

Implementor Involvement In Increasing Children's Immunity During A Pandemic In Muara Dua Sub-District

Risna Dewi^{1,*}, Maisyura², Dwi Fitri³

¹Public Administration Science Department, Social and Political Science Faculty, Universitas Malikussaleh, Aceh, Indonesia

²Business Administration Department, Social and Political Science Faculty, Universitas Malikussaleh, Aceh, Indonesia

³Communication Department, Social and Political Science Faculty, Universitas Malikussaleh, Aceh, Indonesia

*Corresponding author. Email: risna.dewi@unimal.ac.id

ABSTRACT

Vaccination programme for children aged 6 to 11 in Muara Dua District, Lhokseumawe City: readiness of essential stakeholders and parents to increase children's immune protection. Decree of the Republic of Indonesian Minister of Health (KMK) Number HK.01.07./MENKES/6688/2021. The Covid-19 vaccine is only given in school settings during the pandemic and is intended to prevent children between the ages of 6 to 11 from being exposed to the virus and provide them with safety during face-to-face learning (PTM). Lhokseumawe City executes the Covid-19 detonation in accordance with the directives of the federal government. Many youngsters between the ages of 6 and 11 in Lhokseumawe City have received vaccines. The cooperation and support of the appropriate parties is crucial for the successful implementation of this strategy. Qualitative application of research methods, informants were determined purposively by considering the criteria. Using observation, interviews, and documentation to obtain data. Implementation of a child immunization program actually requires the participation and support and readiness of various parties. Based on research findings, the readiness of the implementers has been successful, as evidenced by the support of parents in bringing their children to open service positions and the mental strength of the implementers. Safe vaccination services are provided for children.

Keywords: Vaccination programme, Children aged 6 to 11, Stakeholders, Parents, Covid 19.

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1. INTRODUCTION

Until now, the Covid-19 outbreak has also forced Indonesian students to take distance learning courses from home as their schools have been closed for more than two years. As a result, children's learning outcomes have decreased. As a result, currently the government intends to introduce face-to-face learning to restore learning.

The Covid-19 program can be implemented at health centers, hospitals or other health service facilities, such as opening immunization service posts at schools or other educational units, or Child Welfare Institutions, for children aged 6 (six) to 11 (eleven) years (LKSA). (Decree of the Minister of Health (KMK) of the



Figure 1. Covid 19 vaccination sticker

Republic of Indonesia Number HK.01.07./MENKES/6688/2021).

According to preliminary data, some children refuse vaccinations because they are afraid of being injected,

and other parents do not encourage their children to take part in the Covid-19 immunization. so how important it is for parents to explain to their children, parental understanding is very important for children aged 6 to 11 years who receive vaccines. Some parents refuse to let their children receive the Covid-19 immunization because they hear news from questionable sources, such as claims that vaccinations cause recurrent illnesses, fever, are harmful to one's health, and other vaccine-related myths. They are afraid and don't want to and this is widely circulated in society.

2. REVIEW LITERATURE

2.1 Factors Influencing Policy Implementation

According to Edward III, there are four factors that must be considered for successful policy implementation: resources, communication, attitude, and bureaucratic structure. shows four factors that are very important for the effective implementation of the four factors, namely: Each policy will be implemented adequately if there is effective communication between program implementation (policy) and the target group, according to point a (target group).

According to the literature, policy integration is seen as a combination of cross-sectoral issues that can be considered in the policy-making process and then integrated into regular organizational activities by sectors from all levels of government institutions to achieve both sectoral and cross-sectoral objectives. target. To achieve policy coherence, policy coordination and harmonization, as well as the integration of policy considerations into the basic institutional thinking in other policy areas and related activities, there are several approaches to policy integration, (Suwarno & Rahayu, 2021).

Actors participate in making public policies as actors. The complexity of policy making will increase with comprehensive and connected policies from various parties. For example, many actors, including non-state actors, will be involved in policies that affect the role of

several ministries, such as the Ministry of Health, Ministry of Finance or Ministry of Social Affairs. Thus, the policy-making process becomes much more complex, (Sirait, 2021).

2.2. Types of Covid-19 Vaccines

The government has determined that there are 6 types of Covid-19 vaccines that will be used in Indonesia (RI Ministry of Health, 2020), namely: 1. Red and White Vaccine: The red and white vaccine is the result of a collaboration between BUMN PT Bio Farma (Persero) and the Eijkman Institute. 2. Astra Zeneca: The Astra Zeneca test conducted by Astra Zeneca and the University of Oxford shows that the average efficiency of the corona virus vaccine product is 70%. 3. China National Pharmaceutical Group Company (Sinoframa) : China National Pharmaceutical Group Company. Although the final phase of testing has not yet been completed, in China, about 1 million people have been vaccinated with user emergency consent. 4. Moderna: claims an effective vaccine production rate of 94.5%. 5. Pfizer Inc and BioNTech : Vaccines Pfizer Inc and BioNTech have advised the FDA in the United States and Europe to use their coronavirus vaccines immediately. 6. Sinovac Biotech Ltd: Currently, CoronaVac is entering phase 3 trials. Sinovac is testing its vaccine in Brazil, Indonesia, and Bangladesh. As shown in preliminary results in monkeys published in the journal Science, the antibodies produced by the vaccine can neutralize 10 strains of Sars-coV-2.

Children's and their families' physical, emotional, social, and economic well-being has been negatively impacted by the COVID-19 epidemic. Children's rates of infection, illness, hospitalization, and death have increased after Omicron's release, despite research that suggests children are less susceptible to SARS-CoV-2 than adults. With the introduction of novel variations and subvariants, it is estimated that over 75% of children in the United States have contracted SARS-CoV-2,1 to date. Re-infections are also becoming more frequent.

Hospitalizations have increased significantly as a result of high incidence, with rates among children of all ages being four times higher during the Omicron peak than the Delta peak, (Peebles, MacDonald, & Basta, 2022).

Clinical illnesses involving people exposed to wild-type pathogens after having previously received vaccinations against the same pathogens are referred to as vaccine-associated enhanced disease (VAED), which has been modified before. Disorders having a predominance of lower respiratory tract involvement are referred to as vaccine-associated enhanced respiratory diseases (VAERD). Atypical measles and respiratory syncytial virus (RSV) increases that happen following the injection of inactivated vaccinations against this disease are well-known instances of VAED. In this case, infection in people with a non-protective immune response to the relevant wild-type viruses has been associated with severe illness, (Munoz et al., 2021)

Age of population, type of vaccine, and demographic and socio-demographic variables have all been shown to influence the type of places where people receive vaccinations; this applies to adult influenza vaccination as well as to influenza vaccination and other recommended vaccinations for children. Knowing the locations where vaccinations are being given allows those responsible for designing the vaccination program to ensure an adequate supply of vaccines at those locations and determine if expansion to further settings is necessary. Program staff are using the COVID-19 vaccine information website for children aged 5-11 to help inform planning ahead of the start of the COVID-19 immunization program for children aged 5. There is currently no publicly available representative national data on the distribution of COVID-19 vaccines, (Santibanez et al., 2022).

The national security plan for pandemic preparedness includes advanced requirements for seasonal flu vaccines. However, the ongoing COVID-19 epidemic highlights a number of gaps in countries' ability to develop and implement long-term immunization

programmes. Although there is no worldwide monitoring system to evaluate progress toward influenza vaccination coverage goals, influenza pandemics continue to pose a hazard on a global scale. To determine seasonal influenza vaccination coverage rates, which in turn serve as an estimate of pandemic preparedness, the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA) Influenza Vaccine Supply International Task Force (IVS) developed a survey method in 2008. This provides evidence to guide improvements pandemic preparedness efforts, in particular to increase the rate of COVID-19 vaccination, (Palache et al., 2021).

3. DISCUSSION

Children between the ages of 6 and 11 who receive the Covid-19 immunization will be better protected, as well as those closest to them and prepare children for vaccination. If the child is ready, parents can take him to the nearest vaccination facility. This is done without the need for special authorization. In general, children who live in healthy environments and have good physical defenses will be much less likely to be targeted by Covid 19.

Positive results were achieved and coverage targets for vaccine doses 1 and 2 were exceeded with the help of all partners in carrying out this program nationwide. the desire of children to receive vaccinations and the responsibility of parents in giving informed consent to their children. an enthusiastic implementation team working towards a common goal.

In accordance with government regulations, vaccination activities and monitoring of program achievements are still being carried out in an effort to support the realization of group immunity in the context of tackling the corona virus pandemic. All related parties collaborate to launch and succeed with resilience and strong enthusiasm supported by the community or the parents of these children.



Figure 2 shows how the Muara Dua Police and parents are ready to vaccinate their children.

Implementation of the program actually requires the cooperation and readiness of a number of parties, as well as the responsibility of parents to take their children to a predetermined location. Children receive vaccinations accurately and on time. This is shown by the enthusiasm of the Muara Dua Police to carry out the directions and hope that by immunizing children, residents can avoid transmission of the Corona virus, children can be healthy, and children can return to school as usual before the Covid 19 outbreak.



Figure 3 Parents' readiness to implement child vaccinations at Gampong Mns Mosque.

The effectiveness of immunization in children is also associated with the readiness of the Gampong Meunasah Mosque and parents. The Geuchik meunasah office of

this mosque also offers immunization services for children. Children aged 6 to 11 years are injected with the vaccine intramuscularly, or into the muscles of the body in the upper arm, at a dose of 0.5 ml, with an interval of at least 28 days. vaccination of children accompanied by parents and the puskesmas team. There will be two people as a companion team from the puskesmas.



Figure 4 shows the Muara Dua Health Center's Vaccinator Team in readiness.

The Puskesmas' readiness for doctors and vaccine officers to conduct screening Prior to the program's launch, the screening followed a set format and Sinovac type. The vaccine team is prepared to help ensure that child vaccines are successful.

Face-to-face teaching and learning activities can be carried out. Through the efforts of this child immunization program, all school administrators and instructors are required to conduct a vaccination program in their classrooms with the ultimate goal of ensuring that all students arrive at school immunized and accompanied by their parents or class guardians.

The first month of vaccination for children is completed in one month of confinement. To protect our children from possible exposure to Covid-19, it is important that parents who support vaccination for their children also consider the rights of minors in this regard.

4. CONCLUSION

In order to achieve positive results and exceed the target of vaccination coverage at doses 1 and 2 by 75%, all stakeholders involved in the implementation of this program throughout the country must be prepared. The

enthusiasm of children for vaccinations and the responsibility of parents to get their consent. When preparing a plan to achieve the goal, the parties concerned are enthusiastic about carrying out their duties in accordance with government regulations and the readiness of teachers and school principals who are also very supportive of the activities of the child vaccination program, strengthening activities and monitoring the progress of the vaccination program achievements are still carried out in an effort to support the realization of the vaccination program. herd immunity in order to overcome the corona virus pandemic.

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