

COVID-19 Vaccine 5-11 Year Old Parent Survey Stratcom & Toronto Public Health

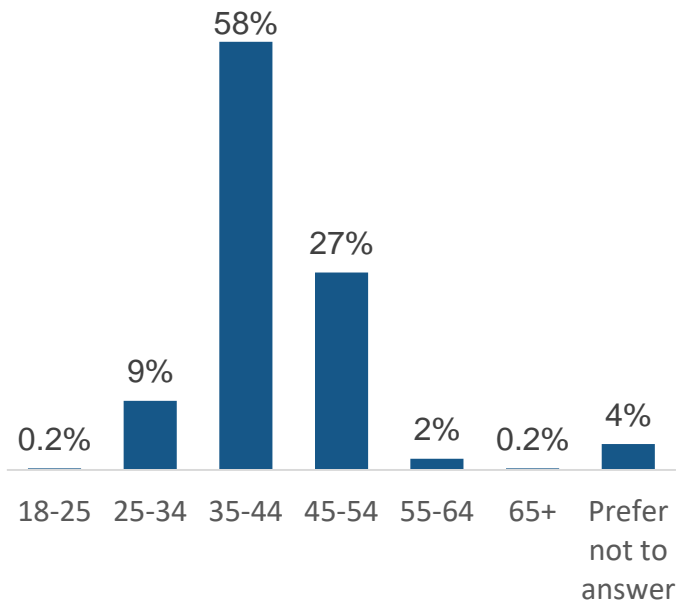
December 2021

- Toronto Public Health engaged Stratcom/Point Blank to conduct a survey for parents/guardians of children between the ages of 5 to 11 years to gain a better understanding of:
 - Parents' intent to vaccinate their children and
 - How/where they would prefer to have their children receive their COVID-19 vaccine
- The survey was administered between **October 28, 2021 and November 7, 2021** via an open online survey link emailed by school boards and schools to parents/guardians.
- No personal information was collected and all responses were confidential.
- The survey was available in 12 languages: Arabic, Bengali, Chinese (Simplified and Traditional), Dari, English, Farsi, French, Portuguese, Russian, Spanish, Urdu, Vietnamese.

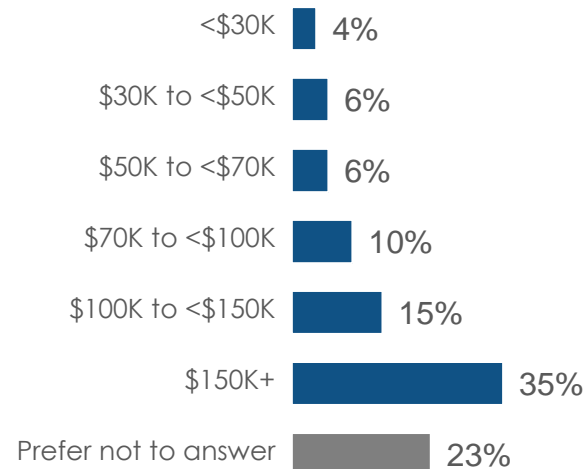
- Of the 52,434 original respondents, 9,459 were removed as they were completed from IP addresses outside the Greater Toronto Area.
- Results were compiled for the over 41,000 people who completed the survey. No quota nor weighting was applied.
- **Limitations:** Respondents to this survey were a sample of convenience, collected via an open link. People who self-identified as White and people who are from higher income households were over-represented among the respondents. Survey results may not be representative of the Toronto population.

Respondent Demographics

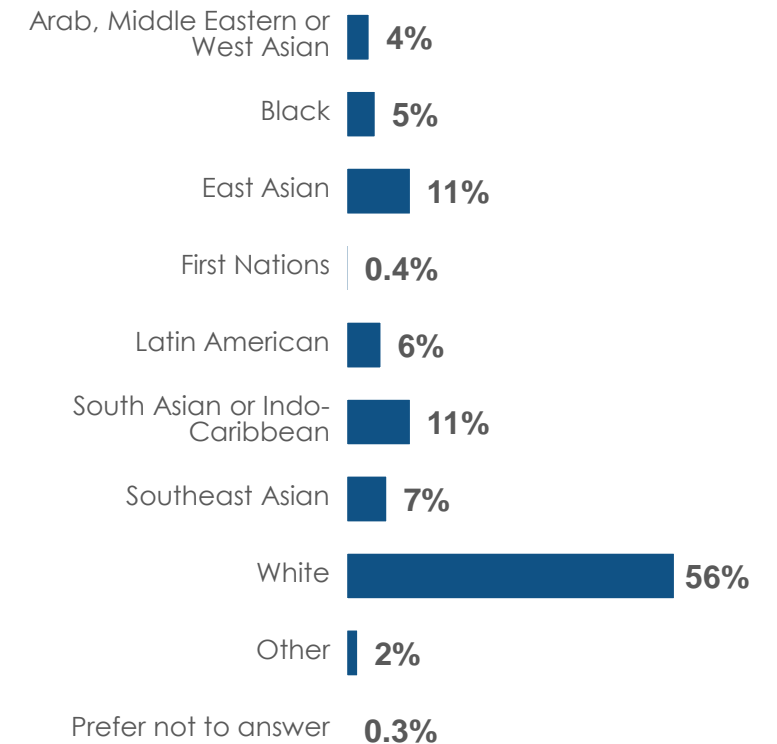
Age



Household Income



Self-identified Racial Group



For socio-demographic data for the City of Toronto (2016 Census data from Statistics Canada, City of Toronto), please visit: <https://www.toronto.ca/ext/sdfa/Neighbourhood%20Profiles/pdf/2016/pdf1/alltoronto.pdf>

- Two-thirds of the respondents were either certain (56%) or somewhat certain (10%) to have their children vaccinated against COVID-19.
- 15% were vaccine hesitant (either somewhat unlikely or unsure/undecided) about having their children vaccinated. Another 19% were opposed to their children being vaccinated.
- For those hesitant or opposed, the top three reasons were:
 - 1) worried about long-term effects of vaccines
 - 2) worried about children experiencing side-effects from vaccines, and
 - 3) think vaccines were developed and approved too quickly.

Key Findings Cont.

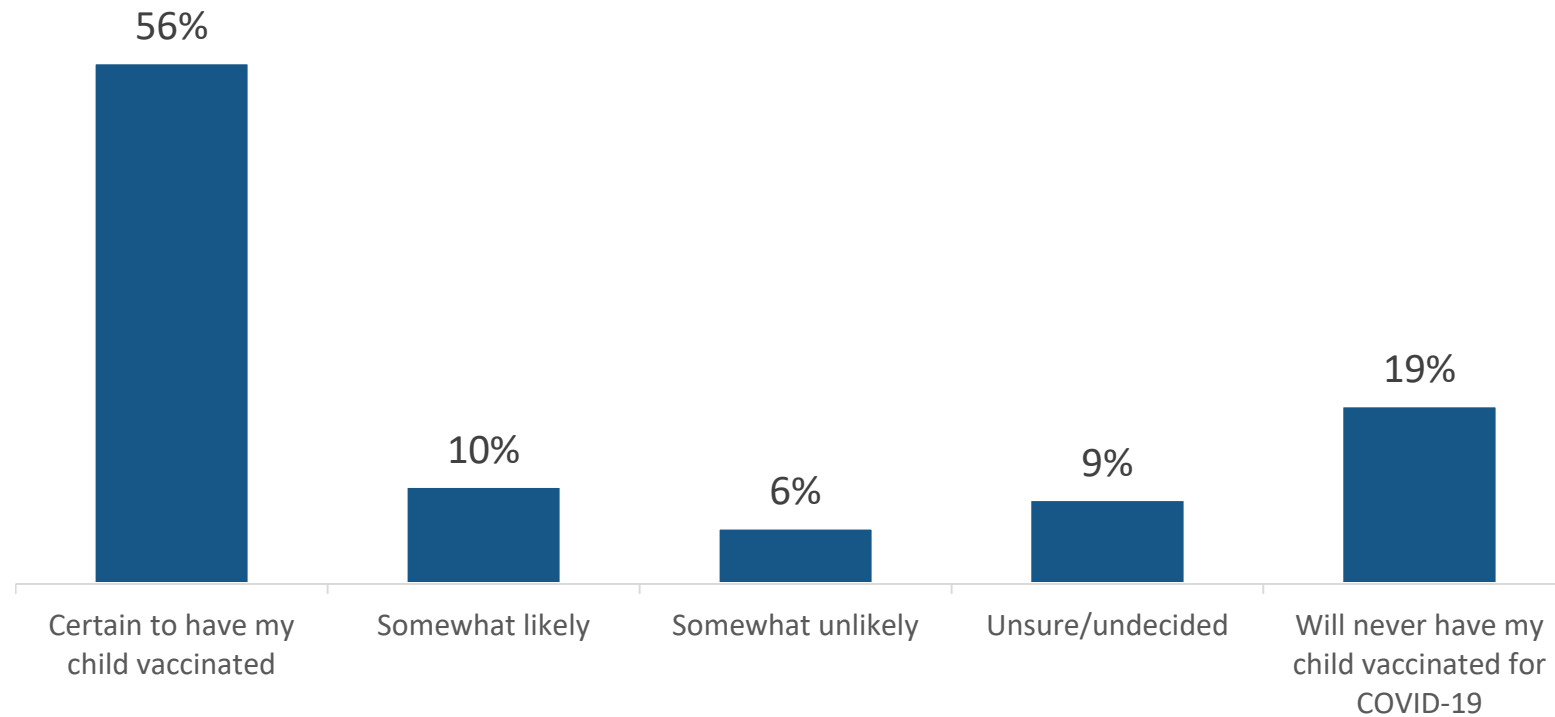
- The vaccination location most often ranked #1 by respondents was family doctor's office followed by child's school (during school hours then after school hours)
- Almost half of respondents did not have a preference for weekday over weekend or a preferred time of day for their child's vaccination (41%).
- Weekday daytime and weekend were similarly supported by 23% and 21% of respondents, respectively.
- A strong majority of respondents are comfortable (62%) with their child being vaccinated with a signed consent form, at their school, by a medical professional and overseen by school staff.



Vaccine Willingness

Parents/guardians vaccine willingness

Parents/guardians vaccine willingness, all respondents, %



Q3. It is expected that COVID-19 vaccines will soon be approved for children between 5 and 11 years of age. Once approved, how likely are you to have your child who is between 5 and 11 years of age vaccinated for COVID-19?

Reason for vaccine hesitancy

	Total Sample (%)	Will not vaccinate (%) (Q4)	Somewhat unlikely to vaccinate (%) (Q5)	Unsure if will vaccinate (%) (Q6)
I am worried about my child experiencing potential negative long-term vaccine effects	73	75	77	67
I am worried about my child experiencing potential vaccine side-effects	68	67	69	70
I think the COVID-19 vaccine was developed and approved for children too quickly	64	68	71	54
I believe that COVID-19 is a lesser risk to my child's health than potential COVID-19 vaccine side effects	45	59	40	21
I don't think my child needs the COVID-19 vaccine	39	52	33	15
I want to wait and see how other children react to the vaccine before my child is vaccinated	30	15	44	53
I don't think the COVID-19 vaccine will work against new variants/mutations of COVID-19	27	35	19	13
I don't think the COVID-19 vaccine will provide immunity for my child	24	35	16	8
I experienced side-effects from the vaccine myself and am worried about the same happening to my child	21	22	21	20
I don't know enough about the COVID-19 vaccine	21	21	21	22
I don't want to have the brand of mRNA vaccine that is being offered to my child	16	23	11	6
I am opposed to vaccinating my child for religious/cultural reasons	12	19	3	2
My child has a fear of needles	10	9	11	13
I am concerned about my child getting COVID-19 from the vaccine	9	10	7	7
None of the above	3	4	2	3

Q4. What reason(s) do you have for not wanting your child to get a COVID-19 vaccine?

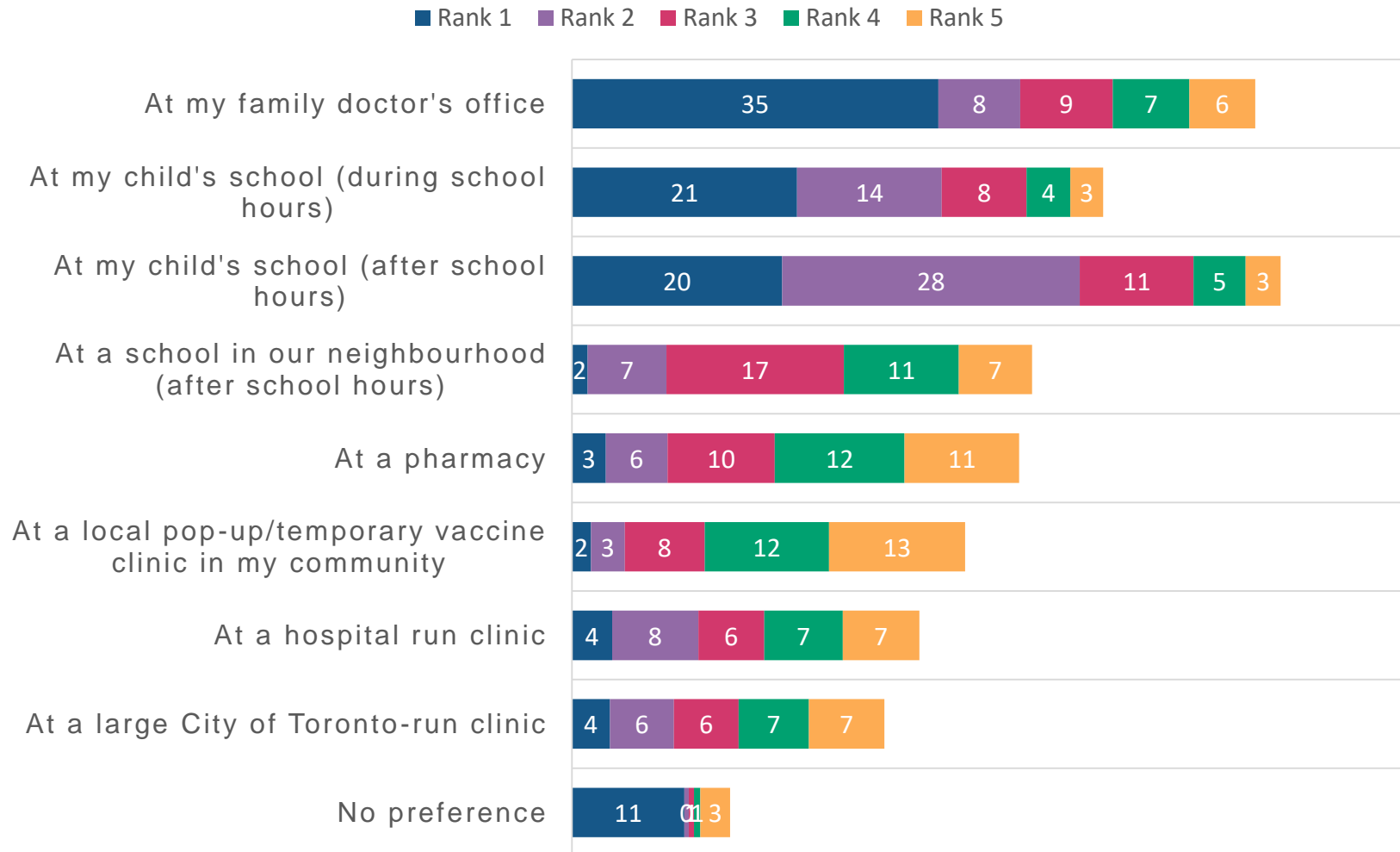
Q5. What reasons do you have for being somewhat unlikely to have your child get a COVID-19 vaccine?

Q6. What reasons do you have for being undecided or unsure about having your child get a COVID-19 vaccine?

Preferred Vaccine Location

Preferred vaccination location

Respondents preferred vaccination location, all respondents, %



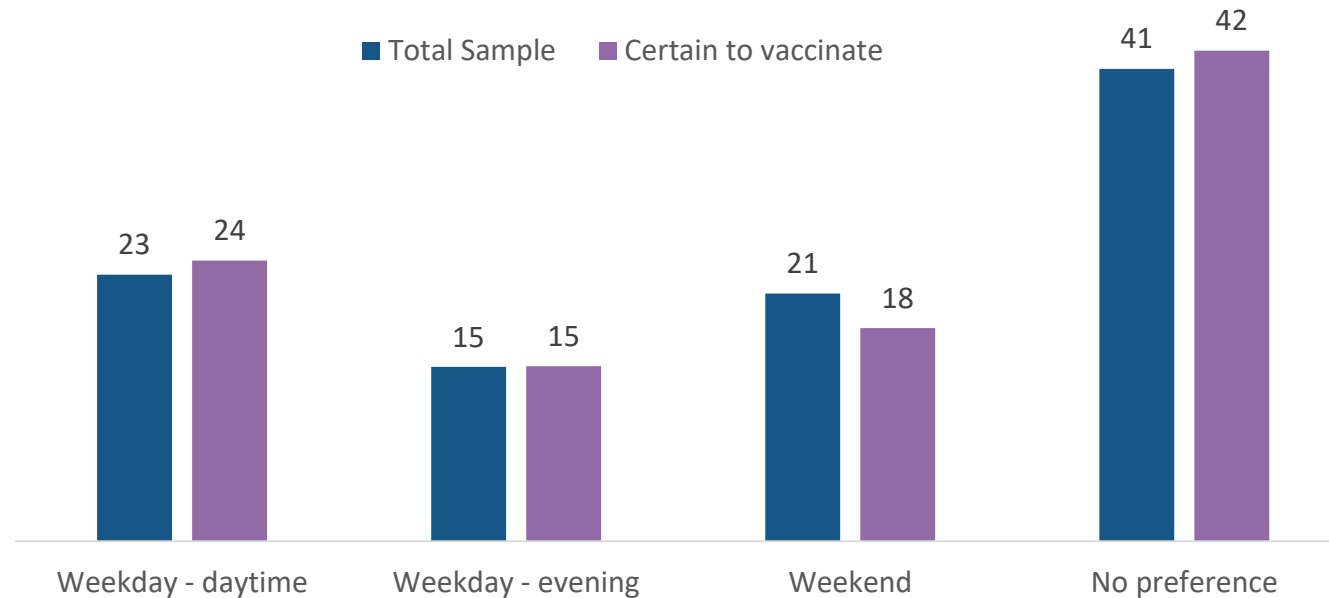
Question: Which of the following settings would you prefer for your child to receive their COVID-19 vaccine once eligible? Please rank your top 5 preferences with #1 being your most preferred.



Preferred time/day

Preferred vaccine time/day

Respondents preferred time to have child receive the vaccine, total sample and certain to vaccinate, %



Q8. Which time/day do you most prefer your child to receive the vaccine?

Preferred Vaccine Site by Day/Time

Respondents preferred time to have child receive the vaccine by day/time, all respondents, %

#1 preferred vax site by day/time	At a large City of Toronto-run clinic	At my child's school (after school hours)	At my child's school (during school hours)	At a school in our neighbourhood (after school hours)	At a local pop-up/temporary vaccine clinic in my community
Weekday - daytime	13%	15%	51%	9%	16%
Weekday -evening	19%	29%	5%	27%	15%
Weekend	34%	21%	5%	30%	39%
No preference	35%	34%	40%	33%	30%

Q8. Which time/day do you most prefer your child to receive the vaccine?

Thank you

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