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The Relationship of Age and Parity of Pregnant Women in Trimester III With Completeness of Tetanus Toxoid Immunization at Klinik Fera in 2021

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ABSTRACT

Tetanus Toxoid (TT) immunization is a weakened and purified tetanus germ toxin that is given to infants, children and mothers in an effort to provide protection against tetanus (Rinaldi, 2016). The research design used was an analytical study with a cross sectional study approach, aiming to determine the relationship between age and parity of third trimester pregnant women with the completeness of tetanus toxoid immunization at the Fera Clinic in 2021. The number of samples in this study was 30 people. With accidental sampling technique. Data collection instrument in the form of a questionnaire used to obtain chi square data. The results of this study indicate that there is no significant relationship between maternal age and TT immunization with p value = 0.171 (P > 0.05). There is a significant relationship between maternal education and the provision of TT immunization, with p value = 0.013 (P <0.05). There was no significant relationship between maternal parity and TT immunization with p value = 0.083 (P > 0.05). It is expected that health workers (midwives and nurses) in conducting counseling activities, age affects a person's knowledge so that an individual approach is needed to explain the importance of TT immunization.

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1. INTRODUCTION

Tetanus Toxoid (TT) immunization is a weakened and purified tetanus germ toxin that is given to infants, children and mothers in an effort to provide protection against tetanus (Rinaldi, 2016). Neonatal tetanus can be prevented by immunizing women of childbearing age (WUS), both during pregnancy and outside pregnancy, which will protect the mother and baby through the transfer of tetanus antibodies to the baby (Proverawati, 2015).

In Indonesia 9.8% (18,032) of 184 thousand live births face death due to low coverage of Tetanus Toxoid immunization (Depkes RI, 2016). Immunization is carried out with the aim of reducing mortality and morbidity, which is one of the programs of the puskesmas. If pregnant

women do not get Tetanus Toxoid (TT) immunization, it can cause the baby to be susceptible to Tetanus Toxoid Neonatorum. The socialization of TT immunization needs to be done considering that there are still many pregnant women who do not know the benefits of TT immunization for the mother herself and her baby and how many times the TT immunization has been given and the distance between TT1 and TT2 immunizations (Suryati, 2015).

According to Notoatmodjo (2012), health behavior is influenced by 3 factors including predisposing factors, these factors include community knowledge and attitudes towards health, traditions and public beliefs on matters related to health, the value system adopted by the community, education level, level of education. socioeconomic and so on. From the factors above, one of the factors that can influence the provision of TT immunization to pregnant women is the need for knowledge and awareness of mothers about the benefits of TT immunization, because TT immunization is good for immunity against tetanus infection because mothers know that TT immunization will provide immunity to mother herself and her fetus (Wijayanti et al, 2013).

A preliminary study conducted at the Fera Clinic, the results of interviews with pregnant women, that of 10 pregnant women 7 of them did not know the meaning of TT immunization, TT immunization schedule, benefits of TT immunization, side effects of TT immunization and where to inject TT immunization.

Therefore, based on the above problems and in the working area of the Fera Clinic, including areas with TT immunization coverage rates that are less than the target target of 80% and also no one has conducted research at the Fera clinic with the title Relationship of age and parity of third trimester pregnant women with completeness Tetanus toxoid immunization at the Fera Clinic in 2021.

2. RESEARCH METHODE

The type of research used is quantitative research using analytical observational methods with a cross sectional design, which is a study that studies the dynamics of the correlation between risk factors and effects, by approaching, observing or collecting data all at once (point time approach) (Notoatmodjo, 2010). In this case, to determine the relationship between age and parity of third trimester pregnant women with the completeness of tetanus toxoid immunization at the Fera Clinic in 2021.

The population in this study were all pregnant women at the Fera clinic in March - June 2021 as many as 30 pregnant women. The sample in this study were pregnant women with a gestational age of more than 32 weeks as the target of Tetanus Toxoid immunization at the Fera clinic. In which the entire population was used as the research sample (total sampling), which was 30 pregnant women.

Research Instruments To obtain information from the respondents, the researcher used a questionnaire sheet which was structured based on theory and contained questions that the respondents had to answer. This instrument consists of three parts, namely demographic data including initials of name, mother's age, education, occupation and gestational age. The second part of the questionnaire for the knowledge level of pregnant women contains 15 closed questions about knowledge, causes, benefits, ways of prevention, schedule and method of giving TT immunization. Knowledge questions using a measurement scale according to Guttman, provide answers to an item, namely: if the correct answer is worth 1 and the wrong answer is 0.

Univariate analysis described the independent variables including knowledge and attitudes as well as the dependent variable, namely the provision of tetanus toxoid (TT) immunization in the form of a frequency distribution and Bivariate analysis was carried out to determine the relationship between the dependent and independent variables, namely the relationship

between age, education and parity with the administration of tetanus toxoid immunization in the clinic. Fera. The analysis technique used is Chi-Square Analysis and correlation test using a 95% confidence degree with 5%, so that if the P (p value) < 0.05, it means that the results of statistical calculations are significant (significant) or indicate there is a relationship between the dependent variable with the independent variable, and if the p value > 0.05, it means that the statistical calculation results are not meaningful or there is no relationship between the dependent variable and the independent variable.

3. RESULT AND ANALYSIS

The results of the analysis of the relationship between age and TT immunization using the formula x2 (chi square) with p value = 0.171 (P > 0.05). So it can be concluded that there is no significant relationship between the age of thousands and the provision of TT immunization.

The results of the analysis of the relationship between maternal parity and TT immunization used the formula x2 (chi square) with p value = 0.083 (P > 0.05). So it can be concluded that there is no significant relationship between maternal parity and the administration of TT immunization.

The results of this study are not in line with the research conducted by Yunika (2015) on the relationship between knowledge and age with completeness of Tetanus Toxoid (TT) immunization in pregnant women in Sungai Dua Village, Rambutan District, Banyuasin Regency in 2014, with the results of the study that there was a relationship between knowledge and age with complete TT immunization in pregnant women with p value = 0.000.

Age affects a person's grasping power and mindset, the older you get, the more your grasping power and mindset will develop (Notoatmodjo, 2015). This shows that the age of the respondents when the research was conducted can be said to be mature to become a mother, and responsible for what they have because they can think maturely and have mental readiness to carry out the role of being a mother (Cahyono, 2017).

Mothers who already have a lot of parity are expected to be able to change the knowledge, attitudes and behavior of mothers and their families to live healthier lives. The parity referred to in this study is also called the experience of mothers giving birth and having children. Experience is something that someone has experienced will increase knowledge about something that is non-formal. Experience is one of the factors that affect one's knowledge. The experience that a person gets a lot then that person will have broader knowledge because someone who has experienced an event can cause if he experiences the same incident he will remember and already know how and what he should do.

4. CONCLUSION

From the results and discussion of the research, the following conclusions can be drawn:

1. The majority of mothers aged 20-35 years were 16 respondents (53.3%) and the minority aged >35 years were 6 respondents (20%).
2. The majority of multiparous mothers were 13 respondents (43.3%) and the primiparous and grandemultipara minorities were 4 respondents (13.3%)
3. The majority are in the complete category as many as 19 respondents (63.3%) and the minority are in the incomplete category as many as 11 respondents (36.7%).
4. There is no significant relationship between maternal age and TT immunization with p value = 0.171 (P > 0.05).
5. There is no significant relationship between maternal parity with TT immunization with p value = 0.083 (P > 0.05)

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