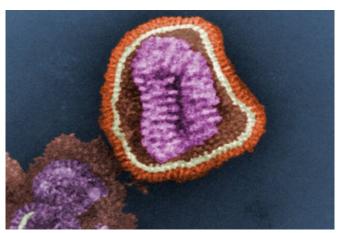


Study finds significant parental hesitancy about routine childhood and influenza vaccines

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This digitally-colorized transmission electron microscopic image depicts the ultrastructural details of an influenza virus particle. Credit: CDC, Frederick Murphy

A national study measuring parental attitudes toward vaccinations found 6.1% were hesitant about routine childhood immunizations while nearly 26% were hesitant about the influenza vaccine.

"Our study provides the first national estimates of hesitancy about routine childhood and influenza vaccination among representative samples of U.S. parents of children, using a scale specifically developed and validated to assess vaccine hesitancy internationally," said the study's lead author Allison Kempe, MD, MPH, professor of pediatrics at the University of Colorado School of Medicine and director of ACCORDS which brings together investigators from across CU Anschutz Medical Campus to conduct research for real world impact.

The study was published today in the journal *Pediatrics*.

The investigators surveyed 2,176 parents and found 12% strongly agreed and 27% somewhat agreed they had concerns over serious side effects of both routine childhood and influenza vaccines. In contrast, 70% strongly agreed that routine vaccinations were effective versus only 26% for the influenza vaccine.

The researchers found those with less than a bachelor's degree more skeptical of vaccinations. Race and ethnicity didn't play a major role in these attitudes but Latino parents were less hesitant than white, non-Latino parents about getting vaccinated against influenza.

"The fact that one in eight parents are still concerned about vaccine safety for both childhood and influenza vaccinations is discouraging," said Kempe who practices at Children's Hospital Colorado. "But what is driving the hesitancy about the influenza vaccine is primarily doubts about its effectiveness."

In fact, the vaccine is not 100% effective in preventing influenza but, even in a year where there is not a good match between circulating strains and the vaccine, Kempe said it lessens the severity of the illness which kills between 10,000 and 60,000 Americans annually.

Last year, the World Health Organization (WHO) designated vaccine hesitancy as one of the ten leading threats to global health. In many countries, including the U.S., hesitancy about childhood vaccines has contributed to lower rates of childhood vaccination, with associated outbreaks of vaccine-preventable diseases, including pertussis, mumps and measles.

As of 2018-2019, just 57.9% of American children were vaccinated against influenza.



"That means in any given year more than 40% of children are not vaccinated against influenza," Kempe said. "We have already seen outbreaks of preventable diseases like measles and mumps. Low vaccination rates among children for influenza vaccine makes influenza seasons more severe for all portions of the population, since children are a major conduit of the disease to vulnerable parts of the population such as the elderly."

Understanding the reasons for hesitancy, Kempe said, will help providers develop interventions to combat vaccine hesitancy.

In addressing parents who are already hesitant about vaccines, the study suggests focusing on changing behavior rather than directly countering beliefs or attitudes.

Examples of this would include:

- Strong and presumptive, rather than openended, recommendations by a trusted provider.
- The use of standing orders.
- Making it easier to deliver vaccines via clinics and schools.
- · Reminders and calls.
- Enacting preschool and school influenza vaccine requirements.
- Minimizing philosophic exemptions to the vaccine.

"There is evidence that communication techniques such as motivational interviewing can be helpful in convincing some hesitant parents to vaccinate in the primary care setting," the study said. "The use of social media interventions, some of which involve trained parents as advocates for vaccination within their own communities, has shown some effectiveness in overcoming hesitancy."

Kempe said the best way to counter hesitancy may be to prevent it from developing by starting conversations about vaccines before a baby is born.

"Ideally, we'd like to immunize parents against all the misinformation that is out there," she said. Provided by CU Anschutz Medical Campus



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