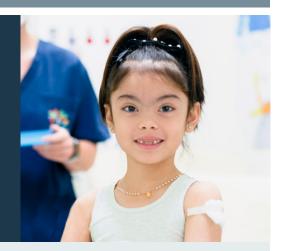


Flu vaccine for children: Parents' plans for 2022



Poll 25, May 2022

Poll report

Dr Anthea Rhodes, Director

Report highlights

- According to parents, half of Australian children (50%) will be vaccinated against the flu this season, with planned uptake highest among children under five years of age (55%).
- One in four children (27%) have parents who are unsure whether to vaccinate their child for flu.
- One in three parents (37%) are not aware that healthy children can get seriously unwell from the flu.
- Just under half of parents (43%) think the flu vaccine is not as important for children as the COVID-19 vaccine.
- Cost is a potential barrier to uptake of the flu vaccine for one in three families (27%).
- More than half of parents (53%) don't know it is safe to have the flu vaccine and the COVID-19 vaccine at the same time.

More than half of parents don't know it's safe for children to have the flu vaccine and the COVID-19 vaccine at the same time



The influenza (flu) vaccine is recommended for babies and children every year, from the time they are six months old. It is free in Australia for all children aged six months to under five years. The 2022 seasonal flu vaccine has been available for children in Australia since April this year.

In April 2022 we surveyed a nationally representative sample (by age, sex and state of residence) of Australian parents of children aged between six months and 17 years about their uptake of the flu vaccine for their children this season. They were also asked to rate their level of agreement with statements about the benefits and safety of the flu vaccine and how their views and plans may have been affected by COVID-19.

Data were collected from a sample of 2,002 parents on 3,288 children aged between six months and 17 years.

What are parents' plans for vaccinating their child against flu in autumn/winter 2022?

According to parents surveyed in April 2022, half of all children are likely to be vaccinated against flu for the 2022 autumn/winter season, with 11% of children already vaccinated and a further 39% planned to be (see Figure 1). About one in four children (27%) have parents who are unsure whether to vaccinate their child for flu. Parental intention to vaccinate for flu is slightly lower for school aged children compared to younger children (55% for 6 months—<5 years, 50% for 5–12 years, and 45% for 13–17 years). In Australia, the flu vaccine is free for all children aged six months to less than five years.

Among parents who said their child had the flu vaccine in previous years (45%), the vast majority (80%) intend for their child to have the flu vaccine again this year. In contrast, among parents whose child has not previously had the flu vaccine, only 24% say their child is likely to get the flu vaccine this year. Those parents with a

regular family GP were more likely to indicate intended flu vaccine uptake for their child (52%) than those without a GP (41%).

Those parents working full time were more likely to indicate intent to have their child vaccinated for flu (53%) than parents working part time (41%) or those not working (45%). Those living in major cities were more likely (50%) to indicate plans to vaccinate than those living in regional areas (45%). Parents from higher socio-economic backgrounds (highest quintile on SEIFA¹) were more likely to report a higher level of intention to vaccinate (57%) than those in the lowest quintile (39%). Male parents were more likely to indicate uptake for their child (55%) than female parents (44%). There was no difference in intention based on age of parent, level of education, country of birth or language spoken at home.

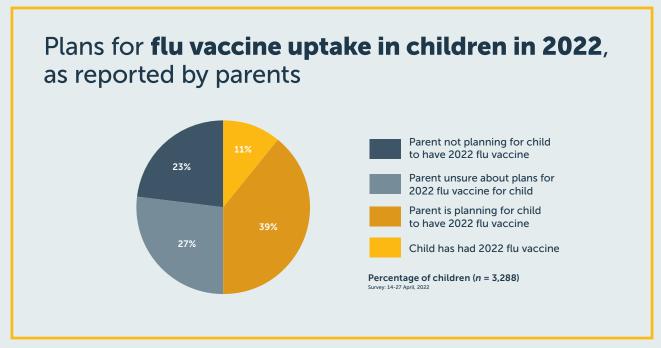


Figure 1.

What are the perceptions and concerns about the flu vaccine among parents?

Across all parents, more than a third (37%) did not know that healthy children can get seriously unwell from the flu and almost half (44%) did not know that it is necessary to get the flu vaccine every year in order to provide children with optimal protection. These knowledge gaps were more common among parents who did not intend to vaccinate their child for flu compared to those who did, or had already.

Among those parents who were hesitant about the flu vaccine for their child (unsure or not planning to vaccinate) reasons include the belief that the flu vaccine is not necessary every year (46%), children have too many vaccines (37%), concerns about efficacy (35%), cost (29%) and concerns about safety (17%). Some parents believe the flu vaccine is not necessary because the flu is not that serious in children (32%), or because there will be less flu this year than in previous years (19%). Almost a quarter of parents (22%) hold the misbelief that children can catch the flu from the flu vaccine (see Figure 2).

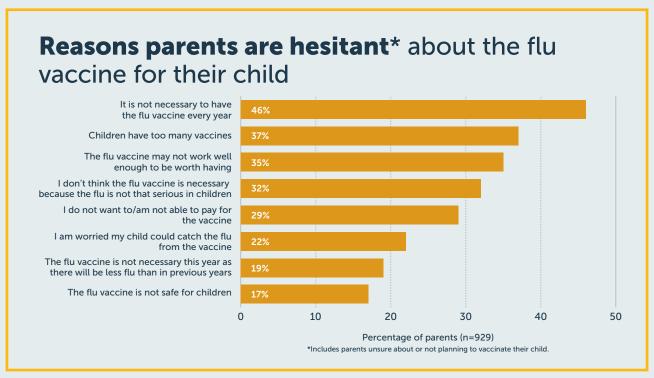


Figure 2.

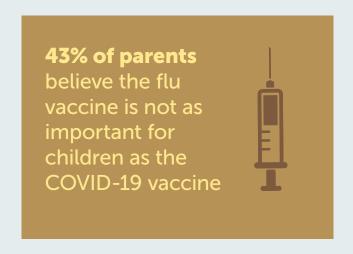
What is the impact of the COVID-19 pandemic on parent perceptions and plans for flu vaccine?

Intention to vaccinate young children aged between six months and less than five years against flu this season (55%) is higher compared to findings in a pre-pandemic 2018 RCH Poll² (46%), suggesting experiences during the COVID-19 pandemic may have positively influenced decision making among parents. In contrast, a quarter of all parents believe that children have too many vaccines, and cite this as a reason not to vaccinate against flu this year.

There is confusion among parents about the recommendations for flu vaccine in the context of the COVID-19 vaccine in children, with more than half (53%) of parents not knowing that it is safe to have the flu vaccine and the COVID-19 vaccine at the same time. Just under half of parents (43%) believe the flu

vaccine is not as important for children as the COVID-19 vaccine.

Intentions regarding the uptake of the flu vaccine for children who had reportedly had COVID-19 infection (n=859) were similar (53%) when compared to those who had not had COVID-19 infection (49%).



Implications

Seasonal influenza is a major public health problem, responsible for thousands of deaths worldwide each year, including in children⁴. The 2022 flu season has already begun in Australia with high numbers of cases, leading many health experts to express concern that it will be a particularly severe season. Two years of very little exposure to flu, combined with reduced uptake of flu vaccine, may leave children more vulnerable to flu³. With children back at school and international travel back underway, we are currently seeing increasing cases of flu infection in the community⁵.

This poll found that although intended uptake for flu vaccine in children in 2022 was slightly higher in Australia than it has been in previous years, half of parents remain hesitant to vaccinate, with almost a quarter not planning to take up the flu vaccine for their child, and a further quarter unsure. Of concern, one in three parents are not aware the flu can make healthy children seriously unwell. The most common reasons for flu vaccine hesitancy include beliefs that it isn't necessary or effective and misplaced concerns about safety. These notions are often based on misconceptions about the potential for children to become severely ill with flu and the efficacy of the flu vaccine, which offers the best protection against infection and developing severe flu-related illness.

Although flu vaccine is free for children aged six months to five years, cost remains a barrier for parents of older children and warrants consideration by policy makers. Those parents who have vaccinated their child against flu in the past, and those with a regular family GP are more likely to plan to vaccinate their child against flu this year.

An additional issue is the confusion among parents with regard to the recommendations and safety of the flu vaccine alongside the COVID-19 vaccine. Just under half (43%) believe the flu vaccine is not as important for children as the COVID-19 vaccine. Half of parents are not aware it is safe to give the flu and COVID-19 vaccines at the same time.

As we continue to navigate the COVID-19 pandemic, there are concerns about how the onset of flu season may compound ongoing challenges in managing COVID-19. We may see peaks of flu and COVID-19 at the same time, which could make individual children seriously unwell, as well as overwhelming the health care system and potentially reducing our ability to treat both illnesses effectively. Proven public health measures such as vaccination and hygiene can substantially reduce the impact of these infectious diseases on children and their families. Keeping children well will help ensure they don't miss out on attending school and social activities.

As winter rapidly approaches, health care providers should actively promote flu vaccination, especially to families who are unsure or have not vaccinated in the past, as part of a campaign to increase protection from flu and mitigate morbidity and mortality during the overlapping flu epidemic and COVID-19 pandemic. This may also provide a timely opportunity to offer COVID-19 boosters for eligible children.

Better public health messaging is needed to inform parents of the risks of flu in children and the importance and effectiveness of the flu vaccine, as well as clarification of the safety of the flu vaccine when given alongside vaccines for COVID-19.

The most **common reasons for flu vaccine hesitancy** include beliefs that it isn't necessary or effective and misplaced concerns about safety



Data source and methods



This report presents findings from a nationally representative household survey conducted exclusively by the Online Research Unit for The Royal Children's Hospital, Melbourne. The survey was administered from 14-27 April, 2022, to a randomly selected, stratified nationally representative sample of adults aged 18 and older (n = 2,002). All respondents were parents or caregivers to children aged between six months and less than 17 years. Respondents provided data on a collective total of 3,288 children. The sample was subsequently weighted to reflect Australian population figures from the Australian Bureau of Statistics. Among Online Research Unit panel members contacted to participate the completion rate was 58%.

A copy of the survey can be found on the RCH Poll website.

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For a full list of references please email child.healthpoll@rch.org.au

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