Response to “Attitudes of parents with children aged 12-18 to COVID-19 vaccines for themselves and their children: vaccine hesitancy in Türkiye”


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Dear Editor,

We would like to thank the authors for their interest in our article. Below, we have provided our response to the comments and concerns raised by the authors.2

As the authors note, rates of vaccine hesitancy vary between regions. Since our research was conducted in only one province of Türkiye, it has limitations in reflecting the situation throughout the country.1 However, when the research was conducted, the rate of adults in İzmir (%86) receiving at least two doses of the COVID-19 vaccine was similar to the general average in Türkiye (%85.6), unlike the refusal of routine childhood vaccines.3 In our study, 8% of participants had routine childhood vaccination hesitancy. However, we did not detect a statistically significant relationship between routine childhood vaccine hesitancy and COVID-19 vaccine hesitancy (p = 0.611).1 With this, it can be said that there is a need to conduct multi-center research and include a larger number of participants in research on COVID-19 vaccine refusal in our country.

As a result of our study, 11.4% of the children had a history of COVID-19, but in the logistic regression analysis, there was no statistically significant relationship between parents’ acceptance of the COVID-19 vaccine and their children’s history of COVID-19.1 However, in our study, the relationship between conditions such as hospitalization or death, including chronic illness in the child, and parental acceptance of the COVID-19 vaccine was not evaluated. This can be considered among the limitations of our study. As mentioned in the letter, since the research population consisted of those who applied to our hospital, it does not include parents who refuse health services or other interventions along with vaccine refusal. Therefore, the rate of COVID-19 vaccine refusal by parents for their children may be higher than we found.

Studies conducted before the pandemic evaluated the reasons for refusing routine childhood vaccines, which have been around and administered longer than COVID-19 vaccines. In these studies, “Concerns about vaccine content and harmfulness” were found to be more prominent.45 However, since COVID-19 vaccines are new and use different technologies, the reasons for refusal of the COVID-19 vaccine will likely be different from those of other childhood vaccines. Indeed, the main concerns reported by parents in our study were the side effects and the vaccine’s safety.1 Various studies on accepting COVID-19 vaccines have also shown that parents’ main concerns

10 years of age or older were included in the study. However, not all parents with children in the study were parents of children with COVID-19. Therefore, our study findings may not be generalizable to all parents of children with COVID-19. Further research is needed to determine the reasons for the relatively low rate of COVID-19 vaccine acceptance among parents of children with COVID-19.

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about vaccines are safety and effectiveness. In conclusion, the results of studies suggest that COVID-19 vaccine refusal may have its own reasons.

REFERENCES


