Author's response to reviews

Title: Are parents' knowledge and practice regarding immunization related to pediatrics' immunization compliance? A mixed method study

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Author's response to reviews: see over
Authors’ Responses to Editor

We are very thankful for such constructive comments which have significantly enhanced our manuscript entitle “Are parents’ knowledge and practice regarding immunization related to pediatrics’ immunization compliance? A mixed method study”

Editor comments:
Manuscript Ref. No.: MS: 1379865389968115 entitled “Are parents' knowledge and practice regarding immunization related to pediatrics’ immunization compliance? A mixed method study”. The referee/s have raised a number of points that I have appended below. If the paper can be substantially revised to take account of these comments I would be happy to reconsider it for publication.

Author response: We are very thankful for you and agree to respond to the reviewers’ comments.

Author’s action: Changes made as suggested.
Dear reviewers,

I wish you have a nice day.

We are very thankful to the reviewers for such constructive comments which have significantly enhanced our manuscript “Are parents' knowledge and practice regarding immunization related to pediatrics’ immunization compliance? A mixed method study”

We are pleased to inform you that we have accepted the changes you recommended or comments you had made and we have revised the paper accordingly.

We provide the responses below detailing to each of your comments stating what changes have been made. Changes made in our responses to the comments are yellow – highlighted in the revised manuscript.

We hope the revised manuscript and this response letter have addressed the issues raised by the reviewers and would provide a satisfactory revision.

Thank you for your constructive comments and recommendations to improve this piece of work.

Sincerely,

The Corresponding Author
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<table>
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<tr>
<th>#</th>
<th>Comments of reviewer</th>
<th>Response</th>
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<tbody>
<tr>
<td>Rev.#1</td>
<td>Methods paragraph: the wording June was written wrong to Jun.</td>
<td>We do agree with the reviewer’s suggestion; and changes were made accordingly as suggested.</td>
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<tr>
<td>Rev.#1</td>
<td>This study may provide some help if they would like to use it in the background and discussion: “The Knowledge, Attitude and Practice towards Immunizations among Mothers in a Traditional City in the United Arab Emirates” by Roos M. Bernsen et al</td>
<td>We do agree with the reviewer’s suggestion; and changes were made accordingly as suggested.</td>
</tr>
<tr>
<td>Rev.#1</td>
<td>The first paragraph second statement June was written wrongfully to Jun</td>
<td>We do agree with the reviewer’s suggestion; and changes were made accordingly as suggested.</td>
</tr>
<tr>
<td>Rev.#1</td>
<td>In the second paragraph, “Many reasons were found for not vaccinating children or not completing the vaccination schedule; firstly, this may have been due to a lack of vaccination information among parents or providers”. What does the author means by the providers? Are they the healthcare professionals? I hope it will be clarified</td>
<td>We mean health care providers and revised</td>
</tr>
<tr>
<td>Rev.#1</td>
<td>The sentence “Many restrictions were imposed on the media, especially television and the internet, before 2003, whereas an increase in the number of international medical and scientific TV channels, and an increase in internet users especially after 2003 are the important causes of the increase in parents’ immunization practice and in immunization knowledge”, is that sentence supported by a study? Please mention the reference.</td>
<td>Revised and reference added</td>
</tr>
<tr>
<td>Rev.#1</td>
<td>In the paragraph that started with “According to the parents’ answers to questions 15, 16, 17, and 18 some 59.5% of parents….”, media was mentioned twice with two different not clear meaning. While the correct meaning that is mentioned in the oxford dictionaries is the media) [treated as singular or plural] the main means of mass</td>
<td>Revised and corrected</td>
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communication (television, radio, and newspapers). So the author can’t compare media with television.

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<tr>
<th>Rev.# 2</th>
<th>This research design is based on the premise that it is parental KAP that determines children’s immunization coverage. The literature, however, shows that provider practices, knowledge and systems are an equally important, if not more important reason that children fail to get fully vaccinated. Thus the correlation between their two findings may be spurious, not causal.</th>
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<tr>
<td>Rev.# 2</td>
<td>In our study’s objective, to evaluate the association between parents’ KAP and their children immunization, and as you said that the KAP is one factor among others factors that may affect on immunization coverage. We didn’t say only this factor (KAP) affect on immunization.</td>
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<tr>
<th>Rev.# 2</th>
<th>The authors tell us very little about the characteristics of the vaccine delivery system; how do these clinics work? What is the quality of the delivery system? To accurately explain the current low level of coverage, they would have needed to study the provider system as well as the parents.</th>
</tr>
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<tr>
<td>Rev.# 2</td>
<td>We do agree with the reviewer’s suggestion; and we added a paragraph related to health clinics in Iraq in Methodology part.</td>
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<th>Rev.# 2</th>
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<td>Rev.# 2</td>
<td>We already have a study regarding affect of providers on immunization rate published in Journal of tropical pediatric. Website: <a href="http://tropej.oxfordjournals.org/content/58/6/441.short">http://tropej.oxfordjournals.org/content/58/6/441.short</a></td>
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<th>Rev.# 2</th>
<th>What the distribution was of less-than-fully immunized. How many doses were missing and what the age pattern of the doses given. The results would be very different if the children started late and never caught up vs. the pattern of missing many doses throughout childhood. Why did they decide to present only fully vs. Partial immunization</th>
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<tr>
<td>Rev.# 2</td>
<td>• When we start the study, we classified the immunization rate to 3 types: fully immunization, partial immunization, and non-immunization. After we collected the date, we show that only 4 children were non-immunized with all vaccines, for this reason we excluded this class of immunization because we can’t apply statistical test on these 4 children. • We assume that: if the child received all types of vaccines, that mean this child fully immunization although the doses are (right dose, late dose or early doses), and we assume if the child didn’t received or missed one dose, that mean this child partially immunization because we can’t analyze or associate all the types (right dose, late, early and missed doses) with KAP scores and it will be complicated results. • Depending on median split method, we classified</td>
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| Rev.# 2 | Was only one child from each household included in the sample? The results are presented for all of the 528 children in the sample; was there no attrition? No missing data? How were these problems handled?

Parents were asked about issues like “vaccine storage;” why would they be expected to know this? Why were parents expected to know about “active” and “passive” vaccines? | • Yes, one child from each family.
• As a missing data, we had 11 parents didn’t complete the interview or questionnaire and we excluded them also.
• After 2003, the medical program in Iraqi media clarified this issue (vaccine storage and the types of vaccines) to Iraqi family to increase the immunization in the public health clinics rather than private clinics because the private clinic started to import the vaccine from outside Iraq without control, for this reason we put these questions in our questionnaire |

| Rev.# 2 | Needs some language corrections before being published | We sent it to Proof reading in UK [http://www.proof-reading-service.com/how-it-works.html](http://www.proof-reading-service.com/how-it-works.html) |