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Original Article

THE RELATIONSHIP BETWEEN MOTHERS' PERCEPTIONS AND THE COMPLETENESS OF BASIC IMMUNIZATION AMONG INFANTS IN WONOKERSO VILLAGE, SUMBER SUBDISTRICT, PROBOLINGGO REGENCY

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ABSTRACT

Background. Immunization is a preventive measure aimed at enhancing infants' immunity against various diseases, with the goal of reducing infant morbidity and mortality. In Indonesia, particularly in remote and underserved areas, many children do not receive immunization due to negative parental perceptions. This study purpose to determine the relationship between maternal perception and the completeness of basic immunization among infants.
Research Method. This study employed cross-sectional design. The study population consisted of all mothers with infants aged 10-12 months in Wonokerso Village, Sumber District, Probolinggo Regency. Total of 29 respondents were selected using simple random sampling. Data were collected using a questionnaire to assess maternal perceptions and a checklist to evaluate immunization completeness based on documentation in the Maternal and Child Health (MCH) handbook. The relationship between maternal perceptions and the completeness of basic immunization among infants aged 10–12 months was subsequently analyzed using Chi-square test.
Findings. The results showed that almost all respondents had positive perceptions of immunization, and most infants aged 10–12 months had received complete basic immunization. Statistical result *p*-value of 0.001, indicating a significant relationship between maternal perceptions and the completeness of basic immunization among infants in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency.
Conclusion. Positive perceptions of immunization reflect mothers' understanding and awareness that infants require adequate immunity to protect them against certain diseases through vaccination. This understanding encourages mothers to ensure that their infants receive immunization. The more positive the maternal perception, the greater the likelihood that infants will receive complete basic immunization.

Keywords: Completeness of Basic Immunization, Infants Aged 0–12 Months, Mothers' Perceptions.

BACKGROUND

Immunization is a preventive measure aimed at enhancing infants' immunity and providing specific protection against certain diseases, thereby reducing the risk of morbidity, disability, complications, and death caused by infectious diseases. The Indonesian Ministry

of Health has established a routine basic immunization program for infants aged 0–11 months, followed by booster immunizations up to 18 months of age. Complete and timely immunization plays an essential role in developing children's immunity against various infectious diseases.

According to data from the Indonesian Ministry of Health , the coverage of complete basic immunization among children during the first semester up to August 2024 reached only 34.7% [1].This mark was considerably below the target of 66.7% set for the same period. In East Java Province, the percentage of children who received basic immunization reached 32.3%, which was also below the target. One of the regencies in East Java, Probolinggo Regency, achieved an immunization coverage rate of 61.7%, which was 5.6 percentage points below the target. According to the routine infant immunization report from 33 community health centers (*Puskesmas*) in Probolinggo Regency, Sumber Community Health Center was among the facilities with relatively low coverage, at 44.6% [2].

Nine villages within the Sumber Community Health Center catchment area had incomplete basic immunization (IBI) coverage rates as follows: Ledokombo Village, 34%; Pandansari Village, 40%; Sumberanom Village, 40%; Wonokerso Village, 33%; Tukul Village, 39%; Gemito Village, 36%; Sumber Village, 41%; Cepoko Village, 38%; and Rambaan Village, 36%. Based on This data, Wonokerso Village had the lowest complete basic immunization coverage, at 33%. In 2023, Probolinggo Regency recorded seven confirmed cases of diphtheria distributed across five subdistricts, including Sumber Subdistrict. Based on Probolinggo Regent Decree No. 440/341/426.32/2023 concerning the Declaration of an Extraordinary Event (Epidemic) of Diphtheria in Probolinggo Regency, five community health centers, including Sumber Community Health Center, were declared to be experiencing a diphtheria outbreak. This situation had implications for immunization coverage.

A preliminary survey conducted by the researcher in the Sumber Community Health Center catchment area found that many parents did not bring their children for immunization for various reasons. This included fear that their children would become ill after immunization and the belief that immunization had no significant effect on children's health. Incomplete immunization may be influenced by several factors, including parental knowledge and attitudes, family support, perceptions of vaccine safety, access to healthcare facilities, transportation availability and affordability, and the quality of immunization services. A literature review by Amalia et al, indicated that limited public knowledge regarding the benefits of immunization is a major barrier to improving immunization

coverage. Other contributing factors include family support, community beliefs, perceptions of healthcare services, and the accessibility of immunization services [3]. Conceptually, perceptions of healthcare services can be defined as families' subjective views or evaluations of immunization, including concerns about adverse effects following immunization. Inadequate knowledge and negative perceptions may consequently hinder parents' willingness to have their children immunized [4].

Parents' reasons for not immunizing their children are consistent with factors that influence individual perceptions and beliefs, including the social environment, community culture, healthcare services, past experiences, personal needs, and motivation. This factors may shape parental beliefs and influence decisions regarding childhood immunization. Interviews conducted with mothers of children under five years of age at an integrated health post (*Posyandu*) revealed that, among the ten mothers interviewed, seven expressed uncertainty about whether immunization could prevent disease. This lack of confidence contributed to their reluctance to bring their children to the Posyandu for immunization.

Based on the above description, several research gaps have been identified that warrant further investigation. First, the immunization coverage in Wonokerso Village is lower than that in other villages within the working area of Sumber Public Health Center. Second, it remains unclear whether the low coverage of complete basic immunization is associated with mothers' perceptions or influenced by other factors. Therefore, This study purpose was determine the relationship between maternal perception and the completeness of basic immunization among infants.

RESEARCH METHOD

This study employed a quantitative research design with a cross-sectional approach, in which data were collected only once to obtain a cross-sectional representation of the population at a specific point in time. This approach aimed to identify exposure and outcome variables simultaneously for each research subject [5]. A correlational design was used to determine the relationship between maternal perceptions and the completeness of basic immunization among infants aged 10–12 months in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency. The study population consisted of 31 mothers with infants aged 10–12 months, from which 29 respondents were selected using a simple random sampling technique. The independent variable was maternal perception of basic immunization, while the dependent variable was the completeness of basic immunization among infants. Data on maternal perceptions were collected using a questionnaire [6], whereas immunization

completeness was assessed based on immunization records documented in the *Kartu Menuju Sehat* (KMS), or Growth Monitoring Card [7]. The data were subsequently analyzed statistically through hypothesis testing, particularly correlation analysis, to obtain a correlation coefficient [8].

Data collection was conducted during integrated health post (*posyandu*) activities and through home visits to parents who met the study criteria, following the provision of informed consent. The collected data underwent several processing stages, including editing, coding, scoring, and data entry into computer software. Statistical analysis was performed using the Chi-square test, with a significance level of $\alpha < 0.05$, to determine the relationship between maternal perceptions and the completeness of basic immunization. Before data collection, the researcher obtained ethical approval from the Research Ethics Committee of Unipdu Jombang. The study was declared to have passed the ethical review, as documented in Ethical Clearance Certificate No. 026_KEP_Unipdu/01/2025. The study was conducted in January 2025 in Wonokerso Village, with due consideration given to research ethics principles, including informed consent, confidentiality of respondents' identities, honesty, autonomy, and justice.

FINDINGS

The results of this study begin with a presentation of general data describing the respondents' characteristics based on their educational background, history of immunization in previous children, history of receiving immunization-related information, and the frequency of immunization information received by the respondents. The table 1 describes the characteristics of 29 respondents based on education, religion, previous children's immunization history, and exposure to immunization-related information. Regarding education, nearly half of the respondents had completed senior high school, accounting for 13 respondents (45%), while 7 respondents (24%) had completed junior high school and another 7 (24%) had a university education. Only 2 respondents (7%) had completed elementary school. In terms of religion, the majority of respondents were Hindu, comprising 24 respondents (82.8%), while 5 respondents (17.2%) were Muslim. Regarding previous children's immunization history, 27 respondents (93%) reported that their previous children had received immunizations, whereas 2 respondents (7%) reported otherwise. All respondents (29; 100%) had received information about immunization. Concerning the frequency of receiving information, 15 respondents (52%) had received immunization-related information more than three times, 10 respondents (34%) had received it twice, and

4 respondents (14%) had received it once. This findings indicate that most respondents had a senior high school education, were Hindu, had previous experience with childhood immunization, and had received immunization-related information multiple times.

Table 1. Respondents Characteristics (n=29)

Characteristics	Frequency	Percentage (%)
Education		
Elementary School	2	7
Junior High School	7	24
Senio High School	13	45
University	7	24
Total	**29**	**100**
Religion		
Hinduism	24	72
Islam	5	28
Total	**29**	**100**
Previous Child's Immunization History		
Immunized	27	93
Not Immunized	2	7
Total	**29**	**100**
History of Receiving Information about Immunization		
Ever	29	100
Never	0	0
Total	**29**	**100**
Frequency of Receiving Information		
once	4	14
Twice	10	34
More than 3 times	15	521
Total	**29**	**100**

Table 2. Frequency Distribution of Respondents Based on Mothers' Perceptions of Immunization

No	Mothers' Beliefs About Basic Immunization	Frequency	Percentage (%)
1	Positive	23	79
2	Negative	6	21
	Total	29	100

Table 2 describes that the vast majority of mothers had positive beliefs regarding basic immunization, accounting for 23 respondents (79%). Meanwhile, 6 respondents (21%) had negative beliefs regarding basic immunization. This findings indicate that the majority of mothers in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency, held positive

beliefs about providing basic immunization to infants.

No	Completeness of Basic Immunization Among Infants Aged 10–12 Months	Frequensy	Percentage (%)
1	complete	21	72
2	incomplete	8	28
	Total	29	100

Table 3. Frequency Distribution of Respondents According to the Completeness of Basic Immunization Among Infants Aged 10–12 Months

Table 3 describes that the majority of infants had received complete basic immunization, accounting for 21 infants (72%). Meanwhile, 8 infants (28%) had not received the complete basic immunization schedule. This findings indicate that most infants aged 10–12 months in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency, had received complete basic immunization, although some infants had not yet completed their immunization schedule.

Table 4. Cross-Tabulation of the Relationship Between Maternal Beliefs and the Completeness of Basic Immunization Among Infants in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency

Mothers' Beliefs About Basic Immunization	Completeness of Basic Immunization Among Infants Aged 10–12 Months				Total	
	Complete		Incomplete			
	F	%	F	%	F	%
Positive	20	69	3	10	23	79
Negative	1	3	5	17	6	21
Total	21	72	8	27	29	100
chi-square test =	0.001					

Table 4 describes that 23 respondents (79%) had positive beliefs about basic immunization. Among mothers with positive beliefs, 20 respondents (69%) had infants who had received complete basic immunization, while 3 respondents (10%) had infants with incomplete basic immunization. Meanwhile, among the 6 respondents (21%) who had negative beliefs about basic immunization, 1 respondent (3%) had an infant who had received complete basic immunization, whereas 5 respondents (17%) had infants with incomplete basic immunization.

This data indicates that mothers with positive beliefs tend to have infants who have received complete basic immunization, whereas mothers with negative beliefs tend to have infants with incomplete basic immunization. This finding suggest an association between

maternal beliefs about basic immunization and immunization completeness among infants aged 10–12 months in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency. The chi-square test yielded a p-value of 0.001, which is less than the significance level ($\alpha = 0.05$). Therefore, the research hypothesis was accepted, indicating a significant association between maternal beliefs and the completeness of basic immunization among infants in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency

DISCUSSIONS

1. Mothers' Perceptions of Basic Immunization

Table 1 shows that the majority of respondents had positive perceptions of basic immunization, accounting for 23 respondents (79%). This finding indicates that the respondents had good knowledge, understanding, and perceptions of health, particularly regarding basic immunization.

One factor that may influence positive perceptions is education. The distribution of respondents by educational level showed that more than half had completed senior high school or higher education, including university, accounting for 20 respondents (69%). Higher educational attainment among parents, particularly mothers, is positively associated with knowledge of and adherence to childhood immunization, thereby contributing to increased immunization coverage and protection against infectious diseases. This finding is consistent with the study by Syahrul and Karlina, which reported that higher maternal education was associated with an increased likelihood of children having an appropriate immunization status. Mothers with higher educational backgrounds tend to be more aware of the importance of immunization, more receptive to new and modern ideas, more confident in making decisions regarding family health, including their children's health, and better equipped to obtain health information [9]. This finding is also relevant to the study by Kartika, which reported that mothers with higher levels of education tend to find it easier to receive information about basic immunization for children under five from healthcare professionals. This may influence their ability to improve the health status of children under five years of age [10].

Another factor that may influence perceptions is experience. The general characteristics of the respondents indicated that the majority had previously ensured that their other children received complete immunization, accounting for 27 respondents (93%). Positive experiences can influence mothers' beliefs and encourage them to maintain beneficial behaviors, including health-related behaviors. Experience can improve mothers'

understanding of immunization practices, while positive experiences may increase their confidence in providing immunization to their children.

Mothers' previous experiences with immunizing their children may improve their understanding of the benefits of immunization and reduce their concerns about potential post-immunization effects. This circumstance may strengthen mothers' confidence in and positive perceptions of immunization [11]. Another factor influencing mothers' positive perceptions is their exposure to information about immunization. The distribution of respondents according to their exposure to immunization-related information showed that all respondents had previously received information about immunization, with 19 respondents having received such information more than three times. This finding is consistent with health behavior theory, which states that adequate exposure to information can shape and reinforce individuals' perceptions. The more frequently individuals receive information on the same topic, the greater their knowledge, which may subsequently contribute to the development of positive perceptions [12].

2. Completeness of Basic Immunization Among Infants Aged 0–12 Months

Table 2 describes that the majority of respondents, comprising 21 respondents (72%), had ensured that their infants received complete basic immunization. One factor influencing the completeness of immunization is mothers' positive perceptions of immunization. Table 1 shows that 23 respondents (79%) had positive perceptions of immunization. Parents who have positive perceptions of immunization tend to view it as a form of protection against disease, which may contribute to higher rates of immunization completeness [13]. Perception can be likened to a filter that determines whether individuals engage in healthy or unhealthy behaviors.

Another factor influencing the completeness of basic immunization is knowledge. The majority of respondents had received information about immunization more than three times, accounting for 15 respondents (52%). Repeated exposure to information may improve respondents' knowledge of immunization, including its schedule, benefits, and the risks associated with not receiving immunization. With adequate knowledge, respondents have a stronger foundation for adopting health-promoting behaviors, including ensuring that their infants receive immunization. The findings of Hapriyanti indicate that adequate knowledge encourages mothers to make appropriate health-related decisions and increases their awareness of the importance of ensuring that their children receive complete basic immunization [14]. Notoatmodjo stated that knowledge results from the process of sensory perception of an object, which can subsequently influence the formation of appropriate

behaviors [15]. This finding is consistent with the study by Wulandari, which demonstrated that maternal knowledge is closely associated with mothers' adherence to providing basic immunization to their children. Mothers' knowledge of the benefits of immunization and the recommended immunization schedule is essential information that encourages them to utilize immunization services [16].

Furthermore, the respondents' general characteristics showed that more than half had completed senior high school or higher education, including university, accounting for 20 respondents (69%). Higher educational attainment enables respondents to absorb and evaluate information more effectively and translate it into positive health behaviors. In addition, higher education may encourage individuals to think rationally, making them less susceptible to health-related myths and misinformation. The study by Istiqomah et al. demonstrated a significant association between maternal education and the completeness of immunization among children under five years of age. Education is an important factor influencing maternal behavior, including efforts to meet the health needs of family members. Mothers with higher levels of education may find it easier to understand the importance of ensuring that their children receive complete immunization [17].

3. The Relationship Between Mothers' Perceptions and the Completeness of Basic Immunization Among Infants Aged 0–12 Months

Table 3 shows that mothers with positive beliefs tended to have infants who received complete basic immunization, whereas mothers with negative beliefs tended to have infants with incomplete basic immunization. The chi-square test yielded a *p*-value of 0.001, which was less than the significance level ($\alpha = 0.05$). This indicates a statistically significant relationship between mothers' perceptions and the completeness of basic immunization among infants in Wonokerso Village, Sumber Subdistrict, Probolinggo Regency. Mothers' perceptions of immunization involve a process in which mothers process information about immunization, interpret its potential benefits and risks based on their existing experiences, and ultimately develop behaviors characterized by either adherence to or refusal of immunization.

The preceding discussion has described several factors that may influence respondents' positive perceptions regarding the completeness of basic immunization among infants aged 0–12 months. The following section discusses the relationship between mothers' perceptions and the completeness of basic immunization in this age group.

Perception results from sensory processes that culminate in psychological processes through which individuals assign meaning to the objects they perceive [18]. Mothers' perceptions of

immunization involve processing information and experiences related to immunization and subsequently interpreting them in ways that shape their behavior. This perceptions may lead mothers to accept immunization, reflecting positive perceptions, or reject immunization, reflecting negative perceptions.

Positive perceptions of immunization indicate that mothers understand and recognize the importance of adequate immunity in protecting infants against certain diseases and infections through vaccination. Consequently, mothers are more likely to ensure that their infants receive immunization. Therefore, the more positive mothers' perceptions of immunization, the greater the likelihood that their infants will receive complete basic immunization. This finding is consistent with the study by Ilfa et al., which showed that parents with positive perceptions of immunization tended to adhere to their children's immunization schedules, thereby ensuring that their children received complete immunization [19].

The study limitations included the possibility of inaccurate responses from participants, as well as the limited population size and restricted age range of the infants included in the study. naccurate responses may have occurred because mothers perceived that they were expected to have a positive perception, potentially leading to response bias toward more positive answer choices. Furthermore, the number of respondents was limited to a single integrated health post (Posyandu), meaning that the findings may not be representative of the entire service area of Sumber Public Health Center, Probolinggo..

CONCLUSION

Based on the research findings, it can be concluded that the majority of mothers in Wonokerso Village, Sumber District, Probolinggo Regency, had a positive perception of basic immunization. Most respondents had also provided their infants with complete basic immunization. Mothers' positive perceptions were associated with their educational levels, previous experience in immunizing their children, and exposure to information about immunization obtained from various sources. The statistical test results also indicated a significant relationship between maternal perceptions and the completeness of basic immunization among infants aged 0–12 months. Mothers with positive perceptions tended to provide complete basic immunization, whereas mothers with negative perceptions tended to provide incomplete basic immunization. Maternal perception is one of the factors associated with the completeness of basic immunization in infants. Therefore, efforts are needed to improve education and disseminate accurate information regarding the benefits,

schedules, and safety of immunization through healthcare professionals and healthcare facilities to foster positive maternal perceptions and increase the coverage of complete basic immunization.

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Conflict of Interest. The authors declare there is no conflict of interest.

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