

# National poll: Parents split on whether to vaccinate younger kids against COVID

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Just one age group remains when it comes to qualifying for a COVID-19 vaccine: young children.

But with [clinical trials](#) underway for authorizing a [vaccine](#) for children under 12, some parents remain hesitant about whether to get their kids vaccinated, a new national poll suggests.

Parents of children ages 3-11 are almost evenly split on whether to vaccinate kids once available, with 49% saying it's likely their child will get vaccinated and 51% saying it's unlikely, according to the University of Michigan Health C.S. Mott Children's Hospital National Poll on Children's Health.

Many parents agree that the recommendation of their child's [health care provider](#) will be influential when it comes to making their decision. But many of them (70% of those with kids ages 3-11 and half of those with kids 12-18) say they haven't discussed the COVID vaccine with their child's doctor.

"The COVID-19 pandemic has prompted parents to think about their child's health and safety in new ways, from mask wearing to attending in-person events. As COVID vaccine authorizations expand to younger age groups, parents are also considering whether and when their child should get vaccinated," said Mott Poll co-director Sarah Clark, M.P.H.

"As children prepare to return to school, our poll provides insight into parents' current stance on vaccinating kids and what factors into their decision making."

The nationally representative report is based on responses from 2,019 parents of at least one child age 3-18 years who were surveyed in June.

Among parents of children 12-18 years, 39% say their child already got a COVID vaccine and 21% say their child will likely get it, while 40% say it's unlikely.

Fewer parents with lower household income also say their child is likely to get a COVID vaccine compared to those with higher incomes (38% compared to 60%.)

## **Discussing COVID vaccines with children's health providers**

Aside from the recommendation of their child's health provider, other factors parents of children who have not yet received a COVID vaccine list as very important to their decision include side effects of the vaccine (70%), testing in the child's age group (63%), how well the vaccine works in children (62%), and parents' own research (56%), according to the poll.

But many parents are missing opportunities to discuss these questions and concerns with a doctor, Clark noted.

"Typically, parents look to their child's regular healthcare provider for information and guidance on vaccines for their child. But our report suggests that half of parents of children 12-18 years, for whom the COVID vaccine is already recommended and available, have not discussed it with their child's provider," Clark said.

"These discussions also aren't taking place among families of younger children, who are expected to be eligible for the COVID vaccine in the coming months."

While there are numerous ways for parents to get information about the vaccine in kids, some sources may be more technical and difficult to understand, while others may exaggerate some aspects of the information to support a particular belief or perspective about COVID vaccination, Clark said.

"Discussing the COVID vaccine with pediatricians and other child health providers will help parents sort through all the data and make an informed choice that is right for their child and their family," she said.

For example, providers can help parents differentiate between side effects that are expected and reflect a normal immune response (e.g., fever, sore arm) from potentially more serious events that may signal an unintended problem. Parents may also ask the provider to explain the emergency use authorization currently in place for COVID vaccine and how that compares to full FDA approval, as well as how to interpret data on vaccine effectiveness.

More parents of older than younger children (41% vs 19%) say their child's regular healthcare provider recommends COVID vaccination. Far fewer parents say they discussed COVID vaccination, but the provider didn't give a recommendation or recommended against vaccination.

When it came to the location of a child's vaccination, only 19% of parents whose child got a COVID vaccine say it was a doctor's office, more commonly using retail pharmacies (36%) or public COVID vaccination sites (29%). But among parents whose child is not vaccinated, most preferred to get the vaccine at a doctor's office (42%), compared to 5% who would choose a pharmacy or public site and 19% who had no preference.

"Many parents are used to their children getting vaccines at the doctor's office," Clark said. "Our poll suggests that availability of COVID vaccine in pediatric clinics may help parents feel more comfortable with getting their child vaccinated."

With children and teens under 18 making up nearly a fifth of the nation's population, vaccination among younger age groups may play an important role in achieving herd immunity and controlling the pandemic over time, Clark noted.

Last year, more than 2 million of the nearly 30 million confirmed cases of COVID-19 in the U.S. involved children, according to the Centers for

Disease Control. While the majority of children and teens have mild COVID-19 symptoms, some face persistent symptoms months after recovery (long haul COVID) or develop a rare but serious COVID-linked condition called multisystem inflammatory syndrome, or MIS-C.

Clark recommends parents of younger [children](#) who have appointments for check-ups or minor illnesses include questions about the COVID vaccine during upcoming visits.

"It's important that parents and providers don't wait for full COVID vaccine approval to begin discussions about vaccination," she said.

"Our poll suggests [parents](#) are already forming opinions, and it's essential that their decision-making process include accurate information, as well as a professional recommendation from the child's healthcare provider."

**More information:** About the poll: [mottpoll.org/](https://mottpoll.org/)

Provided by University of Michigan

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