A web-based Child vaccination system in Bangladesh

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Abstract: Vaccination is the way of prevention from various infectious diseases. It stimulates the immune system against a pathogen. In many developed countries, the process of Vaccination system is not technology based. In Bangladesh, patients use manual Vaccination system still now which is not secure. The existing systems are the paper-based system. Today peoples are going to be digitalized on their particular life in Bangladesh. So every parent's wants secured and flexible child vaccines system than the existing manual system. In fact, many parents don't register their childbirth just because the process of registering is tiresome. In this paper, we have implemented the web-based as well as android based vaccines system so that the parents get facilities to monitor vaccination activity by mobile application/online. We emphasized our government vaccines which have given after childbirth. Our digitalized vaccination system can solve many problems to monitor and maintain proper vaccination system. Especially problem of an unaware mother at third world country. It can be used for all government and non-government clinic or hospital who are working for mother and child health. Parents can register their childbirth and will know about vaccines schedule through a single & simple SMS by using our proposed system.

Keywords - Child Vaccination, Digitalized system, Manual system, SMS, Security

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I. Introduction

Vaccination system is a crucial part of Health technology. Vaccines are the first step of preventing diseases including polio, whooping cough, diphtheria, measles, rubella (German measles), mumps, Haemophilus influenza type b (Hib) and tetanus. The Vaccine helps to protect infants, children and even adults from infections and premature death caused by many infectious diseases. The dosage of vaccination remains the same among babies but may be different for adults. Modern health technology plays an important role in the improvement of immunization information system. There are a lot of problems parents are faced in the manual system like uncertainty, data loss, and misconduct, lack of efficiency, dishonesty, unawareness, and insecurity. All of these problems are a major threat for vaccination system and also for patients'. It may cause premature death. So Parents are ceaselessly thoughtful about the health and safety of their children. In many countries like Pakistan, Afghanistan and Nigeria are facing problems due to ineffectual and inadequate vaccination system method [1][2][3]. Their existing Polio vaccination system is ineffective due to mismanagement, corruption, and insecurity. According to WHO report of 2015, 51 cases of poliovirus happened in Pakistan. The reason behind having polio are illiteracy, unawareness, mislead, perversion and so many [4]. Immunization is one of the solutions to prevent polio. To make this process more efficient added modern health technology with the existing system. The support which is provided by the modern technology include Reminder systems, patients can easily communicate with doctors through SMS and get feedback timely through short SMS, save time, security, and administrative support by online. To consider all of the current problems, we designed a flexible system for parents and doctors. We have implemented a web-based child vaccination system. To make it more effective we also converted it to the Android based system. In android system, Short message service (SMS) is an important and useful service. It is offered in all types of mobile phones as it is easy to use and can operate with minimal cost. SMS permits users to communicate non-verbally and creates a connection between people of any distance. The main objectives of this research are summarized in the following manner:

- To design and develop a proper vaccination system to replace existing manual procedure that can help us to get every vaccine to schedule on a date.
- To present an overview of a digital vaccination system.
- Mostly parents lost their child vaccines schedule cards which is very important. But web-based vaccines system reminds the parents with the automated notification system.
- Parents also get a facility to monitor vaccination activity by mobile application and parents may get relief from the discordance environment.

- No duplication of data entry and security system is strong.
- Easy to make procedure reports and time maintain.

II. Literature Review

Vaccination plays an important role in advanced health technology. Vaccines can prevent us from infectious diseases. Vaccination system is an effective method for developing the individual's immune system and protects us from a pathogen. The current existing manual system has a lot of problems so it does not provide a better result. The main problem is improper clinical management, difficult to maintain doctors and patients interaction properly, fault dosage of vaccines, storage of expired vaccines and so many. According to Communication the Handphone User Survey by Malaysian and multimedia commission (http://www.skmm.gov.my), fourteen percent of people who are under 20 years old used mobile phones. Hence, using a reminder system through mobile phone messaging service may benefit the community especially those parents who are between 20 and 49 years old. Salameh, et al. was proposed a web-based system to ensure pregnant mothers be notified regarding their pregnancy progress by sending an SMS message. The design and development of the system which is known as Pregnancy Progress System (PregProSyst) [1]. Zhang et al. were proposed a system for fall detection. They used off-the-shelf electronic devices and tri-axial accelerometer sensor in a mobile phone to detect the fall. If a fall is suspected, a notification is sent to the users. If a user (children) are incapable to respond it send an SMS alert to the parents [2]. Osama was implemented a mobile phone SMS-based system for diabetes self-management. This system is user-friendly. The patients can communicate to his or her physician through simple SMS [3]. KenVACS is the open source data collection prototype. Using this prototype patient can get more information about vaccination [4]. In our proposed system we have emphasized EPI vaccination which provided by Bangladesh government. A Government of Bangladesh have been taken support from World health organization. The Immunization program has played an important role to reach children with BCG (99%), DPT-3 (87%), Polio-3 (94%) and Measles (88%) and 75% children (1 year) are vaccinated with all doses of vaccines. Bangladesh is polio-free since 2006, and eradicate measles mortality by using vaccine-preventable diseases control strategy [5]. WHO also introduced of new vaccines in Bangladesh -Hep B (2005) and Hib (2009). Bangladesh has started Pandemic Influenza H1N1 vaccination since 2010. We have shown EPI vaccination schedule of Bangladesh in below Fig1.

		টিকার	ডোজের	ডোন্সের মধ্যে	টিকা দেয়ার		টিকার প্রয়োগ
রোগের নাম	টিকার নাম	ভোজ	সংখ্যা	ন্যুনতম বিরতি	সঠিক সময়	টিকাদানের স্থান	গণনার ব্যারানা পথ
যক্ষা	বিসিজি	০.০৫ এম এল	\$	-	জন্মের পর থেকে	বাম বাছর উপরের অংশে	চামড়ার মধ্যে
ভিফখেরিয়া, হুপিংকাশি, ধনুটংকার, হেপাটাইটিস-বি, হিমোন্ধাইলাস ইনদ্রুরেঞ্জা-বি	পেটাজ্যালেট টিকা (ডিপিটি, হেপাটাইটিস-বি, হিব)	০.৫ এম এল	Q	৪ সথাহ	৬ সথাহ ১০ সথাহ ১৪ সথাহ	ৰাম উক্লয মধ্যতাগের ৰহিরাংশে	মাংসপেশী
নিউমোক্ঞাল নিউমোনিয়া	পিসিডি টিকা	০.৫ এম এল	ە	৪ সথাহ	৬ সণ্ডাহ ১০ সণ্ডাহ ১৪ সণ্ডাহ	ডান উরুর মধ্যতাগের বহিরাংশে	মাংসপেশী
ণোলিওমাইলাইটিস	বিওপিডি	২ ফোঁটা	ە	৪ সথাহ	৬ সণ্ডাহ ১০ সণ্ডাহ ১৪ সণ্ডাহ	মুখে	মুখে
	আইপিডি (ফ্রাকশনাল)	০.১ এম এল	٩	৮ সগ্রাহ	৬ সন্থাহ ১৪ সন্থাহ	ডান বাছর উপরের অংশে	চামড়ার মধ্যে
হাম ও ক্লবেলা	এমআর টিকা	০.৫ এম এল	٩	-	৯ মাস ও ১৫ মাস বয়স পূর্ণ হলে	ডান উক্রয মধ্যতাগের বহিরাংশে	চামড়ার নীচে

শিশুদের নিয়মিত টিকাদান সময়সূচি

১৫-৪৯ বছর বয়সের মহিলাদের টিকাদান সময়সূচি

রোগের নাম	টিকার নাম	টিকার ডোজ	ডোজের সংখ্যা	টিকা শুরু করার সঠিক সময়	টিকাদানের স্থান	টিকার প্রয়োগ পথ
			৫-টাটা	১৫ বছর বয়স হলেই যথাশীঘ		
	টিটি (টিটেনাস	০.৫ এম	,-বীবী	টিটি-১ পাওয়ার কমপক্ষে ২৮ দিন পর	বাহুর	
ধনুটংকার	টব্রয়েড)	এল	৩-থীথী	টিটি-২ পাওয়ার কমপক্ষে ৬ মাস পর	উপরের অংশে	মাংশপেশী
			<mark>8-रीरी</mark>	টিটি-৩ পাওয়ার কমপক্ষে ১ ৰৎসর পর		
			৯-থীথী	টিটি-৪ পাওয়ার কমপক্ষে ১ বৎসর পর		

সম্প্রসারিত টিকাদান কর্মসূচি (ইপিআই) স্বাস্থ্য অধিদগুর

গণপ্রজাতরী বাংলাদেশ সরকার

Fig 1. EPI vaccination schedule [6]

Parents have taken facility from different government clinic or hospital. Every child has been vaccinated by EPI after their birth. Then Parents received EPI vaccination card from a clinic or hospital. This process of vaccination is paper-based which is not secure. The motive of this paper is to create a technology-based system. The EPI vaccination card which is provided by the Government clinic as shown in Fig 2.

ইপিআই টিকাদান কাৰ্ড (শিষ) 200 4 000 one of and and and 20 07776 नेवट दाराज्य मन्द्रवेणा जिव caw went there thereasy were are तकिराईमध्यत मध्य मिलन जन्द्र प्राईपर प्रमुधारी ३, ४, ७ ridianuel afferita.), armaian am 100 to the first state and the strengt other **Pry Reen** per ere a feferie, centre-3, centi-3 mil পিছি-১টিৰা পাঁৱছাৰ বাহিৰ ("চিৰায় কালেয়াৰ" with children (WDW) (alf all a confine as continue and forfation a fit THER WITH (CAMP STA MER) वर्षे, संब इ (गाणिक-७, (गणी-० जम्ह आहर्ष रिवटन वाहित्र (त्यतन हाज (बहन)) af bit a feffen a der einem er TH OUT of the same as cars that reason "Date witowate" ceta) es un paran an cam fan er ("টকার কালেচার" গেজ) 1.2 रने पर ३२ त्याक दिना वमारम्स तत त्यतंत प्राण मनुषामे २३ त्याक fin certs unt Same core sinte uten fern fern and not one, and use on care that anities we came who CTC. with winner the cours are there one with the লিছে নিবেন

Fig 2. EPI Vaccination card

In Fig 2 have shown that, the child of Azwad Amin Chowdhury have been vaccinated by six vaccines. This card holds all information on vaccines dose. If parents do not keep this card safely, all information will lost. So that this paper-based system is not secure for us.

III. System Design

In this research, we have developed a web-based and an android application which can be used by admin or staff to monitor child vaccination system. The proposed system architecture has been designed on the basis of three-tier architecture. The Three-tier architecture consists of the presentation layer, application layer, and data storage layer. The system design describes detailed information of this proposed system. Here admin and user (parents) can log in by online or mobile phone. Admin can manage the process of a system. The vaccination system architecture as shown in below Fig 3.

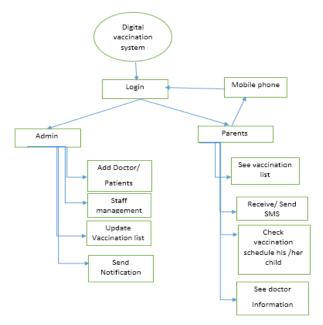


Fig 3. Vaccination system architecture

IV. Implementation

The system interface is shown in Figure 4. The system interface acts as an intermediary between user and system. This system interface is user-friendly. A user can access it easily without any complicacy or any cost. At first, user could register here through login. Any registered user can see his/her child vaccination schedule, and availability of vaccination also. Parents can communicate with child specialists because this system also stored the doctors' record. Admin creates awareness to parents using SMS alert. The details of the results which have been yield through the implementing of this research are organized as follows:



Fig 4. Home Page

Registration

Name *	Email *
Phone *	Date Of Birth *
Male •	Blood Group *
User Name *	Password *
Get	Register

Fig 5. Registration page of doctor/ patients

Using this page parent can register their child. Then he/she would use this system by a login. Figure 6 shows the login page. After login to the system with registered user password or username, a user can access the dashboard where they can create folders, upload and share files. This system also holds the various vaccination information and their price which is useful for parents.

	name		
use	ername		
Pass	word	Forg	jot your password?
Ent	ter your password		
F	emember me		
	_		
	Si	ign In	
	w	ebsite	
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	Fig 6.	Login page	
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	TOTAL PATIENT	TOTAL DOCTORS	
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·board	14	1	View TOTAL VACCINATION View
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Fig 7. Overview of Dashboard

Admin can log in with admin user password and access the admin panel where admin can add doctor and patients and edit the database of patients. Admin sends the SMS to parents for knowing the next dose of vaccines. Parents can see the update vaccination information from anywhere. The process of adding doctor/patient and sending SMS alert is showed in below Fig 8, 9.

admin	Add Do	tor	
窗 Dashboard	Full Nam	e Full Name	
Doctors	Ema	ll Email	
Add Doctor	Phor Numbe		
Doctor List	Gende	r 🔲 Male 🗐 FeMale 🗐 Others	
Patients	Departme	nt department	
Settings	> Joinin > Dat		
	Usernam	e username	
	Passwor	d	
	Addre	5	
	Imag	Choose File No file chosen	<i>i</i> i
	Submit		

窗 Dashboard		Full Name		
_		Email	Email	
Doctors	>			
🖄 Vaccination	>	Gender	Male	
Patients	~	Blood Group	A+	
Add Patient				
Patient List		Date of Birth		
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		Name		
		Password		
		Adress		
		Image	Choose File No file chosen	

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Fig 8. Add the doctor/patient

admin		Send SMS
		Number 880
습 Dashboard		Doctor Patient
🖉 Doctors	>	Message
🖄 Vaccination	>	massaga
🖉 Patients	>	
🖻 Enquiry	>	Submit
🗹 Settings	~	
SMS Campaig	an	

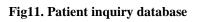
Fig 9. SMS sending process to the patient

After adding patients, admin can see the database of patients list. Admin can edit or delete the information of patients. They updated the list of vaccination. Parents can see whether vaccines are sold or available.

~	Dashboard		Patient List							
	Doctors)	Copy CSV	Excel	PDF Print			Se	arch:	
Ø	Vaccination	>	Name	Email		¢ Gender	Blood 🔅 Group	Date of $ arrow$ Birth	¢ Phone	Action
Q	Patients	*	Jahidul Alam	freelar	ncerrudro@gmail.com		selected	2017-04-12	8801917138757	Delete Edit
	Add Patient Patient List		Jahidul Alam	freelar	ncerrudro@gmail.com	others	selected	2017-04-12	01673293637	Delete Edit
	Vaccine Sold		jesmin	jesmin	@gmail.com	female	b+	1/1/2017	8801914528236	Delete Edit
0	Enquiry	>								
0	Settings	>	Showing 1 to	3 of 3 en	tries				Previous	1 Next

Fig 10. Patient's database

admin admin								
요 Dashboard	>	Enquiry List	Excel PDF	Print			Search:	
Vaccination	>	Date A	Name	÷	Email (Message		
Patients	>	2017-05-17 2017-05-17	Zohora Mo jesmin)U	engr.rudro@hotmail.com jesmin@gmail.com	Lam requesting for Hello sir	an vaccination pricing	
C Enquiry Enquiry List	×	2017-05-17	fahmina		fahmina@gmail.com	This is my admin pa	-	
🖉 Settings	>	Showing 1 to 3	of 3 entries				Previous 1	Ne



☐ Dashboard		Vaccination	List							
		Copy CSV	Exc	el PDF Print				Search:		
Doctors	> ~	Vaccination Name	n *	Age	1st o Dose	© 2nd Dose	3rd o Dose	th Dose	© Price	Action
Add Vaccination Vaccination List	2	Engerix B		Any age	Any day	1 month from 1st dose	6 months from 1st dose	N/A	1250	Delete Edit
Settings	,	Havrix		From 12 months	Anyday	6-12 months from 1st dose	N/A	N/A	800	Delete Edit
		Hiberix		From 12 months - 5 yrs (Previously unvaccinated)	Anyday	N/A	N/A	N/A	3000	Delete Edit
		Infanrix		From 2 months	Anyday	1 month from 1st dose	1 month from 2nd dose	6 months from 3rd dose (Should be completed by the age of 18)	500	Delete Edit
		Priorix		From 9 months	Anyday	3 months from 1st dose	N/A	N/A	1200	Delete Edit
		Rotarix		From 6 weeks	Anyday	4 weeks from 1st dose (Must be completed by the age of 6 months.)	N/A	N/A	1000	Delete Edit

Figure 11: Vaccination list

admin		Vaccination								
•		Vaccine Name:	Select Va	ccine			,			
Dashboard		Vaccine	Select Do	se			,			
Doctors	У	Dose:								
🖄 Vaccination	>	Start Date:								
Patients	Y	confirm								
Add Patient										
Add Patient Patient List Vaccine Sold		Vaccination L	ist							
Patient List	X		ist Excel PDF	Print				Searc	:h:	
Patient List Vaccine Sold	x		Excel PDF	Print	1st ¢ Dose	2nd Dose	3rd © Dose	Seard 4th Dose	th: Price	

Fig12. Vaccination sold list

V. Conclusion

Our proposed system is user-friendly because the online based system provides more facility and flexibility to the user. A user can access it without any cost or any stress. The main aim of this research is to develop our health technology by replacing the manual system with online base/Android apps. A user can access this system using their smartphone by a mobile application. Usually, most of the parents forget their child vaccination schedule and also lost the vaccination card. This system helps parents by sending SMS alert. Without vaccination card, parents did not get a permit to vaccines their child. Even some parents tell the wrong date of the previous dose which causes threat for children. All of these problems can be eliminated by using our proposed system. It also shows that how can we manage and maintain proper child vaccination schedule from cloud and android application. The limitations of our system are that the development of an Android application for this research is a web view application, not the native one. It can create some problem in the older android device due to non-native functionalities. In future work, we will extend this features. If Bangladesh government accept our suggested system, then it could be helpful to all parents.

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