

Parent's Satisfaction with Immunization Services During The Covid-19 Pandemic at Suruh Public Health Center of Semarang Regency

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Article

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Abstract

COVID-19 is a dangerous disease for the world's health because it spreads very quickly even causes death. The COVID-19 pandemic has also harmed immunization services, among others due to the implementation of lockdown, social restrictions, self-isolation, hampered distribution of vaccine provision, and difficulty in accessing health facilities. This study was aimed to determine parents' satisfaction with immunization services during the COVID-19 pandemic at the Suruh Public Health Center, Semarang Regency. This study used quantitative methods, with a descriptive research design. The population of this study was all parents who had children aged 1-11 months and received immunization services at the Suruh Public Health Center. The sampling technique was a total sampling method of 68 respondents. The measuring instrument of this research is a questionnaire. Data analysis used univariate analysis. This study used univariate analysis and got the results that parent's satisfaction with immunization services at the Suruh Public Health Center Semarang Regency on the reliability dimension stated that they were very satisfied by 43 people (63.2%), the responsiveness dimension stated that they were quite satisfied with 44 people (64.7 %), the assurance dimension stated that they were very satisfied by 45 people (66.2%), the empathy dimension stated that they were quite satisfied by 36 people (52.9%), and the tangible dimension stated that they were very satisfied by 24 people (35.3%). On the reliability and assurance dimensions, the tangible majority of respondents said they were very satisfied, while the responsiveness and empathy dimensions, respondents stated that they were quite satisfied with the immunization service officers at the Suruh Public Health Center, Semarang Regency.

Abstrak

COVID-19 merupakan penyakit yang berbahaya untuk dunia kesehatan karena penyebarannya sangat cepat bahkan menyebabkan kematian. Pandemi COVID-19 juga berdampak buruk bagi pelayanan imunisasi antara lain karena pelaksanaan lockdown, pembatasan sosial, isolasi mandiri, terhambatnya distribusi penyediaan

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vaksin dan sulitnya akses ke fasilitas kesehatan. Penelitian ini bertujuan untuk mengetahui kepuasan orang tua terhadap pelayanan imunisasi pada masa pandemi COVID-19 di Puskesmas Suruh Kabupaten Semarang. Penelitian ini menggunakan metode kuantitatif, dengan desain penelitian deskriptif. Populasi penelitian ini yaitu seluruh orang tua yang memiliki anak usia 1-11 bulan dan mendapatkan pelayanan imunisasi di Puskesmas Suruh. Teknik pengambilan sample menggunakan metode *total sampling* berjumlah 68 responden. Alat ukur penelitian ini yaitu kuesioner. Analisis data menggunakan analisis univariat. Penelitian ini menggunakan analisis univariat dan mendapatkan hasil bahwa kepuasan orang tua terhadap pelayanan imunisasi di Puskesmas Suruh Kabupaten Semarang pada dimensi *reliability* menyatakan sangat puas sebesar 43 orang (63,2%), dimensi *responsiveness* menyatakan cukup puas sebesar 44 orang (64,7%), dimensi *assurance* menyatakan sangat puas sebesar 45 orang (66,2%), dimensi *empathy* menyatakan cukup puas sebesar 36 orang (52,9%), dan dimensi *tangible* menyatakan sangat puas sebesar 24 orang (35,3%). Pada dimensi *reliability*, dimensi *assurance*, dimensi *tangible* mayoritas responden menyatakan sangat puas, sedangkan dimensi *responsiveness* dan dimensi *emphaty* mayoritas responden menyatakan cukup puas terhadap petugas pelayanan imunisasi di Puskesmas Suruh Kabupaten Semarang.

Introduction

In December 2019, WHO (World Health Organization) officially received a report from China that there was a virus that hit Wuhan City, namely Corona Virus Disease or COVID-19 which spread universally. Then WHO declared COVID-19 as a disease outbreak in the world on January 30, 2020 (Balkhair, 2020). The COVID-19 pandemic has greatly affected all health services, including immunization services. This routine immunization activity aims to prevent diseases such as rubella, diphtheria, and measles. According to the Director-General of Disease Prevention and Control of the Ministry of Health of the Republic of Indonesia (2020), rubella, diphtheria, measles, and polio are experienced by approximately 80 million children under 1 year of age due to disruption or delays in immunization during the COVID-19 pandemic. This incident caused the PD3I Extraordinary

Event. According to data from the Semarang District Health Office (2020), immunization coverage is low in 26 public health centers with polio 4 immunization coverage of 89.3% with the percentage of boys 77.3% and girls 104%. Meanwhile, the immunization coverage from April to December increased between 5.5%-17.8% but decreased rapidly during November with a percentage of 5.3%.

The causes that interfere with immunization services include the high spread of COVID-19, lack of understanding of the Ministry of Health guidelines, the limited number of vaccinators assigned to take care of the COVID-19 outbreak, and school closures. Research by Buonsenso et al. (2020) stated that there was a decrease in the number of children receiving immunizations by 50-80% ($p < 0.0005$) in 2020 compared to the previous year. The



results of another study by Walukow et al. (2019) found that if the level of community satisfaction with health services was still low, the reliability dimension dissatisfaction was 95.7%, the assurance dimension dissatisfaction was 86%, the physical evidence dimension dissatisfaction was 76.4%, empathy dimension dissatisfaction is 50%, and responsiveness dimension dissatisfaction is 74%. This situation proves that if the facilities provided are of good quality, patient satisfaction will be high and the world of health will be successful in providing services. According to the literature review conducted by Nurhasanah (2021), immunization has decreased due to the impact of the COVID-19 disease, including the implementation of lockdowns, social restrictions, self-isolation, hampered distribution of vaccine provision, and difficulty in accessing health facilities (Nurhasanah, 2021).

Method

The method in this research was the quantitative method, using a descriptive research design. The descriptive research design was a research that observe a phenomenon in a certain population (Masturoh & T., 2018). Descriptive research design aims to observe something that happens and review the causes of certain symptoms (Abdullah, 2015). The population of this study was parents who had children aged 1-11 months and had received immunization services at the Suruh Public Health Center, with a total of 68 respondents. The sampling technique in this research is total sampling. The total sampling technique was carried out if all members of the population were used as samples (Masturoh & T., 2018).

The data collection technique for this research was a questionnaire given from November 25 to December 23, 2021 to determine parents' satisfaction with immunization services at the Suruh Public Health Center. The instrument of data collection was a standard questionnaire from research conducted

by (Lina, 2015), then it was filled out by parents who have children aged 1-11 months and have received immunization services at the Suruh Public Health Center. The statement consists of 35 items regarding parents' satisfaction with immunization services.

Results and Discussion

Based on the research conducted on Parents' Satisfaction with Immunization Services During the COVID-19 Pandemic at the Suruh Public Health Center, Semarang Regency with a total sample of 68 respondents, the following results were obtained:

A. Characteristics of Respondents

a. Age

Table 1. Distribution of Characteristics by Age

Age	n	%
5-11 years old	0	0
12-25 years old	17	25,0
26-45 years old	48	70,6
46-65 years old	3	4,4
Total	68	100

Based on Table 1, it is known that respondents with a child age range of 0 (0%), a teenager age range of 17 people (25.0%), an adult age range of 48 people (70.6%), and an elderly age range of 3 people (4.4%).

b. Gender

Table 2. Distribution of Characteristics by Gender

Gender	n	%
Male	23	33,8
Female	45	66,2
Total	68	100

Based on Table 2, it can be seen that based on the percentage of respondents, the male gender is 23 respondents (33.8%), while the female respondents are 45 (66.2%).



c. Education

Table 3. Distribution of Characteristics by Education

Education	n	%
No School	0	0
SD	7	10,3
SMP	20	29,4
SMA	37	54,4
Diploma	3	4,4
Bachelor	1	1,5
Total	68	100

Based on Table 3, it is revealed that the number of respondents with no education is 0 (0%), elementary school/equivalent is 7 people (10.3%), junior high school/equivalent is 20 people (29.4%), high school/equivalent is 37 people (54.4%), diploma is 3 people (4.4%), and bachelor is 1 person (1.5%).

d. Employment

Table 4. Distribution of Characteristics by Employment

Employment	n	%
Farmer	6	8,8
Labor	25	36,8
Trader	4	5,9
PNS/TNI/POLRI	0	0
Wiraswasta	13	19,1
Not Working	13	19,1
Other Jobs	7	10,3
Total	68	100

Based on Table 4, it is revealed that the number of respondents who work as farmers is 6 people (8.8%), working as laborers is 25 people (36.8%), working as traders is 4 people (5.9%), working as civil servants/TNI/POLRI is 0 people (0%), working as entrepreneurs is 13 people (19.1%), not working is 13 people (19.1%), and other jobs is 7 people (10.3%).

B. Univariate Analysis

a. Description of Parents' Satisfaction on the Dimension of Reliability

Table 5. Distribution of Dimensions Reliability

Reliability	n	%
Not Satisfied	3	4,4
Enough Satisfied	22	32,4
Very Satisfied	43	63,2
Total	68	100

Based on Table 5, it was found that the majority of respondents were very satisfied with the reliability dimensions of the immunization service officers at the Suruh Public Health Center with 43 people (63.2%).

b. Description of Parents' Satisfaction on the Dimension of Responsiveness

Table 6. Distribution of Dimensions Responsiveness

Responsiveness	n	%
Not Satisfied	2	2,9
Enough Satisfied	44	64,7
Very Satisfied	22	32,4
Total	68	100

Based on Table 6, it was found that the majority of respondents were quite satisfied with the responsiveness dimensions of immunization service officers at the Suruh Public Health Center with 44 people (64.7%).

c. Description of Parents' Satisfaction on the Dimension of Assurance

Table 7. Distribution of Dimensions Assurance

Assurance	n	%
Not Satisfied	3	4,4
Enough Satisfied	20	29,4
Very Satisfied	45	66,2
Total	68	100

Based on Table 6, it is revealed that the majority of respondents are very satisfied with the dimensions of guarantees for immunization service officers at the Suruh Public Health Center with 45 people (66.2%).

d. Description of Patient Satisfaction on the Dimension of Empathy



Table 8. Distribution of Dimensions Empathy

Empathy	n	%
Not Satisfied	9	4,4
Enough Satisfied	36	52,9
Very Satisfied	23	33,8
Total	68	100

Based on Table 8, it is known that the majority of respondents are quite satisfied with the empathy dimension of immunization service officers at the Suruh Public Health Center with 36 people (52.9%).

e. Description of Parents Satisfaction on the Dimension of Tangible

Table 9. Distribution of Dimensions Tangible

Tangible	n	%
Not Satisfied	21	30,9
Enough Satisfied	23	33,8
Very Satisfied	24	35,3
Total	68	100

Based on Table 9, it was found that the majority of respondents were very satisfied with the dimensions of physical evidence of immunization service officers at the Suruh Public Health Center with 24 people (35.3%).

Based on Table 5, the majority of respondents are very satisfied with the reliability, with 43 people (63.2%). The aspect of reliability is being able to provide guaranteed, satisfying, precise, and reliable services. In the aspect of reliability, there are two important factors, namely expertise in providing services as agreed and being able to provide services appropriately (Maila, 2021). This is in line with the research by Chairunnisa & Puspita (2017) if the patient admission procedure is served quickly, the speed and timeliness of the officers in providing services will make the patient quickly satisfied with the dimensions of reliability provided by health services. However, in Table 5 there are still three dissatisfied respondents, this is indicated by

questionnaire number three, namely the statement that the patient was handled quickly. The majority of respondents answered that they did not agree with the statement.

There is responsiveness, namely the alertness of health workers to help patients when providing services Darmini & Gorda (2021). In addition, the responsiveness aspect can be measured through the credibility of helping patients, as well as being responsive to handling patients (Maila, 2021). In Table 6, the majority of respondents feel quite satisfied, with 44 people (64.7%). This is in line with research conducted by Walukow et al. (2019) if the number of patients who answered dissatisfied was 54 people (49.1%) with poor responses were 37 people (74%) and good responses were 17 people (28.3%). According to research by Mernawati & Zainafree (2016) the better the responsiveness of health services provided to patients, the higher the level of patient satisfaction. However, in Table 6, there are still two respondents who are dissatisfied, this is indicated by questionnaire number one, namely the statement that registering patients does not take a long time. The majority of respondents answered that they did not agree with this statement.

In the dimension of assurance contained in Table 7, the majority of respondents were very satisfied, with 45 people (66.2%). Aspects of assurance include several things, namely knowledge, competence, courtesy, and trustworthiness that must be possessed by officers and can avoid danger, risk, or doubt. Assurance assessment can be measured when health care workers can answer patients' questions that can foster trust and create a feeling of security for patients when receiving health services (Maila, 2021). In the dimension of assurance, parents are often hesitant to bring their children for immunization, on the one hand, parents want their children to be healthy, but on the other hand, there



is a lot of news about the bad side of immunization. An explanation from health workers regarding immunization is very important to convey to parents so that parents do not easily believe negative rumors related to immunization (Hiyana et al., 2019). This is in line with the research of Aulia et al. (2017) that the assurance dimension has a positive impact on patient satisfaction. However, in Table 7, there are still three dissatisfied respondents, this is indicated by questionnaire number four, namely the statement by the officer examining in a friendly manner. The majority of respondents answered that they did not agree with this statement.

Based on Table 8 on the empathy dimension, the majority of respondents felt quite satisfied, with 36 people (52.9%). The aspect of empathy is establishing good relationships with patients and providing services and special attention to patients. Empathy is done by giving individual attention so that patients feel important, valued, and understood. Measures of empathy include the ease with which patients can contact health services, pay attention to patients, and hear complaints from patients (Maila, 2021). This is in line with research conducted by Damopolii et al., (2018) that the empathy dimension is still not good at the Bhayangkara Tk III Hospital in Manado, because there are still many respondents who do not agree. However, in Table 8 there are still nine dissatisfied respondents, this is indicated by questionnaire number two, namely the statement by the officer greeting the patient who came before the examination. The majority of respondents answered that they did not agree with this statement.

Based on Table 9 on the tangible, the majority of respondents were very satisfied, with 24 people (35.3%). Aspects of physical evidence, namely the skills of health services in showing their existence to external parties or patients. Some of the physical evidence consists of

physical facilities, cleanliness, tidiness, room comfort, completeness of equipment, the appearance of officers, and communication media that can be felt directly by patients (Maila, 2021). This is in line with the research conducted by Gunawan et al. (2018) tangible dimension affects patients' satisfaction, then the patient satisfaction index also reaches 81% with an average value of 4.05 which is included in the satisfied category. However, in Table 9, there are still 21 dissatisfied respondents, this is indicated by questionnaire number five, namely the statement that the Public Health Center has a clean bathroom. The majority of respondents answered that they did not agree with this statement.

Conclusion and Suggestions

a. Conclusion

From the results of research that has been carried out, parents' satisfaction with immunization services at the Suruh Public Health Center Semarang Regency can be concluded that:

1. Parents' satisfaction with immunization services at Suruh Public Health Center, on the reliability dimension, 43 people were very satisfied (63, 2%).
2. Parents' satisfaction with immunization services at the Suruh Public Health Center, on the dimension of responsiveness, 44 people (64.7%) were quite satisfied.
3. Parental satisfaction with immunization services at the Suruh Public Health Center, on the dimension of assurance, 45 people (66.2%) were very satisfied.
4. Parents' satisfaction with immunization services at the Puskesmas Suruh on the empathy dimension, the majority stated that they were quite satisfied as many as 36 people (52.9%).
5. Parents' satisfaction with immunization services at the Suruh Public Health Center, on the tangible dimension, 24 people (35.3%) were very satisfied.



b. Suggestions

Based on the results of the study, suggestions that can be given are as follows:

1. For Respondents

Respondents are expected to criticize the staff from the Public Health Center if they are not satisfied with the services that have been provided. This is so that the Puskesmas can improve their services and the satisfaction felt by respondents will also increase.

2. For Research Places

It is hoped that the Puskesmas can improve the quality of immunization services, especially in terms of responsiveness and empathy from being good to being good, so that patients and their families do not hesitate to use the services of the Public Health Center. The immunization service system must also continue to be carried out by taking into account the needs and criticisms of patients and their families.

3. For Further Researchers

It is hoped that the next researcher can continue and develop the results of the research to be carried out, for example connecting with factors that cause patient dissatisfaction.

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