

## **Chapter 6**

### **Conclusion**

The qualitative phase of study helped in identifying the gaps in knowledge and practices of primary caregivers related to childhood immunization. The following needs were identified after conduction of focus group discussions.

- An understanding of importance of vaccines in preventing illnesses among children. The contribution of vaccines in providing immunity against infectious diseases needs to be in the caregivers' knowledge.
- Immunization schedule and importance of compliance must be informed to the primary caregivers.
- Vaccine specific information at every immunization events should be provided to them so as to anticipate possible health issues that may arise.
- More information about management of vaccine related problems was desired by them. Fever management, pain reduction, feeding problems were some of their concerns that needed attention of health care staff.
- None of the primary caregiver was aware about allergic and severe reaction to vaccination.
- Malpractices related to home management of vaccine related problems were also identified such as applying non recommended ointments at vaccination site, hot fomentation and massaging the vaccinated area.

The quantitative part of study established effectiveness of the need based interventional package in terms of their awareness and self-efficiency.

- The awareness among interventional group increased significantly after implementation of interventional package when compared to their baseline levels.
- No significant improvement in awareness occurred after six weeks and the level remained almost same at nine months. The control group had marginal increase in their awareness till nine months from their baseline level.

- Self-efficacy in interventional group also witnessed significant increase from baseline after implementation of interventional package and increased consistently till nine months while the control group remained at same level at all successive assessments.
- The vaccine related problems were present at all immunization events. The main problems reported were, pain at vaccination site, excessive crying, irritability and restlessness, drowsiness/sleep problems, redness& swelling, nodule formation, feeding problems and fever.
- Vaccination compliance among both the group was good at birth. Compliance with immunization schedule was observed to increase in both the groups. Type of locality, educational level of primary caregivers and their occupational status were found associated with timeliness of vaccination.

**Implications of the Study:** this study has the following implications related to clinical practice and public health.

- The knowledge deficit of primary caregivers was at alarmingly low level and suggests the need for educative intervention on the part of health professionals.
- The study justifies use of an interventional package in improving knowledge and confidence of primary caregivers in caring for their children.
- Introduction of an early intervention is required to bring any change in mothers' caregiving capacity and decision making as response is better during initial days.
- Minor local and systemic problems were frequently reported among children while severe reaction or allergies were uncommon.
- Attributes of children like birth weight, gender influenced incidences of vaccine related problems among both the groups.
- Interventional package can affect immunization compliance among primary caregivers and prevent missed doses.

- Education, locality and occupation of primary caregivers were the characteristics found influencing awareness, self-efficiency and timeliness of immunization.

**Recommendation based on the study:** the following recommendations can be made based on the results obtained from the present study.

- Nursing staff and other health personnel should take time to address parental concerns regarding vaccination.
- Adequate information after vaccination must be provided to the caregivers. It can also prevent unnecessary hospital visits.
- Information document regarding vaccination and care of children at home after vaccination must be provided to the caregivers that they can read and follow.
- Health care staff must be aware of non-pharmacological methods of pain reduction methods for children and should teach the same to the caregivers.
- Focus group discussions regarding caregiver's experiences and problems faced by them can be organized.
- Simple procedures like breastfeeding, signs of good attachment, facilitated tucking and temperature monitoring can be demonstrated to the caregivers by the nursing staff so as to enable them.
- Other techniques to provide reminders to caregivers for vaccination need to be employed to achieve higher vaccination compliance and timeliness.

**Recommendations for future research:** the following recommendations can be made regarding conduction of future research.

- Further research can be conducted to observe the performance of caregivers during vaccination.
- Studies can be carried out to determine immunization compliance and vaccine related problems among children beyond infancy.

- Research can also be conducted to study various reasons for vaccination delay or missed doses.
- Studies regarding knowledge among health care staff regarding AEFI surveillance can be conducted.