



## Families' Acceptance, Concerns and Obstacles Towards COVID-19 Vaccine Among Children in Saudi Arabia: A Cross Sectional Survey

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**Abstract:** While coronavirus disease 2019 has become a pandemic, the necessity of vaccination is crucial. Early 2020, scientists across the world started their vaccine trials to fight the pandemic. More than 46 million doses of a COVID-19 vaccines have been administered in Saudi Arabia. However, vaccine hesitancy, especially from parents towards their children can be an obstacle. As the parents can be hesitant, they can refuse or deny to vaccinate their children. Our aim is to investigate families' acceptance, concerns, and obstacles related to COVID-19 vaccine among children in Saudi Arabia. Cross-sectional study was conducted from January to April 2022. An online form questionnaire composed of 15 questions was distributed electronically. Our results showed a total of 250 respondents were included in the analysis, of which 78% were female and 22% male aged between 21 to 78 years old. 88% had a university education and 40% was received 3 doses of COVID vaccine, 55.5% received two doses of vaccine, 4% received only one dose and 1% not vaccinated. 64% of parents do not support their children receiving the Corona vaccine, while 36% are supportive of it. This study revealed that many parents were hesitant to give immunity against SARS-CoV-2 to their children. Further educational programs and influence from the social media for parents and community is essential to fight this hesitancy.

**Key Words:** Vaccination, Beliefs, Barriers, Saudi Arabia, Covid-19

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## 1. INTRODUCTION

Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus<sup>1</sup>. This new infection was believed to have emerged from Wuhan City, Hubei Province, China in December 2019<sup>2</sup>. The virus has a single-stranded RNA genome.<sup>3</sup> Among all the RNA viruses, the RNA genome of Coronavirus (Covid) is one among the largest<sup>4</sup>. On March 11, 2020, the World Health Organization (WHO) declared COVID-19 as a pandemic<sup>5</sup>. (COVID-19) pandemic has approximately affected 113 million individuals worldwide; of which around 2.5 million people lost their lives unfortunately<sup>6</sup>. Most people infected with the virus will experience mild to moderate respiratory illness and recover without requiring special treatment<sup>7</sup>. However, some will become seriously ill and require medical attention and hospitalization<sup>8</sup>. Older people and those with underlying medical conditions like cardiovascular disease, diabetes, chronic respiratory disease, or cancer are more likely to develop serious illness<sup>9</sup>. Anyone can get sick with COVID-19 and become seriously ill or die at any age<sup>10,11</sup>. Early 2020, scientists across the world started their vaccine trials to fight the pandemic<sup>11,12</sup>. More than 46 million doses of a COVID-19 vaccines have been administered in Saudi Arabia<sup>13</sup>. Many countries have already approved the use of vaccines for children ages 12 and over<sup>14</sup>. In some, attention is now turning to expanding vaccination eligibility to include younger children, following research into their safety and benefits<sup>14</sup>. WHO on Saudi Arabia announced on December 2021 that, children in the age group of 5-11 will now be able to receive their first dose of COVID-19 vaccines and they noted in a statement that, the priority of receiving the shots will be giving for those children at high-risk and have more susceptible from the virus' complications<sup>15</sup>. They are suggesting that vaccines offer a safe and effective way for children to return to school and resume normal, everyday life and to reduce the risk of them spreading the disease to their families. Despite of this statement, some parents still have reservations about the vaccination and its harmful effects on their children. In this research, we aim to find the reasons that led to this concern and hopefully solve it.

## 2. MATERIALS AND METHODS

Cross-sectional study was conducted from January to April 2022. An online form questionnaire composed of 15 questions

was distributed electronically. To be included in the final analytic sample, the respondents must have children, Arabic speakers and currently residing in Saudi Arabia. Excluded respondents were those who partially submitted their responses, those who did not have children and Saudi Nationals who reside out-side Saudi Arabia. The questionnaire consists of demographic data such as age, social and educational status of the parents. Then, the number of doses, they received from the Corona vaccine, and if they & their children adhered to the precautionary measures against the Coronavirus and whether they supported or opposed their Children's receiving the Corona vaccine, with mention of the reasons and if, their children had received the vaccine, what are the side effects that appeared and the percentage of their fear of the vaccine towards children.

### 2.1 Outcome of the study

The main outcome of the study was 1) the family's acceptance toward the uptake of the COVID-19 vaccine on children under 12 years old, 2) To what degree they are hesitant about getting the vaccine of their children, 3) to determine what is the most side effect appears on their children from the vaccine.

## 3. STATISTICAL ANALYSIS

The data was collected, organized by and saved into an excel sheet, then converted and coded using a statistical package for social sciences (SPSS, Inc. Chicago, IL). A p-value below 0.05 was determined statistically significant.

## 4. RESULTS

A total of 250 respondents were included in the analysis, of which, 78% were female and 22% male aged between 21 to 78 years old. 88% had a university education and 40% received 3 doses of COVID vaccine, 55.5% received two doses of vaccine, 4% received only one dose and 1% not vaccinated. The results also showed that 76% of the parents require their children to take precautionary measures and wear a mask, 15% not always, and 9% do not require them to follow the precautionary measures. 64% of parents do not support their children receiving the Corona vaccine, while 36% are supportive of it.

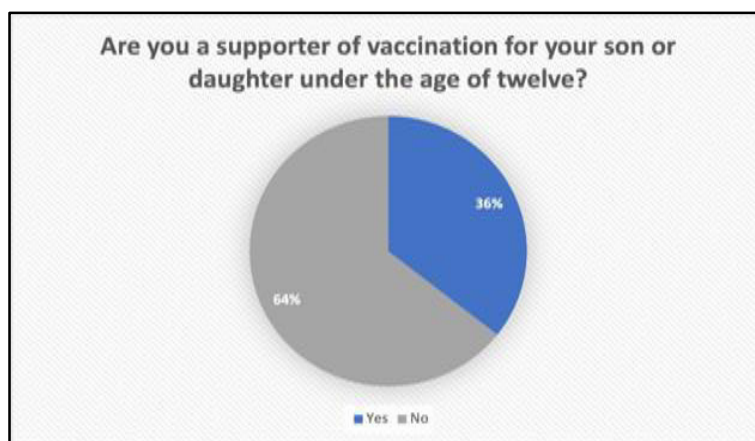
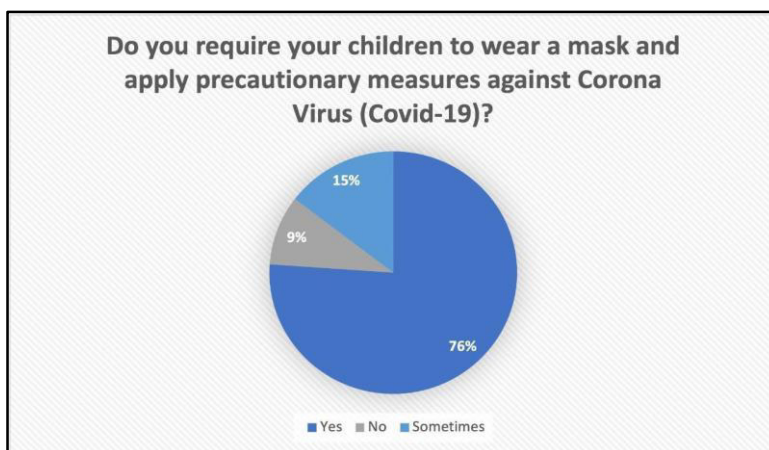


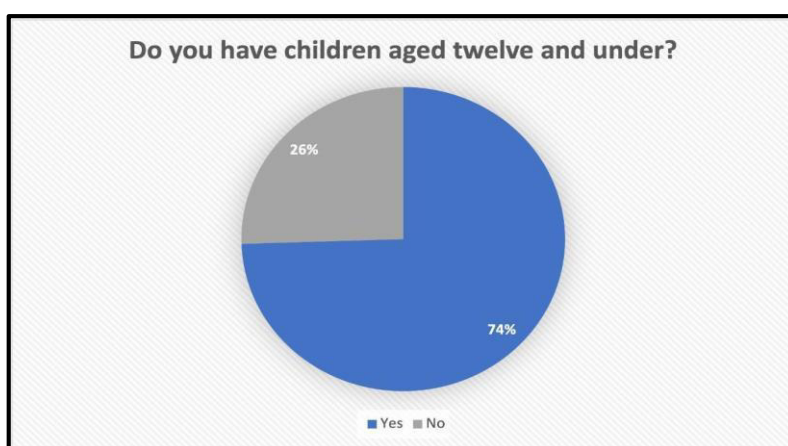
Fig 1 demonstrates participants support towards vaccination of their children, almost 36% agreed and the 64% denied.

Fig I: Participant support towards vaccination of their children. N=250



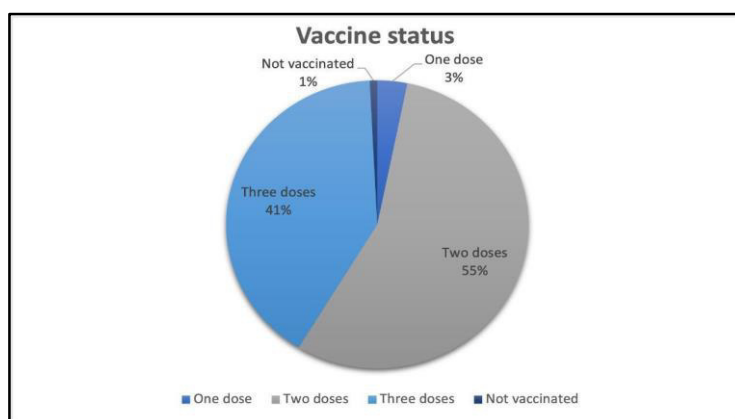
*Fig 2 demonstrate the protective measures done by parents as wearing masks 76% of the parent confirmed doing this and 9 % denied it.*

**Fig 2: Protective measures parents provide to their children. N=250**



*Fig 3 showed how many children did the parent had under the age of 12 years of 74% of the respondent had children under the age of 12 years old.*

**Figure 3: Number of children underage of 12 in the study respondents. N=250**



*Fig 4 demonstrate the status of parents vaccine, around 55% of them took two doses of Covid-19 vaccine, 41% took the three doses and only 3% took One dose.*

**Figure 4: Vaccine status of the respondents. N=250**

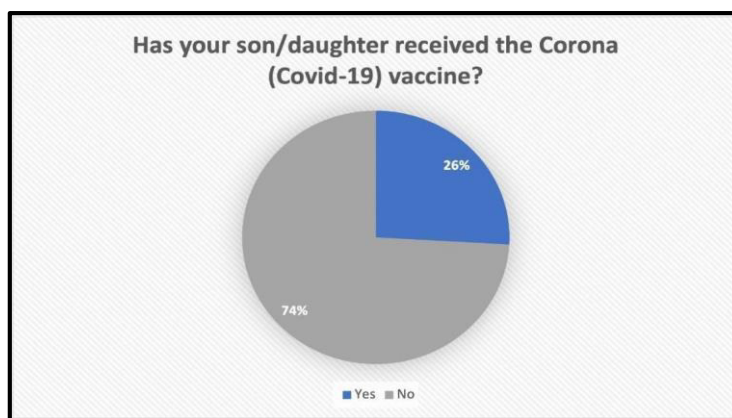


Fig 5 demonstrate the vaccination status of the children, only 26 % of them were vaccinated.

Fig 5: Vaccine status of the children. N=250

## 5. DISCUSSION

Our main aim of the study was to investigate families' acceptance, concerns, and obstacles related to COVID-19 vaccine among children in Saudi Arabia. This study provides early insight into the Saudi population's knowledge, acceptability and perception regarding COVID-19 vaccines to their children. Parents' concern for their children has led to an increase in demand, awareness that is associated with better acceptance towards COVID-19 vaccine. This study observed the worries among the participants regarding the safety and efficacy of COVID-19 vaccines for children. This finding can help the Ministry of Health to plan for future efforts to increase vaccine uptake that may eventually lead to herd immunity against SARS-CoV-2 to the children. We saw similar findings reported in Ireland and the UK where individuals belonging to the age group 18–24 years were more hesitant to receive the COVID-19 vaccine<sup>16</sup>. Another study in Jordan and Kuwait informed that the acceptance of the COVID-19 vaccine was higher among males and people that resulted in their higher educational status<sup>17</sup>. We found that people who were previously infected with COVID-19 were more likely to receive the vaccine than those who were not infected, this was clearly shown in a study done in Saudi Arabia<sup>18</sup> and France<sup>19</sup>. In other countries, they believe that when you are vaccinated the possibility of less infection rate will happen<sup>20-23</sup>. One of the reasons for rejection was that they believed that children have strong immunity against viruses & diseases and there is no need to receive the vaccine. They are also afraid because there are not enough studies that support the effectiveness of vaccination for children and that studies are under construction & development. Some of the reasons for rejection are also their fear of long-term side effects, such as their lack of immunity and the impact on growth and their feeling that it is not safe for their children and also their lack of confidence in it. The reasons for the support were their confidence in everything that the Saudi Ministry of Health offers, to prevent them from contacting the disease, to return life to normal, to protect their children, and to build immunity against the virus. We found one of the odd objections was that they were afraid of the content of the vaccine<sup>24-26</sup>. Among the side effects that appeared is a rise in temperature, severe pain at the place of receiving the vaccine which is normal among all other vaccines, headache, lethargy, nausea, cramps and vomiting. There are also those who appeared to have chest pains when breathing and movement, which necessitated the taking of oxygen. This present study had some limitations, as the study was an online survey rather than

face to face interview. In addition to the small sample size, future recommendation to include larger numbers of participants should be considered. Moreover, researchers such as Van Der Linden et al. (2021) suggested that to combat vaccine misinformation, the public should be immunized against misinformation, which is a process that could draw on the concept of psychological inoculation and objection<sup>22, 27</sup>.

## 6. CONCLUSION

This study revealed that many parents were hesitant to give immunity against SARS-CoV-2 to their children. This is a huge obstacle towards health and safety of children. Therefore, our study enlightens the necessity to educate parents & the community towards vaccination of children and their health support. For future recommendation it is indeed great to have multiple sessions with community and parents to emphasize on the benefits of vaccine and their safety and efficacy towards children protection and immunity.

## 7. AUTHOR CONTRIBUTION STATEMENT

Mohammed Simsim, Refal Fagieha, Lamya Almatrafi and Yosra Alhindi, studied conception, supervision, project administration, and revision. Mohammed Simsim, Refal Fagieha, Lamya Almatrafi, Alaa Falemban Deena Bukhary and Safaa Alsanosi contributed to the literature review and writing/ manuscript preparation such as writing the initial draft, data collection, formal analysis and data presentation, data collection.

### 7.1 Ethical approval

The Medical Ethics Committee of Umm Al-Qura University, Saudi Arabia, approved the study ethical approval number: (HAPO-02-K-012-2022-05-1107). Furthermore, electronic informed consent was obtained from each participant to submit their answers, and they can withdraw at any time.

### 7.2 Data and materials availability

All data associated with this study are presented in the paper.

## 8. CONFLICT OF INTEREST

Conflict of interest declared none.

## 9. REFERENCES

- Alamer E, Alhazmi A, Qasir NA, Alamer R, Areeshi H, Gohal G et al. Side effects of COVID-19 Pfizer-BioNTech mRNA vaccine in children aged 12-18 years in Saudi Arabia. *Vaccines*. 2021 Nov;9(11):1297. doi: 10.3390/vaccines9111297, PMID 34835228.
- Al-Mohaithef M, Padhi BK. Determinants of COVID-19 vaccine acceptance in Saudi Arabia: a web-based national survey. *J Multidiscip Healthc*. 2020;13:1657-63. doi: 10.2147/JMDH.S276771, PMID 33262600.
- Alshahrani SM, Dehom S, Almutairi D, Alnasser BS, Alsaif B, Alabdrabalnabi AA et al. Acceptability of COVID-19 vaccination in Saudi Arabia: A cross-sectional study using a web-based survey. *Hum Vaccin Immunother*. 2021 Oct 3;17(10):3338-47. doi: 10.1080/21645515.2021.1936869, PMID 34236290.
- Amarilla AA, Sng JDJ, Parry R, Deerain JM, Potter JR, Setoh YX et al. A versatile reverse genetics platform for SARS-CoV-2 and other positive-strand RNA viruses. *Nat Commun*. 2021 Jun 8;12(1):3431. doi: 10.1038/s41467-021-23779-5, PMID 34103499.
- Atzrodt CL, Maknoja I, McCarthy RDP, Oldfield TM, Po J, Ta KTL et al. A Guide to COVID-19: a global pandemic caused by the novel coronavirus SARS-CoV-2. *FEBS Journal*. 2020 Sep;287(17):3633-50. doi: 10.1111/febs.15375, PMID 32446285.
- Chalise HN. COVID-19 situation and challenges for Nepal. *Asia Pac J Public Health*. 2020 Jul;32(5):281-2. doi: 10.1177/1010539520932709, PMID 32545991.
- Clark A, Jit M, Warren-Gash C, Guthrie B, Wang HHX, Mercer SW et al. Global, regional, and national estimates of the population at increased risk of severe COVID-19 due to underlying health conditions in 2020: a modelling study. *Lancet Glob Health*. 2020 Aug 1;8(8):e1003-17. doi: 10.1016/S2214-109X(20)30264-3.
- Fazel M, Puntis S, White SR, Townsend A, Mansfield KL, Viner R et al. Willingness of children and adolescents to have a COVID-19 vaccination: results of a large whole schools survey in England. *EClinicalmedicine*. 2021 Oct 1;40:101144. doi: 10.1016/j.eclinm.2021.101144, PMID 34608453.
- Hill B. Coronavirus: origins, signs, prevention and management of patients. *Br J Nurs*. 2020 Apr 9;29(7):399-402. doi: 10.12968/bjon.2020.29.7.399, PMID 32279552.
- Ortiz-Prado E, Simbaña-Rivera K, Gómez-Barreno L, Rubio-Neira M, Guaman LP, Kyriakidis NC, et al. Clinical, molecular, and epidemiological characterization of the SARS-CoV-2 virus and the coronavirus Disease 2019 (COVID-19), a comprehensive literature review. *Diagn Microbiol Infect Dis*. 2020;98(1):115094. doi: 10.1016/j.diagmicrobio.2020.115094, PMID 32623267.
- Izah SC, Chandel SS, Aigberua AO, Venkatachalam T, Verma D. Coronavirus disease 2019: the emergence of popular unverified myths and realities to its spread. *Int J Life Sci Pharm Res*. 2020;10(5):17-26. Rudan I. A cascade of causes that led to the COVID-19 tragedy in Italy and in other European Union countries. *J Glob Health*. 2020 Jun;10(1):010335. doi: 10.7189/jogh-10-010335, PMID 32257150.
- Tourkmani AM, Bin Rashed AM, AlEissa MS, Alqahtani SM, AlOtaibi AF, Almujil MS et al. Prevalence of COVID-19 infection among patients with diabetes and their vaccination coverage status in Saudi Arabia: A cross-sectional analysis from a hospital-based diabetes registry. *Vaccines*. 2022 Feb 16;10(2):310. doi: 10.3390/vaccines10020310, PMID 35214769.
- Vinokurova L, Solovyeva V, Filippova V. When ice turns to water: forest fires and indigenous settlements in the republic of Sakha (Yakutia). *Sustainability*. 2022;14(8):4759. doi: 10.3390/su14084759.
- Wang FS, Zhang C. What to do next to control the 2019-nCoV epidemic? *Lancet*. 2020 Feb 8;395(10222):391-3. doi: 10.1016/S0140-6736(20)30300-7, PMID 32035533.
- Murphy J, Vallières F, Bentall RP, Shevlin M, McBride O, Hartman TK; et al. Psychological characteristics associated with COVID-19 vaccine hesitancy and resistance in Ireland and the United Kingdom. *Nat Commun*. 2021;12(1):29. doi: 10.1038/s41467-020-20226-9, PMID 33397962.
- Sallam M, Dababseh D, Eid H, Al-Mahzoum K, Al-Haidar A, Taim D et al. High rates of COVID-19 vaccine hesitancy and its association with conspiracy beliefs: A study in Jordan and Kuwait among other Arab countries. *Vaccines*. 2021;9(1):42. doi: 10.3390/vaccines9010042, PMID 33445581.
- Ward JK, Alleaume C, Peretti-Watel P, COCONEL Group. The French public's attitudes to a future COVID-19 vaccine: the politicization of a public health issue. *Soc Sci Med*. 2020;265:113414. doi: 10.1016/j.socscimed.2020.113414, PMID 33038683.
- V.D. Tran P, TV, Gribkova EI, Galkina GA, Loskutova EE, Dorofeeva VV et al. Determinants of COVID-19 vaccine acceptance in a high infection-rate country: A cross-sectional study in Russia. *Pharm Pract*. 2021;19:2276.
- Reno C, Maietti E, Fantini MP, Savoia E, Manzoli L, Montalti M et al. Enhancing COVID-19 vaccines acceptance: results from a survey on vaccine hesitancy in Northern Italy. *Vaccines*. 2021;9(4):378. doi: 10.3390/vaccines9040378, PMID 33924534.
- Wong MCS, Wong ELY, Huang J, Cheung AWL, Law K, Chong MKC; et al. Acceptance of the COVID-19 vaccine based on the health belief model: A population-based survey in Hong Kong. *Vaccine*. 2021;39(7):1148-56. doi: 10.1016/j.vaccine.2020.12.083, PMID 33461834.
- van der Linden S, Dixon G, Clarke C, Cook J. Inoculating against COVID-19 vaccine misinformation. *EClinicalmedicine*. 2021;33:100772. doi: 10.1016/j.eclinm.2021.100772, PMID 33655205.
- Bhartiya S, Kumar N, Singh T, Murugan S, Rajavel S, Wadhwani M. Knowledge, attitude and practice towards COVID-19 vaccination acceptance in West India. *Int J Community Med Public Health*. 2021;8:7.
- Alshaikhli H, Al-Naggar RA, Al-Maktari L, Madram S, Al-Rashidi RR. Epidemiology of Covid-19. In: Yemen: a descriptive study. *International Journal of Life science and Pharma Research (IJLPR)*. Vol. 10(5); 2020 Dec 1. p. 134-8.
- Nexøe J, Kragstrup J, Søgaard J. Decision on influenza vaccination among the elderly. A questionnaire study based on the Health Belief Model and the Multidimensional Locus of Control Theory. *Scand J*

- Prim Health Care. 1999;17(2):105-10. doi: 10.1080/028134399750002737, PMID 10439494.
25. Coe AB, Gatewood SBS, Moczygemba LR, Goode JV, Beckner JO. The use of the health belief model to assess predictors of intent to receive the novel (2009) H1N1 influenza vaccine. *Innov Pharm.* 2012;3(2):1-11. doi: 10.24926/iip.v3i2.257, PMID 22844651.
  26. Mo PKH, Lau JTF. Influenza vaccination uptake and associated factors among elderly population in Hong Kong: the application of the Health Belief Model. *Health Educ Res.* 2015;30(5):706-18. [Cr. doi: 10.1093/her/cyv038, PMID 26336905.