eliminated from the face of the earth due to immunization against the causative As literacy is still low in our country there are several misconceptions about vaccination in our community. An important one is vaccine safety. Vaccine safety gets more public attention than vaccination effectiveness but independent experts and WHO have shown that vaccines are far safer than therapeutic medicines. Modern research has resulted in development of less react genic products such as acellular pertussis vaccine and rabies vaccine in cell culture and tetanus toxoid replacing anti tetanus serum which is safer.

There are certain misconceptions about vaccination in our society which need to be addressed so that everyone can be immunized. Certain cases have been reported where terrorist attacks have been done on vaccination teams and centers to destabilize the nation so proper security should be provided to these health care workers.

Adults are also being vaccinated against hepatitis B influenza etc. Currently WHO recommends the immunization against tuberculosis, diphtheria, pertussis, tetanus, measles, mumps, rubella, pneumococcal pneumonia, polio and hepatitis B in a scheduled manner. It is important to educate our community about benefits of immunization, about severity of these lethal diseases.

#### 2. LITERATURE

Vaccination has a major role in public health. Pakistan is a developing nation with very high infant mortality rate and infectious diseases are the major cause of this high mortality rate. (Zaman, 2011) Immunization controls and eradicates many infectious diseases which are life threatening. It prevents an estimated 2-3milion children death every in all age groups. So it is the most cost effective and efficient public health preventive methods. (WHO, in 1978)

Expended Program of Immunization was launched in Pakistan under guidance of the WHO. At present the national EPI program has the goal to vaccinate all children between the age of 0 to 23 months for eight diseases which are preventable by vaccination. These include T. B, Diphtheria, Pertussis, tetanus, Polio, Measles, hepatitis B (vaccine introduce in 2002) and H.

Also measles is a prevailing disease among children as it was reported in 2013 these were 192 deaths from measles in Punjab province of Pakistan (Pakistan Today, 2013). There is also a great difference in immunization coverage in urban and rural area population. There is a marked difference in immunization coverage among provinces. Punjab had the greatest vaccination n coverage of 53% after this NWFP (KPK) has 47%, Sindh has 37% and Baluchistan is the last in this list with 35% (Pakistan Demographic Health Survey, 2006-There is also gender discrimination in immunization of children as boys are more likely to be fully vaccinated than girls (50 versus 44%).

The issues of vaccination storage, transportation and administration impart role in inefficacy of the immunization program (Anjum, 2004). As vaccine if not properly stored and cold chain if not maintained gets wasted resulting in wastage of valuable resources of the developing country Pakistan. Better storage management and decreased wastage rate can save a lot of valuable money for the national EPI program. For example, decreasing wastage from 25% to 15% could save about 13 million U. S Dollars over the next 5 years (Ministry of Health, Pakistan, 2012).

Another important hindrance in the success of immunization program is the distance from the health facility due to which many children are unable to get vaccinated (Uddin MJ, 2009). So there is a need to bridge the distance in supply of adequate vaccines and their utility at basic level in BHU level. Literacy rate and public awareness has also a great impact on effective immunization program.

It has a strong association with immunization as in illiterate mothers 3% of children were not immunized for any EPI included disease whereas mothers who had primary and secondary education, the percentage of not- immunized children was 1% and 2% respectively (J.R.M.C. Different studies at Karachi revealed that mothers with higher levels of education have a good percentage of vaccination in their offspring (Sidiqui, 2007). Also certain people especially those in our rural population assume that immunization is not good for their newborn and they don't expose their children to vaccination teams and hide them or simply refuse to get their child vaccination.



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Electronic and print media has a positive role in clarifying these misconceptions and encouraging people to get vaccinated. The announcements are made on T.V, radio and in local mosques about the vaccination campaigns. Also the vaccines are supplied to dispensaries and primary health care as well as tertiary health care so that they are easily accessible. The teams go door to door to make the availability of vaccine more and more possible to every child.

Another factor which has a positive role in increasing efficacy of immunization program is use of immunization card as it is observed that its use improved immunization coverage (J.P.M.I., 2013). In our survey with questionnaires the response of the people was mixed some took it really a positive move for improvement of health care system and some simply ignored it. But overall the attitude of people was supportive towards immunization program and they wanted a better system of vaccination for the prevention of diseases.

## 3. MATERIAL AND METHODS

Cross sectional study was conducted involving every 390 house of the Punjab Medical College Staff Colony Faisalabad. Data was collected from different journals newspaper and web sites A Questionnaires was made having yes, No options.

## Research Approach

This research falls into the category of quantitative research. The researcher will collect the data by using the questioner's house of the Punjab Medical College Staff Colony Faisalabad.

#### Research Design

It will be descriptive cross sectional study Design is used. The researcher has used content analysis method for this research as it is an academic research and this method is quite suitable here. The goal of quantitative analysis knowledge practice and attitude regarding immunization in public health.

## Study site.

Punjab medical college and staff colony Allied hospital Faisalabad.

#### **Population**

Population of the study consists of all Punjab Medical College Staff Colony Faisalabad.

## **Research tools:**

Questionnaire

## Sample and technique.

Convenient sampling will be used for study.

## **Inclusion criteria:**

Those public has age of 15 to 60 who were unable to give answer and understand the question in Punjab medical college and colony Allied hospital Faisalabad.

## **Exclusion criteria:**

Those patients are excluded who were below 15 years and up to 60 years in pc Faisalabad.

## Sample size:

Sample size = n = 195

## Analyses of data

Data will be analyzed by using SPSS (statistical package for social sciences) version 20

## **Ethical consider**

I will inform the participant before collection of data and then gathered data with their willing. The participant will have a right to willingly participate or not.

## 4. RESULT DISCUSSION

This chapter covers the type of research design and the quantitative and qualitative data analyses involved in the study. Before presenting the results of Qualitative and quantitative analyses of the data, the type of the research design of the study was presented, as the research design determines the statistical tests and analyses (Hatch, Lazzarato, 1991).



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Table 4.1 Age Group

	_	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	15-25	72	36.9	36.9	36.9
	26-35	83	42.6	42.6	79.5
	36-45	25	12.8	12.8	92.3
	46-55	11	5.6	5.6	97.9
	56-65	4	2.1	2.1	100.0
	Total	195	100.0	100.0	

Table 4.1 depicts that a 36.9 percent of the respondents were 15-25, 42.6 percent of them were 26-35 that age group, 12.8 percent were 36-45, whereas only 5.6 percent were 46-55 and 2.1 percent of them were 56-65.

Table 4.2 Do you know what is a vaccine?

	-	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	172	88.2	88.2	88.2
	No	23	11.8	11.8	100.0
	Total	195	100.0	100.0	

Table 4.2 depicts that a 88.2 percent of the respondents were yes, 11.8 percent of them were no that Do you know what is a vaccine.

Table 4.3 Do you believe that vaccination is the best way for the prevention of disease?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	181	92.8	92.8	92.8
	No	14	7.2	7.2	100.0
	Total	195	100.0	100.0	

Table 4.3 depicts that a 92.8 percent of the respondents were yes, 7.2 percent of them were no that Do you believe that vaccination is the best way for the prevention of disease.

Table 4.4 Do you know what is EPI (expended program of immunization)?

		Frequency	Percent	Valid Percent	<b>Cumulative Percent</b>
Valid	Yes	174	89.2	89.2	89.2
	No	21	10.8	10.8	100.0
	Total	195	100.0	100.0	

Table 4.4 depicts that a 89.2 percent of the respondents were yes, 10.8 percent of them were no that Do you know what is EPI (expended program of immunization).

# 5. CONCLUSION AND SUMMARY

Conclusion of my study is that immunization program in Pakistan is not up to the mark. It needs a lot of improvement, mostly people have knowledge of immunization. they practice on it. They better know what is vaccine what is its



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importance in their lives. It safe mother's life child health and young and old people. But the 25% people are not known what is vaccination, their attitude was not good, they believe that is time wastage, very costly, so more researches and media play a major role for these purpose.\_. Lady health workers, health care providers, teachers, NGOs, and media can play its role.

Also one of the important groups which should be conscious about their immunization status are health care providers and hospital staff including those dealing with patients as well as those related to disposing off hospital waste Regular immunization should be assured as these are at high risk.

People need to acknowledge that immunization is for their benefit and secures them and their offspring. All misconceptions about immunization are false and everyone should be aware of its fruits.

- 1. Mother being busy
- 2. Family problems
- 3. Postponement of immunization session to another time Victim of immunization is inconvenient. Mothers who dropped out of the immunization programmers were mostly those between 20-29 years and were either unemployed or farmer/artisan by occupation

#### RECOMMENDATION

- 1. The importance of vaccination and by rectifying the believes of people regarding the side effects and reactions of vaccines.
- 2. Also the storage techniques should be improved and cold chain must be maintained.
- 3. More funds should be allocated for improving this.
- 4. The delivery of vaccine should be made easy and accessible to each and every one.
- 5. special importance should be given to rural population in this regard
- Health education should be enhanced as it has a great role in increasing immunization coverage also security should be provided t

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