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Poll finds 3/4 of parents who tried to get H1N1 vaccine for their children have gotten it

More than 1/3 of parents overall do not expect to get H1N1 vaccine for kids; concerns about safety the major factor

Boston, MA – A new poll by researchers at the Harvard School of Public Health (HSPH) shows the shortage of H1N1 vaccine for children is easing. As of late last week, three-quarters of parents who tried to get the vaccine for their children were able to do so. Overall, six in 10 parents have gotten or expect to get their children vaccinated, but more than a third do not. More than half (60%) of those parents who do not expect to get the vaccine cite their concerns about the safety of the vaccine as the major reason. The Centers for Disease Control and Prevention (CDC) considers all children ages 6 months to 18 years old a high priority group for H1N1 vaccination.

The poll, which examines the American public's response to the distribution of H1N1 vaccines this fall, is the seventh in a series on public views concerning the H1N1 flu outbreak undertaken by the Harvard Opinion Research Program at HSPH. The poll was conducted December 16-17, 2009.

"Now that the H1N1 vaccine is more widely available, public health officials who want to increase vaccination rates will need to focus more attention on convincing people who most need it of its safety," said Professor Robert Blendon, Director of the Harvard Opinion Research Program and an expert in understanding the public response to emergencies that involve health threats. "Findings here—like past polls—suggest that beliefs about safety have been difficult to change for a segment of the public."

The poll also found an increase in adult uptake of the vaccine since early November, but 55% of adults said they do not intend to get it. "Overall the poll results indicate that even with further efforts from public health officials, many people will not seek the H1N1 vaccine or get

vaccinated," said Gillian SteelFisher, research scientist in the HSPH Department of Health Policy and Management and assistant director of the Harvard Opinion Research Program.

Concern about Getting Sick from H1N1 Drops Since September

This current poll of the American public suggests public concern about the personal risks of H1N1 have declined since a high in September. In September, 52% of people said they were concerned that they or someone in their immediate family may become sick from H1N1 during the next 12 months; only 40% of people said the same in the current December poll.

Compared to November, Fewer People Believe there is a Shortage of Vaccine

In November of this year − almost a month after vaccine distribution began − more than three-quarters of Americans (82%) said the U.S. was experiencing shortages of the vaccine. In the most recent December poll, about half (52%) said this. Asked about shortages in their own community, in November, 60% cited a local shortage whereas in the most recent December poll only about a third (34%) said this.

More Parents Who Tried to Get Vaccine for Their Children Succeeded; But A Substantial Share of Parents Do Not Intend to Get It

Parents' experiences appear to mirror their sense that the vaccine shortage is declining. Three-quarters (74%) of parents who tried to get the vaccine for their children were able to do so. This means that − in total − nearly 4 in 10 parents (38%) got the vaccine for their children. These figures compare to the November poll when only a third of parents (34%) who tried to get the vaccine for their children were able to do so, and 14% of children over 6 months in total received the vaccine. [The phrase, "parents" refers to parents of children 6 months and older, except in cases where the term "all parents" is used.]

More than a third of parents (35%) do not intend to get the vaccine for their children. The lead reason they give is safety concerns, which is cited by 60% of these parents as a "major reason" for their decision. Other factors cited as "major reasons" by parents include the idea that the outbreak is not as serious as public health officials once thought (28%); they don't believe their child is at risk for a serious case (25%); and they believe they can get medication to treat H1N1 if their child does get ill (24%).

Most High Priority Adults Have Not Yet Received H1N1 Vaccine

Poll findings indicate that less than a quarter (22%) of adults prioritized to receive the H1N1 flu vaccine have received it so far. These high priority adults include pregnant women; adults with chronic conditions that make them more vulnerable to flu complications; health and emergency personnel; adults who care for or live with children less than 6 months old; and young adults ages 18-24. In total, 53% of high priority adults say they have gotten the vaccine (22%) or intend to get it (31%), while 44% do not intend to get the H1N1 vaccine. This group cites safety concerns (38%), a belief that the outbreak is less serious than public officials once thought (32%); and a belief that they are not at risk for a serious case of H1N1 (28%) as major reasons for their decision not to get the vaccine.

Adult Uptake Has Increased Recently But Most Adults Do Not Intend to Get the Vaccine

Since the beginning of November, there has been an increase in the number of adults overall who have gotten the H1N1 vaccine, according to this new December poll (14% in December vs. 5% in November). More than half (57%) of all adults who tried to get the vaccine were able to get it. In total, 41% of all adults report that they have gotten the H1N1 vaccine (14%) or intend to get it (27%). More than half of all adults (55%) do not intend to get it.

Health Professionals Encourage Vaccine Uptake If Asked

A relatively small fraction of people have talked to a health professional about getting the vaccine for themselves (24%) or for their children (37% of all parents). However, those who do ask have mostly gotten recommendations to get the vaccine. Of all parents who asked a health professional, 64% say the health professional recommended they get the vaccine for their child while only 10% recommended against it. A quarter (25%) made no recommendation at all. Of high priority adults who asked a health professional, 71% say the health professional recommended they get the vaccine and only 13% recommended against it, with 16% making no recommendation at all.

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This is the seventh in a series of polls of public views concerning the H1N1 flu outbreak undertaken by the Harvard Opinion Research Program (HORP) at HSPH. Previous polls are listed below:

"Poll: Travelers Taking Significantly More Precautions Against H1N1 and Seasonal Flu on Trips This Year," December 10, 2009

"Poll Finds Two-thirds of Parents and High-priority Adults Who Tried to Get H1N1 Vaccine Were Unable to Get It," November 6, 2009.
"Survey Finds Just 40% of Adults Absolutely Certain They Will Get H1N1 Vaccine," October 2, 2009
"National Survey Finds Six in Ten Americans Believe Serious Outbreak of Influenza A (H1N1) Likely in Fall/Winter," July 15, 2009
"Survey Finds Many Americans Have Taken Steps to Protect Themselves Against H1N1," May 8, 2009
"Survey Finds Nearly Half of Americans Concerned They Or Their Family May Get Sick from Swine Flu," May 1, 2009.
Another survey from HORP looked at business preparedness:
"Four-Fifths of Businesses Foresee Severe Problems Maintaining Operations If Significant H1N1 Flu Outbreak," September 9, 2009

Methodology

This poll is part of an on-going series of surveys focused on the public's response to public health emergencies by the Harvard Opinion Research Program (HORP) at Harvard School of Public Health. The study was designed and analyzed by researchers at the Harvard School of Public Health (HSPH). The project director is Robert J. Blendon of the Harvard School of Public Health. The research team also includes Gillian K. SteelFisher, John M. Benson, Mark M. Bekheit and Robin C. Herman of the Harvard School of Public Health, as well as Melissa J. Herrmann of SSRS/ICR, an independent research company. Interviews were conducted via telephone (including both landline and cell phone) for HORP by SSRS/ICR of Media (PA) December 16 through December 17, 2009 among a nationally representative sample of 1,637 respondents age 18 and older, including 428 parents. The sample included 161 Hispanics and 158 African Americans. The margin of error for total respondents is +/-2.9% at the 95% confidence level.

Possible sources of non-sampling error include non-response bias, as well as question wording and ordering effects. Non-response in telephone surveys produces some known biases in survey-derived estimates because participation tends to vary for different subgroups of the population. To compensate for these known biases, sample data are weighted to the most recent Census data available from the Current Population Survey for gender, age, race, education, and region. Other techniques, including random-digit dialing, replicate subsamples, and systematic respondent selection within households, are used to ensure that the sample is representative.

Funding

This poll in the Harvard School of Public Health series is funded under a cooperative agreement with the Centers for Disease Control and Prevention (CDC) and the National Public Health Information Coalition. The award enables HORP to provide technical assistance to the CDC as well as to other national and state government health officials in order to support two critical goals: (1) to better understand the general public's response to public health emergencies, including biological threats and natural disasters; and (2) to improve related public health communications.

Harvard School of Public Health (http://www.hsph.harvard.edu) is dedicated to advancing the public's health through learning, discovery, and communication. More than 400 faculty members are engaged in teaching and training the 1,000-plus student body in a broad spectrum of disciplines crucial to the health and well being of individuals and populations around the world. Programs and projects range from the molecular biology of AIDS vaccines to the epidemiology of cancer; from risk analysis to violence prevention; from maternal and children's health to quality of care measurement; from health care management to international health and human rights. For more information on the school visit: http://www.hsph.harvard.edu