ISSUE BRIEF
COVID-19 RAPID RESPONSE SURVEY FINDINGS

THE LINK BETWEEN PARENTS’ AND CHILDREN’S VACCINATION IN DETROIT

MARCH 2022
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In February 2022, the Michigan Department of Health and Human Services announced that the Detroit Public Schools Community District would be the first district in Michigan to offer COVID-19 vaccines in schools. According to the State of Michigan COVID-19 vaccine dashboard, rates of vaccination among children in Detroit are low. Per the dashboard, as of mid-February 2022, 24% of Detroit children aged 12-15 were vaccinated, despite vaccines for that age group being authorized in May 2021. Vaccination rates among age-eligible younger children are even lower. Just 7% of kids between the ages of 5 and 11 were vaccinated as of mid-February, four months after vaccines were authorized. Moreover, a recent report suggests that only 4% of Detroit Public School students are vaccinated, 10 times lower than surrounding areas. This report revisits August 2021 DMACS findings on the relationship between parent vaccine hesitancy and children's vaccination status in Detroit and explores the potential of efforts to vaccinate both parents and children to limit the impact and spread of COVID-19.
PARENTS ARE LESS LIKELY TO BE VACCINATED AND ARE MORE HESITANT ABOUT GETTING THE COVID-19 VACCINE

- As of December 2021, just under half (49%) of Detroit parents report that they have been vaccinated against COVID-19, compared to 75% of adults without children.
- Despite their lower vaccination rates in general, parents are significantly more likely to have been vaccinated recently (between June and December 2021). Forty percent of vaccinated parents were vaccinated in the last half of 2021, compared to 12% of adults without children. This suggests efforts to encourage parents to vaccinate may be gaining ground.
- Parents are nearly twice as likely as those without children to report that they are unlikely to receive a vaccine in the next several months (30% of parents are very unlikely to be vaccinated vs. 13% of adults without children).
- Only 2% of parents and 2% of other adults report they are very likely to receive an initial dose of the COVID-19 vaccine in the future. However, 19% of parents and 9% of adults without children report they are uncertain if they will vaccinate in the future, making them potentially receptive to ongoing vaccination initiatives and incentives.

FIGURE 1
ADULTS’ VACCINATION BY PARENTAL STATUS

WHITE PARENTS REPORT THE HIGHEST LEVELS OF VACCINE HESITANCY

- Though White Detroiters are generally more likely to be vaccinated than residents of color, we find no racial/ethnic differences in vaccination rates among parents. Roughly half of all parents, regardless of racial or ethnic identity, report being vaccinated.
- White parents, however, are significantly more hesitant about obtaining an initial dose of the COVID-19 vaccine in the future. Forty-one percent of White parents say they are unlikely to vaccinate against COVID-19, compared to 31% of Black parents and 21% of Latino parents.
Non-White parents express greater uncertainty regarding if they will get vaccinated in the future. More than a quarter of Latino parents (28%) and 19% of Black parents say they are uncertain if they will get a first dose of the vaccine in the future. Just 6% of White parents say they are uncertain if they will vaccinate in the coming months.

UPTAKE OF VACCINES FOR KIDS REMAINS LOW AND MANY PARENTS ARE HESITANT TO HAVE THEIR CHILDREN VACCINATED
• Thirty-nine percent of parents with children aged 12-17 report that their kids have been vaccinated against COVID-19.¹
• Just 4% of parents with children aged 5-11 similarly report their kids have received at least one dose of a COVID-19 vaccine.
• Thirty-eight percent of parents with children between the ages of 12 and 17 say they are uncomfortable getting their child/children vaccinated against COVID-19, while 49% of parents with children aged 5-11 say they are uncomfortable having their kids vaccinated.

UNVACCINATED PARENTS ARE LESS LIKELY TO HAVE THEIR CHILDREN VACCINATED

• Vaccine hesitancy among parents has implications for the likelihood that their children will be vaccinated against COVID-19.
• Among parents of 12-17 year olds, those who have been vaccinated are 22 times as likely to report that their children have also been vaccinated compared to unvaccinated parents. Two-thirds (68%) of parents who have been vaccinated report that their children aged 12-17 have also been vaccinated, compared to only 3% of parents who have not been vaccinated.

• Just 3% of parents feel comfortable getting their 12-17 year old child/children vaccinated in the future while 20% are uncertain.
• By contrast, 12% of parents say they are comfortable getting their 5-11-year-old child/children vaccinated in the future, potentially reflecting the recency of vaccine availability for that age group when the survey was fielded. More than one-third (35%) of parents with 5-11 year olds are uncertain about vaccinating their child.

UNVACCINATED PARENTS ARE LESS LIKELY TO HAVE THEIR CHILDREN VACCINATED

• There is little difference in younger children’s vaccination rates between parents who have and have not been vaccinated, likely because vaccines for 5-11 year olds were only recently available at the time of the survey. However, vaccinated parents are nearly seven times as likely (20%) to say they feel comfortable vaccinating their 5-11 year olds compared to unvaccinated parents (3%).

FIGURE 4

PARENTS’ COMFORT VACCINATING CHILDREN BY PARENT VACCINE STATUS
Parents who have not been vaccinated express more discomfort with the prospect of getting their children vaccinated.

Sixty-six percent of parents who have not been vaccinated are uncomfortable with the idea of getting their 12-17 year olds vaccinated compared to only 14% of parents who have been vaccinated.

**UNVACCINATED PARENTS ARE PRIMARILY CONCERNED ABOUT VACCINE SAFETY AND EFFECTIVENESS**

**FIGURE 5**

**UNVACCINATED PARENTS’ REASONS FOR NOT VACCINATING**

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Side Effects/Safety</td>
<td>86%</td>
</tr>
<tr>
<td>Not Effective</td>
<td>76%</td>
</tr>
<tr>
<td>Low Risk</td>
<td>38%</td>
</tr>
<tr>
<td>Miss Work</td>
<td>34%</td>
</tr>
<tr>
<td>Don’t Get Vaccines</td>
<td>26%</td>
</tr>
<tr>
<td>No Transportation</td>
<td>9%</td>
</tr>
<tr>
<td>No Time</td>
<td>8%</td>
</tr>
<tr>
<td>Can’t Schedule</td>
<td>5%</td>
</tr>
</tbody>
</table>

Among unvaccinated parents, concerns around safety and effectiveness were the most commonly cited reasons for not getting themselves vaccinated. 

Eighty-six percent of parents cited concerns over the safety and potential side effects of the vaccine as contributing to their decision to not be vaccinated.

Three-quarters (76%) of parents similarly cited doubt about the effectiveness of the vaccine as contributing to their decision to not be vaccinated.

Similarly, 67% of parents who have not been vaccinated are uncomfortable with the idea of getting their 5-11 year olds vaccinated compared to 30% of parents who have been vaccinated.

Parents’ reasons for not yet being vaccinated are similar to reasons stated by other adults. However, parents are significantly less likely than other Detroiters to say their decision to avoid the COVID-19 vaccine is because they do not get vaccinated in general.

Parents’ reasons for avoiding vaccination do not appear to vary by racial/ethnic identity. Across all groups, concerns over side effects and safety was the most commonly stated reason for not vaccinating.
Parents—especially those with unvaccinated children—express greater distrust in government’s ability to ensure vaccines are safe

- Parents express significantly lower trust in the federal government’s ability to ensure the COVID-19 vaccine is safe for the public than adults without children.\(^7\)
  - Parents are twice as likely (38%) as adults without children (19%) to say they do not trust the federal government to ensure the COVID-19 vaccine is safe.
  - Roughly two-thirds (63%) of unvaccinated parents say they do not trust the government to ensure the safety of the COVID-19 vaccine.

- Similarly, parents express significantly lower trust in the federal government’s ability to ensure the COVID-19 vaccine is safe for children than adults without children.
  - Nearly half of all parents (45%) say they do not trust the federal government to ensure the COVID-19 vaccine is safe for children, compared to 22% of adults without children.
  - Seventy percent of unvaccinated parents say they do not trust the government to ensure the safety of the COVID-19 vaccine for children.

In response to open-ended questions on reasons for not vaccinating, some unvaccinated parents highlighted their desire to vaccinate at the same time as their children, suggesting the potential of vaccine outreach efforts that target families.

- One respondent said, “I haven’t found a place nearby for my daughter to get [the vaccine] so the only reason I will get it is for her ... if I can still contract and pass it to her then what’s the point... she has asthma ... so until it’s where I can get to it I guess we will wait.”

- Another explained, “I want the entire family to get the same vaccination. At first, I was scared and now the kids are scared to receive the vaccination. I went to my doctor’s office to receive but they ran out of the Pfizer vaccine.”

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**FIGURE 6A**

**Trust in Vaccine Safety for All, by Parental Status**

<table>
<thead>
<tr>
<th>Trust Level</th>
<th>Adults without children</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully Trust</td>
<td>24%</td>
<td>8%</td>
</tr>
<tr>
<td>Mostly Trust</td>
<td>30%</td>
<td>37%</td>
</tr>
<tr>
<td>Somewhat Trust</td>
<td>19%</td>
<td>38%</td>
</tr>
<tr>
<td>Do Not Trust</td>
<td>27%</td>
<td>17%</td>
</tr>
</tbody>
</table>

**FIGURE 6B**

**Trust in Vaccine Safety for Children, by Parental Status**

<table>
<thead>
<tr>
<th>Trust Level</th>
<th>Adults without children</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully Trust</td>
<td>21%</td>
<td>7%</td>
</tr>
<tr>
<td>Mostly Trust</td>
<td>26%</td>
<td>14%</td>
</tr>
<tr>
<td>Somewhat Trust</td>
<td>31%</td>
<td>35%</td>
</tr>
<tr>
<td>Do Not Trust</td>
<td>32%</td>
<td>45%</td>
</tr>
</tbody>
</table>
Parents whose children are vaccinated have higher trust in the government’s ability to ensure the safety of the vaccine than parents whose children remain unvaccinated.

Parents who report their children are vaccinated are four times as likely (16%) to say they fully trust the government to ensure the vaccine is safe for children, compared to just 4% of parents whose children remain unvaccinated.

More than half (51%) of parents with unvaccinated children say they do not trust the government to ensure the vaccine is safe for children.

Parents continue to feel less safe engaging in many social activities due to the pandemic

In keeping with results reported in August 2021, parents continue to report feeling significantly less safe engaging in many social activities during the COVID-19 pandemic than adults without children. Specifically, parents report feeling less safe going grocery shopping, going to the hospital or doctor, visiting with relatives or friends in their home, and working outside the home than other adults.

For example, just two-thirds (66%) of parents feel safe going grocery shopping and 59% feel safe going to the doctor, compared to 82% and 80% of adults without children, respectively.

Unvaccinated parents are the least likely to report that these activities are safe, suggesting that vaccine hesitancy does not reflect doubts about the seriousness of COVID-19 but doubts about the safety of the vaccines.

Figure 7

**Perceptions of Safe Activities by Parent Vaccination Status**

- **Vaccinated adults without children**
- **Unvaccinated adults without children**
- **Vaccinated parents**
- **Unvaccinated parents**

- **Exercising/walking outdoors**
- **Grocery shopping**
- **Going to hospital/doctor**
- **Visiting homes of relatives/friends**
- **Working outside home**

- **90%**
- **86%**
- **90%**
- **77%**
- **83%**
- **83%**
- **81%**
- **87%**
- **74%**
- **59%**
- **67%**
- **52%**
- **80%**
- **79%**
- **80%**
- **76%**
- **74%**
- **68%**
- **59%**
DMACS’ estimates of COVID-19 vaccine coverage rates for adults in Detroit are higher than those published on the Michigan COVID-19 Vaccine Dashboard, which draws data from the Michigan Care Improvement Registry (MCIR). For Detroit adults ages 20 and over, DMACS estimated that the vaccine initiation rate (the percentage of adults receiving at least one dose of any vaccine) was 67% compared to 53% in the MCIR dashboard data (as of Dec 15, 2021). DMACS estimated the completion rate (the percentage of adults who received the full vaccine course, two doses of a Moderna or Pfizer vaccine or one dose of a J&J vaccine) was 52% compared to 35% in the MCIR dashboard data. Prior DMACS reports on vaccination offer a full discussion of potential reasons for these discrepancies, including the possibility that unvaccinated residents may be less likely to respond to surveys. Supplemental analysis examining response rates among DMACS respondents who reported their vaccination status in our June-July 2021 survey shows that unvaccinated respondents were slightly less likely (87%) than vaccinated respondents (91%) to respond to this November-December 2021 survey.
ENDNOTES

1 Throughout this report, we use the term “parents” to mean an adult respondent who indicated they live in a household with one or more children under the age of 18 for whom they are the custodial parent—the parent who has primary care, custody and responsibility for the child. In past surveys, we did not distinguish between adults living in households with children and custodial parents. For this reason, readers should take caution when comparing results across DMACS survey waves.

2 This analysis is based on parents who responded to both the June-July (Wave 13) and November-December (Wave 14) 2021 DMACS surveys. Eighty-seven percent of Wave 14 respondents, and 87% of parents, participated in both waves.

3 The original survey item that forms the basis of these data asked respondents who indicated they had not been vaccinated “How likely are you to get a COVID-19 vaccine in the next several months?” Responses were captured on a 7 point scale that ranged from 1 (not at all likely) to 7 (very likely). For ease of interpretation, this scale was collapsed into categories capturing who is very likely, uncertain, or very unlikely to be vaccinated in the future, using the following definitions:

- “Very Likely” refers to respondents who reported their likelihood of getting the vaccine as a 7.
- “Uncertain” refers to respondents who rated their likelihood of getting the vaccine within the range of 2-6.
- “Very Unlikely” refers to respondents who rated their likelihood of getting the vaccine as a 1.

Our August 2021 report collapsed responses into slightly different categories and thus readers should be careful in comparing across reports.

4 This report uses the following ethnoracial categories: “Latino” refers to any respondent who identifies as being of “Hispanic, Latino, or Spanish origin.” “White” and “Black” refer to respondents who selected only those respective categories (and no other ethnoracial categories) and who do not identify as Latino. Respondents who identified using other ethnoracial categories, who did not identify with any of the ethnoracial categories, or who identified using multiple ethnoracial categories were coded as “Other” and are omitted in this report. Within the weighted sample, 11% of respondents identify as White, 77% identify as Black, 8% identify as Latino, and 4% identify as other race.

5 DMACS is a representative survey of adult residents of Detroit and is not sampled or weighted to be representative of the population of children. Respondents must be at least 18 years old to complete a survey. Thus, data on children’s COVID-19 vaccination status is based on parental reports. Additionally, parents may have one or more children in a given age range (e.g. two children between the ages of 12-17) and/or one or more children across age groups (e.g. one child between the ages of 5-11 and one child between the ages of 12-17). Multiple children in a household may have the same vaccination status or different vaccination statuses. Questions about children’s vaccination status were worded as (1) “Has your child/children ages 12-17 already been vaccinated against COVID-19?” (2) “For your child/children ages 12-17, how comfortable are you getting your child/children vaccinated against COVID-19 in the future?” (3) “Has your child/children ages 5-11 already been vaccinated against COVID-19?” (4) “For your child/children ages 5-11, how comfortable are you getting your child/children vaccinated against COVID-19 in the future?” Thus, our data may obscure cases where vaccination status differs among children within a household and should be interpreted with caution.

6 Respondents who reported that they had not yet been vaccinated were asked which, if any, of eight possible reasons were reasons they had not been vaccinated. Respondents could select multiple reasons from the list, thus reasons should not be viewed as mutually exclusive. Respondents were also asked in an open ended question to explain the main reason they had not been vaccinated.

7 These questions were worded as follows: (1) How much do you trust the federal government to ensure the COVID-19 vaccine is safe for the public? (2) How much do you trust the federal government to ensure a COVID-19 vaccine is safe for children? (boldface used on questionnaire). Respondents were given the following options for both questions: “fully trust,” “mostly trust,” “somewhat trust,” and “do not trust.”

8 Respondents were asked to rate the safety of each of the following activities: (1) grocery shopping; (2) attending gatherings of more than 10 people; (3) going to the hospital or doctor; (4) dining in at restaurants; (5) visiting with relatives or friends in their home; (6) playing on playground equipment; (7) going outside to walk, hike, or exercise; (8) working outside the home; (9) going to events (like sporting events and concerts); (10) exercising in gyms and studios. Respondents rated these activities as “very unsafe,” “somewhat unsafe,” “somewhat safe,” or “very safe.” We report results for people who responded that the activity was “very safe” or “somewhat safe.” Only statistically significant differences are included in this report.
FOR MORE INFORMATION

Please contact Sharon Sand, DMACS project manager, at slsand@umich.edu.

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