

**ATTITUDE OF MOTHERS TOWARD THE IMMUNIZATION OF UNDER-FIVE CHILDREN AGAINST POLIOMYELITIS, IN MARABA RIDO, KADUNA STATE.****Sindama Helen Ph.D, Hirse Aisha Kasham M.Sc. (Ed.), James Antikirya Ghumdia & Daniel Yemi Sympathy****Department of Physical and Health Education, Faculty of Education, University of Jos****ABSTRACT**

*The study was carried out to help find the Attitude of Mothers toward the Immunization of Under-five Children against Poliomyelitis, in Maraba Rido, Kaduna State. The survey research design was used for the study. The population of the study is made up of mothers of under-five children in Maraba Rido, Kaduna State out of the this the total sample size of 250 were used for the study, a structural questionnaire of four section was used to elicit information on the attitudes of mothers toward immunization, the Benefits associated with immunization of under-five children, the factors influencing the attitude of mothers toward immunization and the problems associated with immunization under-five children against polio. The instrument was given to three experts on research, who of whom are from the department of Physical and Health Education and one from Test and Measurement department of the faculty of Education, University of Jos, whose input on the instrument were very helpful. It was protected using respondent with similar characteristics to those in the area of the main study and a reliability coefficient Index of 0.7 was obtained, which was seen as a reliable figure for the instrument to be used for the present study. The attitudes of mothers toward immunization was I didn't know the place and time for immunization ( $X=1.1$ ). The Benefits associated with immunization of under-five children Revealed that immunization enhances the quality of life (205, 82%). The factors influencing the attitudes of mothers towards immunization, revealed that there is poor knowledge on the practice of immunization (190, 7%). And the problems associated with immunization of under-five children against polio shows that mother educational status can influence immunization (190, 76%).*

**INTRODUCTION**

An important aspect of Life protection and sustenance is a use of immunization especially for under-five children. Immunization according World Health Organization (WHO 2013) has defined immunization as the process whereby a person is made immune or resistant to an infectious disease typically by the administration of a vaccine. These vaccines help to stimulate the body's own immune system to protect the person against subsequent infection or disease. In addition, (Wade 2014) immunization is the process of protecting people from infective disease through vaccination and it is often seen as one of the most important medical achievement. The vaccine stimulates the immune system to produce antibodies which further protect the vaccinated person from infectious diseases. If the majority of the population (above 95%) is timely and fully vaccinated, the whole community will be protected from the spread of disease, including those who, for some reason, have not received vaccines. And in addition (Yola A.W. 2003) defines immunization as the basically way of boosting up or building immunity against a disease via vaccination. Vaccination in turn means, introducing a live death or weakened form of a pathogen into the body in order to make the body get used to and build defense against it, so that whenever it gets into the body next time, the body just destroys it without giving you any troubles.

According to (Navaneetha, Sherin, Thushara, Rosemary, Bhuvanendu, Hilal (2019) mention the six (6) killers disease which are measles, Poliomyelitis, A. Phtheria Pertussis, Tetanus and Hepatitis. These are the disease that requires immunization of among under-five children. The success or otherwise of immunization might by determine by the attitude of the mothers

According to Stephen, Shaw, Gusen, Thangeswaran, Nanvyat (2019) explain poliomyelitis as an acute infectious viral epidemic and is endemic throughout the World. It is caused by an ultramicroscopic virus called polio virus-a human entero virus and member of the family of picornaviridae. It is transmitted by droplets infections and by oral ingestion of the virus. It is mostly found in the gastro-intestinal tract of an infected person. It can be excreted in fecal matter as saliva or mucus from the oral cavity and nostrils of an infected person.

Although majority of the respondent had good knowledge about poliomyelitis, their knowledge on the means of transmission of the polio virus was poor (49.3%). This supports the findings of a previous study conducted by oswale and about who found that 55.7% of the respondent did not know the mode of poliovirus transmission.

As describe by Ineoglu (2010), attitudes are generally described as the mental, emotional, and behavioral tendencies of people organized with regard to experience knowledge emotion and response to a particular situation in a particular time frame. In this case the attitude at mothers toward the immunization of under-fiver children against polromylitic attitude can either be positive or negative.

According to Anas, Shamsudeen, Gerald (2019) carried out research on the attitude of mothers towards the immunization of their children. The result from the analyses carried out using, SPSS, show that mothers' locality place of vaccination, mothers' educational status, age at vaccination, spouses educational status mothers' religious beliefs as well as mothers age group at birth of child are all positively associated with attitudes of mothers towards vaccination. Further results finally revealed that donation of gift items to mothers serve as positive inducement towards improving the attitudes of mothers towards immunization of their children.

Negative attitudes of mothers towards immunization of children results from reasons such as illiteracy, ignorance or lack of enlightenment towards immunization religious influence and doctrines and misconceptions regarding immunization,there situations might have come as the results of factors been experience by the respondence.

Discussing about problems relating to immunization in Nigeria by Endurance, Musa and Precious

Misperception of routine immunization: Incorrect knowledge as to the preventive role of routine immunization is widespread in Nigeria. Quantitative research conducted in six states in 2004 reveals that in rural Enugu, diarrhoea, fever convulsion, vomiting and malaria are believed to be vaccine preventable diseases (VPDs) while in rural and urban Kano, malaria, teething problems, vomiting, convulsion and pneumonia are listed. During pilot community research in March 2005), a number of immunization decision makers and caregivers in Katsina State stated that only polio immunization is required that once a child has receive its polio drops', it is immunized against all childhood illnesses including those for which there is no vaccine available, for example acute respiratory infection. Those least likely to demonstrate high levels of correct knowledge including people who do not use public health facilities, and illiterates.

Influence of Religion: In Nigeria the greatest challenge to the acceptance of immunization is a religious one especially among the northern Nigerian Muslims. Generally, the Muslim north has the low immunization coverage, the least being 6% (northwest) and the highest 44.6% (southeast).

In Ekiti State (Southwest), for example, the northeast and west of Ekiti, with a stronger Islamic influence has low immunization coverage and also poor educational attainment. Christians have 24.2% immunization coverage as compared to only 8.8% for Muslims.

Inadequate Cold Chain Equipment: Over the years Nigeria has received huge quantities of cold chain equipment. Despite this support, much of the cold chain appears to be beyond repair. This is partly due to the focus on polio eradication, which uses freezers. In one zonal store, only one of the three cold rooms was working with only a single compressor operational.

Political Problems:The downward trend in the coverage of all the antigens appears to be associated with political problems. In Nigeria, the boycott of polio vaccination in the three

northern states in 2003 created a global health crisis that was political in origin. These political problems included low government commitment to ensure the fulfillment of EP, policy as well as over centralization in the administration of EP, at the Federal level of governance in Nigeria. Some positions offer potential for patronage due to the large payments of NID activities. This has led to political appointments and frequent changes in personnel as some local government area chairmen wish to bestow or repay political favours. Even at the staff government level increased political interference has been reported to the in the appointment of civil servants also result in frequent changes of staff and the appointment of inappropriately qualified staff.

**Rejection of Routine Immunization:** Another problem and challenges facing immunization programmes in Nigeria is the rejection of selected vaccines. Vaccination by parents or religious bodies more especially in the northern part of this country. The reasons are fear and confusion and low confidence and lack of trust.

**Shortage of Vaccines and Immunization Supplies:** Under the NPIs the first mandate is to support the states and local government in their immunization programmes by supplying vaccines, needles and syringes, cold chain equipment and other things and logistics as may be require for those programmes. However, the supply of vaccines has always been problematic for Nigeria, primarily because funds were not sufficient and were not released on time for example in 2001 the whole amount was approved but only 61% was released, the late release of funds (April 2001) meant that vaccine had to be bought on the spot market at inflated prices.

Immunization is a simple and effective way of protecting your children and the entire family. According to health journal published by the center of disease control. List the five important Reasons to vaccinate your child.

- Immunization can save your child's life: Because of advances in medical science your child can be protected against more disease than even before.
- Vaccination is very safe and effective: Vaccines are only given to children after a long and careful review by scientist's doctors, and healthcare professionals.
- Immunization protects others you cure about: to help keep them safe, it is important that you and your family but also helps prevent the spread of these disease to your friends and loved ones
- Immunization can save your family time and money: A child vaccine preventable disease can be denied attendance at schools or child care facilities some vaccine. Preventable disease can result in prolonged disabilities and can take a financial toll because of cost time at work, medical bills or long-term disability care.
- Immunization protects future generation: vaccines have reduced and in some cases, eliminated much disease and that billed or severely disabled people just a few generations ago. For example, small pox vaccination eradicated that disease worldwide.

Scholars (such as Shehu, et al. 2015 and Imoh, 2013 among others) assert based on available records that without the immunization against childhood killer diseases, such as poliomyelitis, measles diphtheria, Whooping cough tuberculosis, among others, about 216,000 Nigeria children will die each year, an average of about 600 per day and an additional 100,000 children are liable to physical disability. This child mortality is of a serious concern to various state holders, such as the United Nation Millennium Development Goals (MDGs) United Nations Children Funds (UNICEF) Federal and State Government Agencies Families are individuals: This is because the continuity of any generation depends on the ability to raise new ones and ensures their survival.

Immunization are important the six killer diseases (measles poliomyelitis, Diphtheria, pertussis Tetanus and Hepatitis) which are preventable by immunization, can and do cause crippling and sometimes death. These illnesses are serious and their complications can be terrible. With the exception of tetapres, these diseases are contagious. They can spread rapidly from child to child and from community to community. As long as children remain unprotected against them, serious outbreaks at disease even epidemics can occur hence the present study on

the attitudes of mothers toward immunization of their children against poliomyelitis in Maraba Rido, Kaduna State.

### **RESEACH QUESTIONS**

To give direction to this work, the following research questions where stated:

1. What is the attitudes of mothers towards immunization
2. What is the benefits of immunization
3. What is the factors influencing immunization
4. What are the problems associated to immunization in Maraba Rido Kaduna State

### **Methods**

This section is a presentation of various techniques used in carrying out the study specifically; the chapter describes the following research design, population for the sample, sample of the study of the study, sampling technique, instruments for data collection, description of instrument, procedures for instrument development validity and reliability of the instrument, method of data collection and method of data analysis.

A research design is a plan that guides the researcher in conducting a study that he can collect evidence that either support or refutes a claim about an educational phenomenon. The manner which an investigation is conducted will dictate the level of validity of the conclusion. Brog and Gall (1989) defines the term research design a process of creating an empirical test to support or refute a knowledge claim.

The research design adopted for the purpose of the study is the survey research design is a method that describes a given state of affairs at a particular time. It seeks to describe unit in detail, in context and holistically. Descriptive survey research is the most frequently used method for collecting information about people's attitudes, opinions, habits and a variety of educational issues. This research design is chosen because a generalization of the population can be inferred as it will be expensive for the researcher to study the population as a while.

A population in research is the while group of things or bodies which a researcher is interested in studying and about which he intends to obtain information about and draw conclusion. Population in research is the number of people living in a place.

The population for this study comprised all mothers of under five children in Maraba Rido, Kaduna State. Who are about 250 as estimated. All the population will be used as sample since the population is of a manageable size, the while population will be used as sample. On this study a purposive sampling technique is used in the selection because it allows for hand-picking of the sample. According to Kajang, David and Jatau a purposive sampling includes subjects selected on the basis of specific characteristics or qualities and eliminate those who fail to meet these criteria (Wimmer and Dominick, 1987). In this method of sampling the researcher simply hand-picks, the sample because to his judgments, they possessed the specific characteristics or qualities he wants. In other words, the researcher selects a sample which simply satisfied his specific needs.

The questionnaire is use for this study. It is known that the questionnaire is the most widely used method of data collection in research. A questionnaire can be referred to as a set of question that is related to the purpose of study to which the respondents are expected to respond in writing. A questionnaire can be used for obtaining factual information from respondent about the past present and future events.

The instrument for this study is a self-structured questionnaire designed to collect information from the respondents, on attitudes of mother toward the immunization of their under-five-children against poliomyelitis. There are four (4) sections to the instrument. Section A has (13) statements eliciting to obtain information on attitude of mother toward immunization, the instrument use strongly agreed (SA) Agree (A) undecided (UN) Disagree (D) strongly disagree (SD). For this section dealing with attitude, all positive statements will carry (1) for SA

(2) for A (3) for UN, (4) for D (5) for SD. While for negative statements SA will carry (5) A (4) UN (3) D (2) and SD (1)

The criterium mean was decided by adding all the scores and dividing by 5.

Therefore  $\frac{5 + 4 + 3 + 2 + 1}{5} = \frac{15}{5} = 3$

Therefore any item that has 3 and above is said to be a negative attitude and any item that has below 3 said to be a positive attitude.

Section B sought for information on the benefits of immunization, and has 14 statement. Section C has 10 statement which sought for information on factors influencing the attitudes of mothers toward immunization. Section D looked for information on the problems associated with immunization of under five children against poliomyelitis, and has 10 statement. The instrument use Yes or No for section B, C, and D

Validity is the extent to which an instrument measure what it is designed to measure. The questionnaire for this study was validated by three experts from various fields. One expert from test and measurement, two experts from physical and Health education, all from the faculty of education, university of Jos, plateau state. A copy of the drafted questionnaire was given to them for the purpose of validation in the following areas. Content validity, appropriateness of the items, clarity of statement in the instrument and whether or not the items, are related to the subject under study. Necessary corrections and observation were made and they are included in the work.

Reliability means relative absence of errors of measurement in measuring instrument. In order to determine the reliability of the instrument thirty 30 people were used to try test the instrument who were not part of the main sample population. The data obtained were coded and analysed using cronbach alphamethod to test for internal consistencies of the instrument. It was done using half split method for reliability test and the reliability co-efficient of 0.70 was obtained. This indicated that the instrument was used for the main study.

A letter of introduction that was duly signed by the Head of Department of Physical and Health Education, Faculty of Education, University of Jos introducing the researcher was obtain by the researcher from the department. The letter was used for the purpose of instrument administration to the selected respondents for the data collection. The researcher also considered careful observation of the respondents on the consequence of behaviour while carrying out the research. The rights and dignity of participants and privacy was considered. The research makes it clear to respondents that they are free to decide on whatever information they wish to share with the researcher and that they are under no pressure or obligation to disclose information that they do not wish to disclose. And for the purpose of ensuring hundred percent return of the questionnaire, the completed questionnaires were collected on the spot.

Simple percentage method of data analysis was employed to analyze the data. The choice of simple percentage method of data analysis is appropriate because of clarity in the presentation of information thus facilitating the reader's understanding.

## PRESENTATION AND DISCUSSIONS

**Research Question 1:** What are the attitudes of mothers toward immunization?

The data answering research question one are contained in table 1

**Table 1:Attitudes of Mothers Towards Immunization**

SN	ITEM	SA	A	UN	D	SD	$\bar{X}$
1	I believe polio immunization is good for my child	115	83	35	7	10	1.8
2	I believe immunization prevents childhood disease	83	98	41	23	5	2.0
3	I am too busy to take my child for immunization	50	45	77	61	17	2.8
4	I didn't know the place and time for immunization	41	45	49	86	29	1.1
5	I don't have knowledge on immunization	47	35	62	83	23	3

6	I cannot queue for long waiting to be immunized	58	52	50	71	17	2.7
7	I choose to immunized my child	63	48	63	60	16	2.6
8	The father decide on the immunization of the child	51	41	68	70	20	2.5
9	I receive gifts when I come for immunization	48	38	73	68	23	2.9
10	I don't have money to immunized my child	52	44	83	55	16	2.7
11	I don't believe in immunization or vaccine	50	46	60	77	17	2.8
12	I heard bad things about immunization	60	40	68	65	17	2.7
13	I postponed going until another time	53	45	81	59	12	2.7

The result in table one Revealed that I didn't know the place and time for immunization ( $x=1.1$ ), I believe polio immunization is good for my child ( $\bar{x} = 1.8$ ), I believe immunization prevents childhood diseases ( $x = 2.0$ ), the father decide immunization of the child ( $x = 2.5$ ), I choose to immunized my child ( $x = 2.6$ ), others are I cannot queue for long waiting to be immunized ( $x = 2.7$ ), I don't have money to immunized my child ( $x = 2.7$ ) and I heard bad things about immunization ( $x = 2.7$ ), others are I postponed going until another time ( $x = 2.7$ ), I am too busy to take my child for immunization ( $x = 2.8$ ), I don't believe in immunization or vaccine ( $x = 2.8$ ) I receive gifts when I come for immunization ( $x = 2.9$ ) and I don't have knowledge on immunization ( $x = 3.0$ ). Were the attitudes of mother toward immunization in Maraba Rido, Kaduna State? Except I don't have knowledge on immunization ( $x = 3.0$ )

### Research Question 2:

What are the Benefit associated with immunization of under-five children? The answering research question two are contained in table 2

**Table 2: Benefits Associated with Immunization of Under-Five Children**

SN	ITEM	Yes		No	
		F	%	F	%
1	Immunization help in prevention of infectious diseases	201	80.4	49	19.6
2	Immunization reduces child mortality	160	64	90	36
3	Immunization increases immunity power	173	69.2	77	30.8
4	Immunization reduces the cases of the deformity and disability	168	67.2	82	32.8
5	It helps children to look and live healthier lives	182	72.8	68	27.2
6	It reduce the severity of diseases	174	69.6	76	30.4
7	Immunization have impact on economy growth	141	56.4	109	43.6
8	It prevents absenteeism from work due to frequent illness	160	64	90	36
9	It helps controlling and eradicating of disease	177	70.8	73	29.2
10	Immunization enhance the quality of life	205	82	45	18
11	Keeps parents focused at work	164	65.6	86	34.4
12	Immunization cause less than treatment	155	62	95	38
13	Immunization increases school attendance	145	58	105	42
14	It improve child intelligence	127	50.8	123	49.2

The results in table two revealed that immunization enhance the quality life (205,82%), immunization help in prevention of infectious diseases (201, 80.4%), it helps children to look and live healthier lives (182, 72.8%), it helps controlling and eradicating disease (177, 70.8%), it reduce the severity of disease (174, 69.4%), immunization increases immunity power (173, 69.2%), immunization reduces the cases of deformity and disability (168, 67.2%) and it keeps parents focused at work (164, 65.6%), others are, immunization reduces child mortality (160, 64%) immunization cost less than treatment (155, 62%), immunization increases school attendance (145, 58%), immunization have impact on economy growth (141, 56.4%) and immunization improves child intelligence (127, 50.8%).

Were the benefits associated with immunization of under five children in Maraba rido, Kaduna State.

### Research Question 3

What are the factors influencing the attitudes of mother towards immunization? The answering the research question 3 are contained in table 3.

**Table 3: Factors Influencing The Attitudes of Mothers Towards Immunization.**

SN	ITEM	Yes		No	
		f	%	f	%
1	There is poor knowledge on the practice of immunization	190	76	60	24
2	Religion has a significant influence on immunization	155	62	95	38
3	There is shortage of vaccine and immunization supplies	123	52.8	118	47.2
4	There is poor implementation of immunization policies	134	53.6	116	46.4
5	Lack of adequate equipment is a barrier to immunization	156	62.4	94	37.6
6	Fear and confusion affects the acceptance of immunization by parents	159	63.6	91	36.4
7	Fathers attitudes can influence child immunization	151	60.4	99	39.6
8	Lack of qualified and appropriate staff affect immunization	162	64.8	88	35.2
9	There are no resources for maintaining immunization programs	149	59.6	101	40.4
10	Deterioration in health care service influences immunization practice	157	62.8	93	37.2

The results in table three revealed that there is poor knowledge on the practices of immunization (190, 76%), lack of qualified and appropriate staff affect immunization (162, 64.8%), fear and confusion affect the acceptance of immunization by parents (159, 63.6%), deterioration in health care service influences immunization practice (157, 62.8%), and lack of adequate equipment is a barrier to immunization (156, 62.4%), others are religion has a significant influences on immunization (155, 62%), fathers attitudes can influence child immunization (151, 60.4%), there are no resource for maintaining immunization (149, 59.6%), there is poor implementation of immunization policies (134, 53.6%), and there shortage of vaccine and immunization supplies (132, 52.8%) were the Maraba Rido, Kaduna State.

### Research Question 4

What are the problems associated with immunization of under five children against polio. The answering research questions four are contained in table 4.

**Table 4: Problem Associated with Immunization of Under Five Children Against Polio**

SN	ITEM	Yes		No	
		F	%	F	%
1	Mothers educational status can influence immunization	190	76	60	24
2	Inability to access healthcare service	170	68	80	32
3	Poor awareness on the importance of immunization among nursing mothers	160	64	90	36
4	Low confidence and lack of trust in immunization	164	65.6	86	34.4
5	Mothers decision can affect the completion of immunization Schedule	156	62.4	94	37.6
6	Mothers age influences immunization	134	53.6	116	46.4
7	Attitudes of healthcare providers towards mothers affects immunization	155	62	95	38
8	Mothers belief can affect immunization	146	58.4	104	41.6
9	Sex of the child affect immunization	133	53.2	117	46.8
10	Low income of parents can affect immunization	160	64	90	36

The results in table four revealed that mothers educational status can influence immunization (190, 76%), inability to access healthcare services (170, 68%), low confidence and lack of trust in immunization (164, 65.6%), poor awareness on the importance of immunization among nursing mothers (160, 64%), and low income level of parents can affect immunization (160, 64%), others are mothers decision can affect completion of immunization schedule (156, 62.4%), attitudes of healthcare providers toward mothers affect immunization (155, 62%), mothers belief can affect immunization (146, 58.4%), mothers age influence immunization (53.6%), sex of the child affect immunization (133, 53.2%) were the problems associated with immunization of under five children against polio in Maraba Rido, Kaduna State.

## DISCUSSION

Table 1 shows that I didn't know the place and time for immunization ( $\bar{X} = 1.1$ ), I believe polio immunization is good for my child ( $X = 1.8$ ), I believe immunization prevents childhood diseases ( $X = 2.0$ ), the father decide on The immunization of the child ( $X = 2.5$ ), I choose to minimized my child ( $X = 2.6$ ), cannot queue for long waiting to be immunized ( $X = 2.7$ ), and the likes. This result was not surprising because they are attitude of mother toward immunization in this area. This is in line with (World Health Organization, 2009). In the global immunization division CDC report found that the global parental attitude towards immunization service is low and parents have negative beliefs about measles and vaccination programs.

In addition Ekure et al (2013) noted that in Nigeria laziness of mothers and negative attitudes are major problems affecting immunization services. Also, Ekure et al (2013) found that over 30% of women in their study would not take their child back for immunization if he/she develops mild fever moderate to high fever and soreness/redness at injection site and convulsions. In addition Ekure et al (2013) also found that over 40% of women would not accept polio vaccination for the children during National Immunization Days (NIDs). Also 28 percent spent over 2 hours to get child immunized and 61.1% felt the time spent is not too much. This shows a very high negative attitude towards vaccination among women in Nigeria.

Table 2 show that immunization enhance the quality of life (205, 82%), immunization help in prevention of infectious disease (201, 80.8%), it helps controlling and eradicating diseases (177, 70.8%), it reduces the severity of the diseases. (174, 69.4%), immunization increases Immunity power (174, 69%) and the likes. These results were expected because they are the common benefits associated with immunization of under-five children. This is wine with what Whitney, Zhou, Singleton and Schuchat (2014). Emphasized that in the past decades, vaccination has dramatically reduced the incident of several infectious disease that were responsible for much suffering and deaths the impact of vaccination has been demonstrated by the estimate that during the vaccines for children era; (1994-2013) the total number prevented by routine childhood vaccinations in the USA was more than 322 million cases of infectious diseases, 21 million hospitalizations and 731,700 death. Thus, vaccination has made a substantial contribution to the sustainability of health care system by reducing the burden of frequent infectious diseases and associated resource use.

Table 3 show that, there is poor knowledge on the practice of immunization (190, 76%), lack of qualified and appropriate staff affect immunization (162, 64.8%), fear and confusion affects the acceptance of immunization by parents. (159, 63.6%), Deterioration in health care services influences, immunization practice (157, 62.8%), lack of adequate equipment is a barrier to immunization (156, 62.4%) and the likes. This result was not surprising because they are the factors influencing the attitudes of mothers toward immunization this area. This is in line with Ankrah and Nwagwe (2005) stated that in Nigeria the greatest challenge to the acceptance of immunization is a religious one especially among the Northern Nigeria Muslims. Generally, the Muslim north has the low immunization coverage, the least 6% (North West) and the highest being 44.6% (Southeast).

Table 4 shows that mothers educational status can influence immunization (190, 76%), inability to access healthcare services 170, 68%) low confidence and lack of trust in immunization (164, 65.6%) poor awareness on the importance of immunization among nursing mothers 9160, 64%) and the likes. These results were expected because they are the common problem associated with immunization of under-five children against polio in this area. This is in line with the study by Babalola and Adewuyi (2006) noted that the more educated a mother is, the higher the chances that her children would be immunized against childhood killer disease. Thus, a study done at Southern district of Nigeria revealed that mothers with lowest education and unemployed women were less likely to complete a child immunization. Education empowers a woman to access relevant health service, interact effectively and assimilate information relating to parental care childhood immunization and nutritional needs. Becker, etal (1993).

### **CONCLUSION**

Based on the findings and the discussion, it is concluded that mothers have positive attitude towards the immunization of under fives (5) but had negative attitude towards queuing for the immunization of their children.

### **RECOMMENDATIONS**

Based on the discussion and the conclusion, it was recommended among others that:

1. The statement that some of the respondents don't have knowledge on immunization be noted by health personnel so that they can organize workshops as well as films for enlighten mothers on the importance and the danger associated with in the community.
2. Due to the fact that the factors responsible for immunization practices has very high percentage response in all the items, nurses and other health practitioners should take note of this and provide one on one method of health counseling during antenatal and post-nata to alleviate these problems.

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