Evaluation of the Nurses' Practices Concerning Vaccination at Primary Health Care Centers in Al-Amarah City

تقويم ممارسات الممرضين المتعلقة باللقاحات في مراكز الرعاية الصحية الاولية في مدينة العمارة

Ghazwan Abd Al-Hussein Abd Al-Wahid, MS Academic Nursing Specialist, Al Sadr Teaching Hospital, Iraqi Ministry of Health.

Dr. Arkan Bahlool Nagi, PhD, Asst. Prof, Community Health Nursing Department, College of Nursing, University of Baghdad.

Ga_iraq@yahoo.com

الخلاصة

ا**لهدف :** تقويم ممارسـات الممـــرضين المتعلقة باللقاحات وأيجادعلاقة مابين الممارسة و الخصائص الديموغرافية التي تشمل العمر، الجنس، والمستوى التعليمي و الدورات التدريبية.

المنهجية : أجريت دراسة وصفية تقويمية في مراكز الرعاية الصحية الاولية في مدينة العمارة للفتره من ١٧ تشرين الاول ٢٠١٣ لغاية ١٠ أب ٢٠١٤، وذلك لتقويم ممارسات الممرضين المتعلقة باللقاحات في وحدات التحصين. أختيرت عينة غير احتماليه (غرضيه) مكونه من (٧٠) ممرض وقد تم جمع البيانات خلال الفترة من ٩ شباط لغاية ١٣ أيار. تم تحليل البيانات من خلال تطبيق الوسائل الإحصائية الوصفيه التي تتضمن (٢٠) ممرض النسبة المؤية،..) والاستدلاليه (اختبار مربع كاي).

الاستنتاج: وأُظهرت نتائج الدراسة بأن الغالبية العظمى من المشاركين كانت لديهم الممارسة الصحيحة فيما يتعلق باللقاحات؛ وأظهرت الدراسة بوجود علاقات ذات دلالة معنوية بين ممارسات الممرضين والخصائص الديموغر افية التي تشمل العمر، الجنس، والمستوى التعليمي و الدورات التدريبية. التوصيات: أوصت الدراسة إلى ضرورة تطويـر المهارات اللازمـة فــي أداء عمليـة التلقيح للممرضين بهـدف تحسين ممارساتهم، بالإضافة إلى ذلك أوصت الدراسة بإقامة مؤتمرات علمية ودورات تطويرية للممرضين العاملين في وحدات التحصين.

Abstract

Objective: To evaluate the nurse's practices and to find out association between practices and their demographic characteristics of age, gender, education, and training crosses.

Methodology: An evaluative descriptive study was conducted at primary health care centers in Al-Amara city during Nov 17th, 2013 to 10th August 2014, in order to evaluate the nurse's practices concerning vaccination in immunization units. The sample was selected a non-probability (purposive) consist of (70) nurses and the data collection process has been performed from February 9th to the May 13th 2014. The data were described analyzed through use of the descriptive (frequencies, percentage,...) and inferential (Chi-square) statistical analysis procedures.

Results: The findings of the study indicated that the majority of the sample within (40-49) years-old age group (54.3%). In regard to their gender, most of participants were males (70 %). Concerning to their educational level, the highest percentage of the sample was technician institute graduate who represented (58.6%). Concerning the number of training courses (63.3%) of the subjects had between 1 to 3 training courses regarding to vaccination. **Conclusion:** Findings of the study had demonstrated that majority of the participants had correct practice concerning vaccination; and showed there were a significant association between the nurse's practices and their

demographic characteristics of age, gender, education, and training crosses.

Recommendation: The study recommended the need to develop the skills necessary to perform the process of vaccination for nurses in order to improve their practices; in addition, the study recommended the establishment of scientific conferences and development courses for nurses working in immunization units.

Key words: Primary health care nurses; Practices; Childhood vaccination.

النتائج : وأشارت النتائج التي توصلت اليها الـدراسة بأن غالبية افراد العينة هم ضمن الفئة العمرية (٤٠ الى ٤٩) سنة، حيث شكلوا (٣٤.%). فيما يتعلق بالجنس، تبين ان معظم المشاركين من الذكور حيث شكلوا (٧٠%). فيما يتعلق بالمستوى التعليمي، ظهر ان أعلى نسبة من افراد العينة هم خريجي المعهد الفني الذين مثلوا (٣٨.٥%). أما بخصوص عدد الدورات التدريبية في اللقاحات، فأن غالبية افراد العينة (٣٣.٦%) لـديهم من واحد الى ثلاثة دورات تدريبية.

INTRODUCTION:

The vaccines means stimulate the body's immunity to protect the human against subsequent disease or infection. Immunization is the process whereby a human is made resistant or immune to an infectious disease, typically by the administration of a vaccine ⁽¹⁾. Vaccination for children currently saves 3 million lives a year globally and among the cost-effective and most successful public health interventions of the 20th century ⁽²⁾.

Nurses or others who administer vaccination should be knowledgeable and receive continuing education in vaccine storage and handling, the recommended vaccine schedule, contraindications, and precautions prior to administering vaccines and administration techniques, reporting of adverse events, and vaccine benefit ⁽³⁾.

Immunization programs are one of most successful public health measures, the nurse's efficiency is critical to the success of these programs and the incidence of infectious diseases to be declines. Nurses need to high level of practices in vaccination unit is consider important in achieving and maintaining high vaccine coverage ⁽⁴⁾. Globally, nurses play a fundamental role in vaccination practice, whether in mass community vaccination programs or child health centre based programs, all programs must aim to safely and effectively immunize (100%) of a country's population. However, to control vaccine preventable diseases a rate of (95%) vaccination coverage is necessary ⁽⁵⁾. Generally, high level of knowledge and appropriate standards of vaccination practices among nurses must be sustained to achieve a high level of vaccine coverage ⁽⁶⁾.

Objective: To evaluate the nurse's practices and to find out association between practices and their demographic characteristics of age, gender, education, and training crosses.

METHODOLOGY

Quantitative design (a descriptive study) was carried out to evaluate the nurse's practices concerning the vaccination in primary health care centers, from November 17th, 2013 to 10th August, 2014. A non-probability (Purposive sample) of (70) nurses who worked in immunization units for giving vaccines for children who under (six or five years). The data were collected through the use of constructed questionnaires, which consist of two parts. Part one; demographic characteristics. Part two which consist of two parts: nurses' practices during vaccination process and nurses' practices at the end of vaccination process. The nurses practices parts (observational checklist) were applied by using grand mean of score, through intervals (1-1.67) low, (1.68-2.33) moderate, and (2.34-3) high, as well as (L), (M), and (H) respectively.

These items were rated according to the liker scale (always (3); sometimes (2) and never (1)). The data collection process has been performed from February 9th until the May 13th 2014.

The data of present study were analyzed through the application of two statistical approaches. (1) Descriptive statistical approach that includes Frequency, Percentage, and Mean of Score. (2) Inferential statistical approach that includes Chi-Square test. Results were determined as significant at (P<0.05) and not significant at (P<0.05).

2

Kufa Journal For Nursing Science Vol. 5 No.1 January Through April 2015 RESULTS:

| Variables | (N=70) | F | % |
|--------------------|-------------------------------|----|-------|
| | 20-29 | 16 | 22.9 |
| | 30-39 | 12 | 17.1 |
| Age (year) | 40-49 | 38 | 54.3 |
| | ≥ 50 | 4 | 5.7 |
| | Total | 70 | 100.0 |
| Gender | Male | 49 | 70.0 |
| | Female | 21 | 30.0 |
| | Total | 70 | 100.0 |
| | Technician institute graduate | 41 | 58.6 |
| Level of education | Nursing junior graduate | 20 | 28.6 |
| Level of education | Nursing school graduate | 9 | 12.9 |
| | Total | 70 | 100.0 |
| | None | 7 | 10.0 |
| Training courses | 1-3 | 45 | 64.3 |
| | 4-6 | 6 | 8.6 |
| | 7 and more | 12 | 17.1 |
| | Total | 70 | 100.0 |

Table (1): Distribution of the nurses' by demographic characteristics

n = number of sample, F=frequencies, %= Percentages, \ge = equal and more.

The finding of table (1) revealed most of the nurses were male (70.0 %), (40-49) years old (54.3 %), technician institute graduates (58.6 %). Finally, in the above table the results show that majority of the study sample (63.3%) was a participated between 1 to 3 training courses related to vaccination.

| No. Itoma | | Always Sometimes | | Never | | | | | |
|-----------|---|------------------|------|-------|------|----|------|------|------|
| No | Items | F | % | F | % | F | % | M.S | Ass. |
| 1 | Makes sure the child's name, age and address in addition to the history of the dose and type of vaccine to be giving him in vaccination card | 69 | 98.6 | 1 | 1.4 | 0 | 0.0 | 2.99 | н |
| 2 | keeps to be a child in his mother's lap stable to avoid any sudden movement by the child | 47 | 67.1 | 7 | 10.0 | 16 | 22.9 | 2.44 | н |
| 3 | Gives the child the oral polio vaccine prior to other injectable vaccines, if they must be provided in the same session | 34 | 48.6 | 22 | 31.4 | 14 | 20.0 | 2.29 | М |
| 4 | Make sure that oral polio vaccine is swallowed by the child and repeat the | 35 | 50.0 | 30 | 42.9 | 5 | 7.1 | 2.43 | н |
| 5 | Avoids using antiseptics (like alcohol) prior to injecting the dose of BCG vaccine | 69 | 98.6 | 1 | 1.4 | 0 | 0.0 | 2.99 | н |
| 6 | Shakes the vials vaccine that are dissolved prior to their administration so that sediment mixes completely | 2 | 2.9 | 0 | 0.0 | 68 | 97.1 | 1.06 | L |
| 7 | Avoid touching the sterile parts of syringes and needles when to preparing for administration vaccines so as to avoid contamination | 46 | 65.7 | 18 | 25.7 | 6 | 8.6 | 2.57 | Н |
| 8 | Injects the tetra vaccine in (right thigh muscle) antero- lateral aspect of mid thigh deeply and 90 degrees for children less than one year | 46 | 65.7 | 22 | 31.4 | 2 | 2.9 | 2.63 | н |
| 9 | Injects the measles vaccine in the upper part of the arm and subcutaneous | 48 | 68.6 | 20 | 28.6 | 2 | 2.8 | 2.66 | Н |
| I | Average | | | | | | | 2.45 | Н |

| Table (2): Observational Checklist for Nurses Practices du | uring Vaccination Process |
|--|---------------------------|
| Table (2): Observational enceknist for Hurses Fractices u | arma vaccination riocess |

No.= number of item, F=frequencies, %= Percentages, M.S.=Mean of Scores, Ass.= Assessment, Bacillus Calmette Guerin=BCG, Cut-off-point (2), Cut-off-point interval (1-1.67) Low-1; (1.68-2.33) Moderate-2; (2.34-3.00) High-3.

Kufa Journal For Nursing Science Vol. 5 No.1 January Through April 2015

In table (2) presents that there were highly assessment in nursing practices during vaccination process for item number (1, 2, 4, 5, and 7). In addition, the study sample practice demonstrates moderate in item number (3), and low practices at the item number (6). However the average means of score were (2.45).

| | Items | | ways | 1 | etimes | 1 | ever | M.S | Ass. |
|----|---|----|------|----|--------|----|------|--------|------|
| No | Items | F | % | F | % | F | % | 111.65 | A35. |
| 10 | Advised the mother to give antipyretics such as Antipyrol at high temperature of the child after vaccination | 14 | 20.0 | 42 | 60.0 | 14 | 20.0 | 2.00 | М |
| 11 | Alert the mother next date of vaccination according the child vaccination schedule | 26 | 37.1 | 34 | 48.6 | 10 | 14.3 | 2.23 | Μ |
| 12 | Marks of remaining and unopened vaccine by "RETURN" vaccine at the end of each session to be used at first in next session | 43 | 61.4 | 7 | 10.0 | 20 | 28.6 | 2.33 | М |
| 13 | Avoids keeping the open vaccine multiple doses to the refrigerator, but discards them at the end of the session | 69 | 98.6 | 1 | 1.4 | 0 | 0.0 | 2.99 | н |
| 14 | Collects the used and opened vaccines, used and unsterile syringes and needles in a special container for the purpose of being sent to the incinerator | 69 | 98.6 | 1 | 1.4 | 0 | 0.0 | 2.99 | Н |
| | Average | | | | | | | 2.51 | Η |

| Table (3): Observational | Checklist for Nurses | Practices at the end of | Vaccination Process |
|--------------------------|----------------------|--------------------------|-----------------------|
| Table (3). Observational | CHECKIIST IOI MUISES | r ractices at the end of | v accination r rocess |

This table (3) demonstrates highly assessment for items (13, 14) and moderate mean of score for items (10, 11, and 12) respectively, regarding nurses practices at the end of vaccination process, with average mean score was (2.51).

| Table(4) : Distribution of the participants' level of practices through the Mean score for |
|--|
| Observational Checklist related to Nurses practices |

| No. | Level of Practices | Frequency | Percent |
|-----|--------------------|-----------|---------|
| 1. | Low | 0 | 0.0 |
| 2. | Moderate | 17 | 24.3 |
| 3. | High | 53 | 75.7 |
| | Total | 70 | 100.0% |

No. = number of level, Cut-off-point (2), Cut-off-point interval (1-1.67) Low-1; (1.68-2.33) Moderate-2; (2.34-3.00) High-3.

Table (4) describes that most of participants had highly practices related to vaccination

(n=53; 75.7%), followed by quarter of them who had moderate practices (n=17; 24.3%).

| $\Lambda q_0 (v_0 q_r)$ | Always | Sometimes | Never | Total |
|-------------------------|-----------------------------|-------------|-------|---------|
| Age (year) | F | F | F | F |
| 20-29 | 99 | 46 | 60 | 205 |
| 30-39 | 148 | 57 | 59 | 264 |
| 40-49 | 289 | 89 | 80 | 458 |
| 50 and more | 428 | 103 | 82 | 613 |
| Total | 964 | 295 | 281 | 1540 |
| χ^{2} obs.= 41.59 | 04 χ ² ci | rit. =12.59 | df=6 | P≤ 0.05 |

 Table (5): Association between the nurse's practices and their ages

 χ^2 obs. = chi-square observed, χ^2 crit = chi-square critical, df= degree of freedom, p = probability value, P \leq 0.05= significant, P \geq 0.05= non-significant.

The table (5) demonstrates that there were a significant association between nurse's practices concerning vaccination and their age groups at ($P \le 0.05$).

| Gender | Always | Sometimes | Never | Total |
|------------------|----------------------------|-----------|----------|-------|
| | F | F | F | F |
| Male | 662 | 197 | 198 | 1057 |
| Female | 302 | 98 | 83 | 483 |
| Total | 964 | 295 | 281 | 1540 |
| χ^2 obs.= (| $).908 \qquad \chi^2 cr^2$ | it. =5.99 | df=2 P≥0 | .05 |

 Table (6): Association between the nurses' practices and their gender

Table (6) indicated not significant association between nurse's practices concerning vaccination and their gender at ($P \ge 0.05$).

Table (7): Association between the nurse's practices and their educational level

| | Always | Sometimes | Never | Total |
|----------------------------------|----------|--------------------------|-------|---------|
| Level of educational | F | F | F | F |
| Technician institute graduate | 523 | 182 | 197 | 902 |
| Nursing junior graduate | 295 | 89 | 56 | 440 |
| Nursing school graduate | 146 | 24 | 28 | 198 |
| Total | 964 | 295 | 281 | 1540 |
| χ^2 obs.= | 29.814 χ | ² crit. =4.49 | df=4 | P≤ 0.05 |

Table (7) indicates that there were a significant association between nurse's practices concerning vaccination and their educational level at ($P \le 0.05$).

Table (8): Association between the nurse's practices and their training courses

| Number of training courses | Always | Sometimes | Never | Total |
|----------------------------|---------------------|-----------|---------|-------|
| | F | F | F | F |
| None | 154 | 73 | 95 | 322 |
| 1-3 | 117 | 36 | 39 | 192 |
| 4-6 | 143 | 53 | 41 | 237 |
| 7 and more | 550 | 133 | 106 | 789 |
| Total | 964 | 295 | 281 | 1540 |
| χ^2 obs.= 65.356 | χ^2 crit. = 12 | 2.59 df=6 | P≤ 0.05 | |

Kufa Journal For Nursing Science Vol. 5 No.1 January Through April 2015

The table (8) showed that there were a significant association between nurses practices concerning vaccination process and their training courses at ($P \le 0.05$).

DISCUSSION

The findings of the present study indicated that the majority of the sample (54.3%) at age group (40-49) years old. This result reveals a fact that the most of the nurses in the immunization units were adult's nurses, because of this type of service needs adults and qualified nurses, which reflects policy of supported the health institution to expanded program on immunization (EPI). This result comes along with another study which reported that most nurses age group was between (40-50) years about (37.2%) of the study sample ⁽⁷⁾. Relative to the nurse's gender, majority of them were males (70.0%), because of the social situation prevents females from practicing the profession of nursing in the study area according to vision of investigator. These results agree with another study which had founded those males more than females (74%) of the study sample ⁽⁸⁾. Concerning the nurse's educational level, majority of sample was technician institute graduate who constituted (58.6%). This result supported by another study which reported most of sample was nursing institute graduates 39.5% ⁽⁹⁾. Regarding of training courses most of the study sample that constitute (63.3%) have participated (1-3) training courses related to vaccination. This result supported by another study which mention that (77.7%) of nurses attend at least one training course on vaccine practices during their work in primary health care centers ⁽¹⁰⁾ (Table-1).

The finding of the present study showed that the majority participants have performed these practices properly with adequate mean of scores for most items. In general, these results may be related to that the subjects were (1-3) training courses (64.3%). In regard to item (1) was supported by WHO (2004), recommended the nurses must be looked at the child immunization card to determine the child age and vaccines the infant has received ⁽¹¹⁾. The result of the item (2) was agreed with NHMRC, (2013) stated that necessary those children do not move during injection of vaccines, because the excessive restraint can increase their fear and result in increased muscle tension ⁽¹²⁾. Concerning item (4) this result agrees with Palihawadana, et. al.;

Kufa Journal For Nursing Science Vol. 5 No.1 January Through April 2015

mention that the nurses must make sure if a child vomits during administration of oral polio vaccine must be repeat the dose is recommended ⁽¹³⁾. Regarding item (5) this finding was supported by NHMRC, which stated that the nurses not advisable to clean the injection site with an alcohol swab before injection the dose of vaccines, because some of the live components of the vaccine are killed if they come in contact with alcohol ⁽¹²⁾. The result of item (7) was consistent with Al-Taee, who found (70.9%) of the study participants avoided touching the sterile part of syringe and needle during the injection practices ⁽⁹⁾ (Table-2).

The results of item (13) supported by CDC, (2012) which recommended the opened vaccines must be discarded at the end of each vaccination session ⁽¹⁴⁾. Regarding to item (14) this result same opinion with WHO, (2002) which mention that the nurses should put used needles and syringes in safety boxes immediately after each administration of vaccine and sent to the incinerator, because to prevent infecting themselves and community ⁽¹⁵⁾ (Table-3).

In our study, demonstrates the majority of participants had high practices concerning vaccination (n= 53; 75.7%), this result supported by Al-Taee, who reported vaccinators had high practices through increasing number of years of experience and higher of the educational level ⁽⁹⁾ (Table-4).

Relative to association between nurse's practices and their demographic characteristics, the results of data in (table-5) illustrate that there was a significant association between nurses' practices concerning vaccination and their ages. Considered that an increase in the age of nurses with years of experience leads to increased knowledge and practice and have a positive impact on the process of vaccination. This result agreed with Daboer, et. al.,(2010) who founded the nurse's practices about vaccination against hepatitis (B) infection increased with age of respondents and highly significant association ⁽¹⁶⁾. Concerning their gender, the finding (table-6) shows that there were not significant association between nurses' practices concerning vaccination and their gender. This result comes along with another study which reported although more males (24.5%) than female (18.6%) were vaccination against hepatitis B in Nigeria, this difference was not statistically significant between genders ⁽¹⁶⁾. The findings agreed with Al-Taee, reported that significant associations between nurses' practices and their level of education, this result may be related to the fact the majority of nurses were technician nursing institute, who were accounted for (58.6%) of the total numbers of study sample, who were the highest educated nurses ⁽⁹⁾ (table-7). Finally, in regarding for training courses the results of study revealed that a significant association between nurses practices concerning vaccination and their training courses. This finding of (table-8) was confirmed by Buxton et. al., (2013) who found that most nurses 98.4% receiving vaccination training outside of the academic setting compared

with 55.6% of physicians, shows nurses provider scored highly significantly than physician on all 3 domain of vaccination practices with $P < .001^{(7)}$.

CONCLUSION:

Findings of the study had demonstrated that majority of the participants had correct practice concerning vaccination; and showed there were a significant association between the nurse's practices and their demographic characteristics of age, gender, education, and training crosses.

RECOMMENDATION:

1. Educational and training programs should be developed and implemented for nurses in order to improve their practices regarding vaccination process.

2. Preferably the establishment of scientific conferences and development courses for nurses working in the administration of vaccines in immunization units.

REFERENCES:

- 1. World Health Organization (WHO): Immunization, Factsheet, 2013, p.1. Available online: <u>http://www.who.int/topics/immunization/en/</u>.
- Williams, N.; Woodward, H.; Majeed, A.; Saxena, S.: Primary care strategies to improve childhood immunization uptake in developed countries: systematic review, Journal of the Royal Society of Medicine Short Reports, Vol (2), No (82), 2011, p.p.1-8.
- National Vaccine Advisory Committee (NVAC): Standards for Child and Adolescent Immunization Practices: Journal of the American Academy of Pediatrics, Vol (112), No (4), 2003, p. 961.
- Salisbury D.; Ramsay M. and Noakes K.: Green Book Immunization Against Infectious Disease, 3rd ed, 2006, Printed in Great Britain, p.p.1-25.
- Smith, C.; Heartfield, M.: Australian practice nurse immunization scholarships: an evaluation study: Australian Journal of Advanced Nursing, Vol (27), No (1), 2009, p. 7.
- Al-Ayed, I. H.; and Sheik, S.: Knowledge & Practices of childhood immunization among primary health care providers in iyadh city: part II precautions and contraindications to vaccination: Journal of Family & Community Medicine, Vol (13), No (1), 2006, p.p. 19-23.
- Buxton, J. A.; McIntyre, C. C.; Tu, A. W.; Eadie, B. D.; Remple, V. P.; Halperin, B.; et. al.: Who knows more about immunization?, Canadian Family Physician J, Vol (59), 2013, p.p. 514-521.

Kufa Journal For Nursing Science Vol. 5 No.1 January Through April 2015

- Smith, F. G.; Harris, P.; and Turner, N.: Comparison of general practitioner and practice nurse perceived barriers to immunization uptake, NZFP, Vol (32), No(3), 2005, p.p. 164-171.
- 9. Al-Ta'ee, T. M. K.: Practices of Health Care Worker Concerning Vaccination in Baghdad City, University of Baghdad/College of Nursing, 1998, p.p.40-44. [Thesis]
- Al-Ayed, I. H.: Knowledge and practices of childhood immunization among primary health care providers in Riyadh City: Part I: Handling and administration of vaccines, Current Pediatric Research, Vol (9), No (1), 2005, p.p. 15-51.
- World Health Organization (WHO): Immunization in practice, A Practical Guide for Health Staff, Geneva, Switzerland, 2004, p.1-5.
- 12. National Health and Medical Research Council (NHMRC): **The Australian Immunization Handbook**, 10th ed, 2013, Australian Government, p.p. 1-18.
- Palihawadana, P.; Peiris, S.; Amarasinghe, A.; Ginige, S.; Wijesinghe, R.; Premaratne, R.; et. al.: Immunization Handbook, 3rd ed, 2012, Epidemiology Unit, Sri Lanka, p.p. 2-35.
- 14. Centers for Disease Control and Prevention (CDC): Vaccine Storage & Handling Toolkit, National Center for Immunization and Respiratory Diseases, 2012, p.p. 96 -100.
- 15. World Health Organization (WHO): "First, do no harm" Introducing auto-disable syringes and ensuring injection safety in immunization systems of developing countries, Department of Vaccines and Biologicals, Geneva, Switzerland, 2002, p.p.1-3.
- 16. Daboer, J. C.; Chingle, M. P.; and Banwat, M. E.: Knowledge, Risk Perception and Vaccination against Hepatitis B Infection by Primary Healthcare Workers In Jos, North Central Nigeria, The Nigerian Health Journal, Vol (10), No (1-2), 2010, p.p. 9-13.