

Received: 11 November 2022 Accepted: 28 March, 2023

DOI: <https://doi.org/10.33182/rr.v8i4.124>

Attitudes of adult community toward Covid-19 vaccination

Zainab Abdal-kadham Towar¹, Fatima Wanas Khudair²

Abstract

Background: For SARS-CoV-2 control, acceptance of COVID-19 vaccines is crucial. Acceptance of the vaccine is influenced by vaccine knowledge and attitudes. It is necessary to comprehend this to develop vaccination plans against the virus: The aim of this study to assess the level of COVID-19 knowledge among adult community and to examine the difference between men and women attitudes towards coronavirus vaccine. Methods: Descriptive design (survey study) is conducted in this study and (nonprobability convenience sampling technique) is used for collecting data. Total samples of (349) adult person has been taken in (150) participants were taken from Al-Dinaniyah Teaching Hospital, (75) participants were taken from Public Health Center, (45) participants were taken from Orouba Preparatory School and (80) participants were taken from Al-Qadisiyah University the current study. The samples are assessed attitudes adult community towards the COVID-19 Vaccination through a questionnaire. : The results of the current study have concluded that most of the adult community have negative attitudes about the vaccination against Covid-19.

Keywords: Attitudes, Adult community, COVID-19 Vaccination.

Introduction

Morbidity, mortality, and economic hardship have risen considerably due to the universal spread of SARS-CoV-2. Global preventive measures have been undertaken including social separation, quarantine, frequent hand washing, and wearing a face mask in, public places. Despite this, the COVID-19-related hospitalizations and viral transmission have not completely ended 1. One of the best methods for preventing communicable diseases is vaccination. Immunization is crucial for eradicating COVID-19 when combined with other control measures (Duong MC et al.,2023). People must be immunized at high rates for sufficient protection; hence, it is important to determine effective methods for increasing COVID-19 vaccination uptake 2.

Immunization programs have significantly reduced morbidity and mortality worldwide, Studies have shown that 2.5 million lives around the world are saved by vaccination against tuberculosis, poliomyelitis, diphtheria, tetanus and measles every year 3.

¹ M.Sc. Student, community Health Nursing, Faculty of Nursing, University of Kufa, Iraq,

Email: zainaba.abdalkadham@student.uokufa.edu.iq

² Prof.Ph.D. community Health Nursing, Faculty of Nursing, University of Kufa, Iraq,

Email: fatimahasnawy@gmail.com

There is an urgent need to produce safe and effective vaccine to immunize as large as possible number of population to protect the entire global society from the serious of morbidity and mortality from severe corona virus 4.

Vaccinations numerous research revealed that vaccine hesitancy was more prevalent in women, younger age groups, and people with lower levels of education, making vaccinations the most crucial public health strategy for halting the spread and harm caused by deadly diseases and sequelae. 5 .

Vaccinations become the most important public health intervention for reducing the spread and harm caused by dangerous diseases and complications, many studies showed that vaccine hesitancy was higher in women, younger age groups and those with lower education levels 6 .

The severity of COVID-19 becomes apparent in older adults who have chronic illnesses like hypertension, diabetes mellitus, chronic respiratory conditions, and other health issues that have a detrimental impact on immunity and cause complications. Additionally, virus mutilations lead to misunderstanding in infection care, which raises complications and fatality rates 7 .

Vaccine hesitancy is a long-standing problem that poses a severe threat to global health, as seen by the return of infectious diseases such as measles and pertussis 12 .The rapid development of effective and safe COVID-19 vaccines was remarkable. Nonetheless, vaccination reluctance for COVID-19 could be a significant barrier to global efforts to contain the pandemic and limit its health and socioeconomic consequences. Previous work has indicated that the Middle East has one of the lowest COVID-19 vaccine acceptance rates 13 . Low vaccination rates have been attributed to conspiracy views, which has resulted in a negative attitude toward immunization 9 .

The rise in cases encouraged experts to adopt various treatment protocols, though with limited success. More convenient and efficient measures to halt or possibly end COVID-19 pandemic were therefore sought, particularly development of a vaccine 10 . Vaccines have been the cornerstone in controlling and preventing several infectious epidemic diseases 14 . Thus, huge efforts by global pharmaceutical companies were directed towards creating efficient and safe vaccines to address the COVID-19 pandemic 15 .

MATERIALS AND METHODS

Design of the Study: Descriptive design (survey study) has been conducted in the current study. It has adults community the private attitudes toward COVID-19 vaccination in Al-Diwaniyah City starting between 10 th August to 2023.

Sample and Sampling of the Study: Non probabilitya sampling technique (Convenience) samples of (349) adult person has been taken in (150) participants were taken from Al-Diwaniyah Teaching Hospital , (75)) participants were taken from Public Health Center , (45) participants were taken from Orouba Preparatory School and (80) participants were taken from Al-Qadisiyah University the current s[study.

Ethical Consideration: Participants have received information about the study and its objectives, and their consent to be volunteers has been taken with consideration of confidentiality. Permission for conducting this study has been obtained from the ethical committee in Faculty of medicine, this is one of the most basic principles before gathering the data, to protect the participants values and dignity .

The Study Instrument and Data Collection : To achieve the aims of the study, Instrument was developed after reviewing the relevant studies that concerning with attitudes toward COVID-19 vaccination , and this questionnaire has two parts, which are explained in the following Questionnaire,The Questionnaire consists of two parts :Part 1: Demographic Data This part is concerned with participants socio- demographic data. A demographic data sheet, that consists of (7) items, which contain (age, marital status, educational level, monthly income, residency, gender , occupation) .Part II: Attitudes Toward COVID-19 : This part is concerned with the collection of general information about COVID-19 vaccination , consist of 35 items including attitudes adult community towards the COVID-19 vaccination (Al-Sanafi at el.,2021) .

Statistical Analyses: Descriptive statistics: (Frequency and percentage tables; mean and standard deviation). Inferential Statistics: (Chi-square test to retest).

STUDY RESULTS

Table (1) Descriptive Statistic Study Sample Demographic Data (n=349)

Items	Sub-groups	Frequency	Percentage
Age / years	18-25	179	51.3
	26 – 33	79	22.6
	34 – 41	29	8.3
	42 – 49	31	8.9
	50+	31	8.9
	Total		349
Gender	Male	123	35.2
	Female	226	64.8
	Total	349	100.0
Marital status	Married	158	45.3
	Single	158	45.3
	Widowed	11	3.2
	Divorced	6	1.7
	Separated	16	4.6
	Total		349
Monthly income	Less than 300000	79	22.6
	600000-300000	159	45.6
	601000-900000	64	18.3

	1200000- 901000	7	2.0
	1500000- 1200000	10	2.9
	1501000 and more	30	8.6
	Total	349	100.0
Residence	Urban	203	58.2
	Rural	146	41.8
	Total	349	100.0
Levels of education	Unable to read and write	63	18.1
	Read and write	37	10.6
	Elementary school graduate	32	9.2
	Middle school graduated	77	22.1
	High school graduate	62	17.8
	Diploma	41	11.7
	Bachelor degree and above	37	10.6
	Total	349	100.0
Occupation	Governmental employee	68	19.5
	Unemployed	103	29.5
	Housewife	44	12.6
	Retired	6	1.7
	Student	128	36.7
	Total	349	100.0

Table (1) shows the demographic data among the sample of the study. Regarding age; the majority of the study sample (51.3%) is within the (18-25) age range, the proportion decreases as age increases, with the (50+) age group accounting for (8.9%) of the total. Concerning gender; predominantly of the study sample (64.8%) are female. On the other hand, the highest proportion of respondents (45.3%) are both single and married. In regard to monthly income; the largest group (45.6%) with a monthly income of (600000-300000). Regarding Residence, The majority of respondents (58.2%) reside in urban areas, while 41.8% live in rural areas. According to the results of the above table, a significant proportion (22.1%) of the respondents were Middle school graduated, while XAbout (17.8%) have High school graduate. Finally, the largest occupational group of students (36.7%), followed by the unemployed group (29.5%).

Table (2) Overall Assessment of Adult Community Attitudes toward covid-19 Vaccination

Level of adult community' Attitudes	Freq.	%	M	S. D	Assessment
Negative	320	91.7	2.55	.420	Negative
Positive	29	8.3			

Total	349	100.0
-------	-----	-------

Scale used as negative (≤ 3.00), Positive ($3.01+$) S. D= standard deviation, M= mean. F: Frequency, %: Percentage

Table (2) reveals that the majority of Attitudes of the adult community toward covid-19 vaccination (91.7%) are negative attitudes.

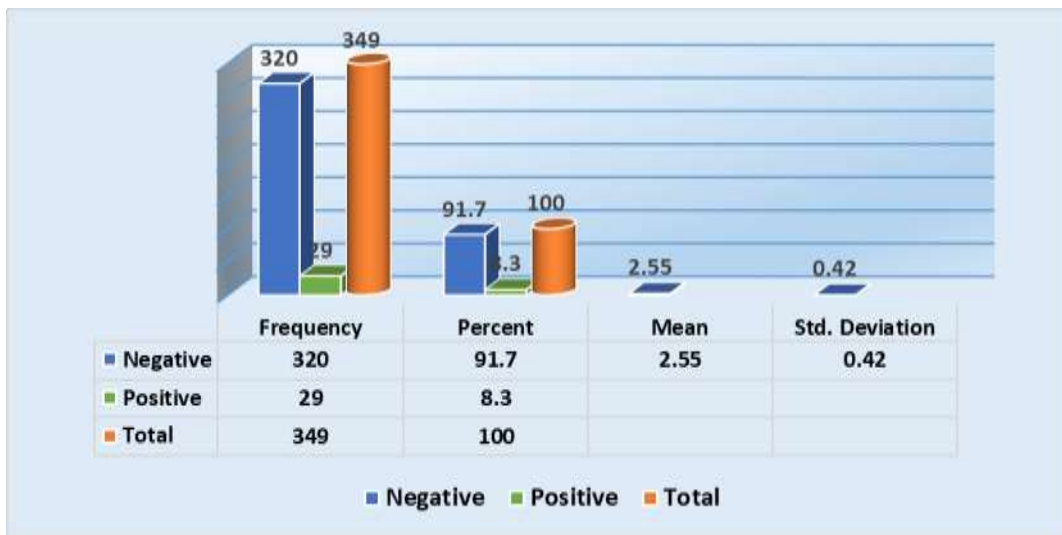


Figure 4.1: Overall Attitudes of adult community toward covid-19 vaccination.

DISCUSSION

Throughout the course of the data analysis of the current research, the results display that the highest percentage of the age of the subgroups of adult community are: adult with ages (18-25) years old with (51.3%). Because the places where the sample was collected, most of them are students, so their ages range between (18-25). This result agrees with the previous study that was performed by 11, Regarding the gender, the results of study reveals that the female adult community percentage was (64.8%) while male adult community' percentage was (35.2%) because most of the sample were women and always have views and share to know more details about the COVID-19 vaccination, which is more in women. This result agrees with the previous study that was conducted by 12, regarding to residence, the current study found that the percentage of study sample who live in urban areas was about (58.2%). Perhaps as a result of the high population density in urban areas and the migration of people from rural areas to towns, this image of Iraqi society is more plausible. This result is consistent with the previous study conducted by 9, Regarding the marital status, adult who are married were (45.3%). This finding maybe since the age are participants matched with marriage, and this age is considered as suitable in our culture for

marriage. This result agrees with 8 , Regarding the level of education, adult community are show Middle school graduated were (22.1%) , this result is agreement with the result of 7 , In this study, the monthly income shows that the adult community with roughly (600000-300000) monthly income recorded (45.6%). This result is agreement with the result of 6 .the table (1-2) The result of this table about attitudes of study sample reveals that the majority (91.7%) of them have negative level of attitude about vaccination and it use, this result doesn't support by studies because the study about vaccination of COVID under investigation at this time therefore the researcher interpretation of this result from the point of view, the most individuals do not trust in vaccine and its uses because many of the following reasons, including the speed of its production, and also the presence of more than one type of vaccine and more than one company that production of it, so doesn't take a long time of it use therefore they have negative attitudes.

Conclusion

Generally , the results of the current study have concluded that most of the adult community have negative attitudes about the vaccination against Covid-19.

References

1. Duong, M. C., Duong, Nguyen et al., Knowledge about COVID-19 vaccine and vaccination in Vietnam: A population survey. *Journal of the American Pharmacists Association*, (2022). 62(4), 1197-1205.
2. Alalmaei Asiri, W. M., Shati, A. A Mahmood., et al., . Community Perception and Attitude towards COVID-19 Vaccination for Children in Saudi Arabia. *Vaccines*, (2023). 11(2), 250.
3. Valero-Martínez, C., Martínez-Rivera, Fukuda et al., Attitudes toward COVID-19 Vaccine Uptake: A Qualitative Study of Mostly Immigrant Racial/Ethnic Minority Older Adults. *Geriatrics*, (2023). 8(1), 17..
4. Mrdan,K.A., Khudhair,F.W : Perception of parents toward routine immunization for their children in AL-Najaf province. *Global Scientific Journal*.(2021),9(1), 2320- 9186.
5. Salama, A. A., Khamis, Salah et al., . Two years after COVID 19 pandemic: Evaluation of knowledge, attitudes and practices among a sample of Egyptian adults-a web-based questionnaire. *Canadian Journal of Clinical Nutrition*, (2023). 11(1), 58-75.
6. Yohannes, S., Alemayehu, A., Woldesenbet, et al., . COVID-19 vaccine hesitancy among adults in Hawassa City Administration, Sidama Region, Ethiopia: A community-based study. *Frontiers in Public Health*, (2023). 11, 1122418.
7. Muluneh, M. D., Negash,Tsegaye et al., . COVID-19 Knowledge, Attitudes, and Vaccine Hesitancy in Ethiopia: A Community-Based Cross-Sectional Study. *Vaccines*, (2023). 11(4), 774.
8. Hasan, A., Hummadi, S. Assessment of COVID 19 Post-Vaccine Side Effects among People Attending Al-Sheikh Zayed Hospital in Baghdad. *Kufa Journal for Nursing Sciences*, (2022). 12(1).
9. Muhammed, R., Kadhim, M. H., Kadhim, et al., . Nurses' perception of using Dexamethasone (Decadron) For COVID-19 patients: Based on PCS Model. *Kufa Journal*

- for Nursing Sciences, (2022). 12(1).
10. CDC. Certain Medical Conditions and Risk for Severe COVID-19 Illness. CDC. Available from: <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>. Accessed January 10, 2022. [Google Scholar]
 11. Karim SK, Taha PH, Amin NMM, Ahmed HS, Yousif MK, Hallumy AM. COVID-19-related anxiety disorder in Iraq during the pandemic: an online cross-sectional study. *Middle East Curr Psychiatry*. 2020;27(1):1–9. doi:10.1186/s43045-020-00067-4 [Crossref], [Google Scholar]
 12. Lami F, Rashak HA, Khaleel HA, et al. Iraq experience in handling the COVID-19 pandemic: implications of public health challenges and lessons learned for future epidemic preparedness planning. *J Public Health (Bangkok)*. 2021;43(Supplement_3):iii19–iii28. doi:10.1093/pubmed/fdab369 [Crossref], [Web of Science ®], [Google Scholar]
 13. Harrison EA, Wu JW. Vaccine confidence in the time of COVID-19. *Eur J Epidemiol*. 2020;35(4):325–330. doi:10.1007/s10654-020-00634-3 [Crossref], [PubMed], [Web of Science ®], [Google Scholar]
 14. Al-Tammemi AB, Tarhini Z, Akour A. A swaying between successive pandemic waves and pandemic fatigue: where does Jordan stand? *Ann Med Surg*. 2021;65:102298. doi:10.1016/J.AMSU.2021.102298 [Crossref], [PubMed], [Web of Science ®], [Google Scholar]
 15. Klugar M, Riad A, Mekhemar M, et al. Side Effects of mRNA-based and viral vector-based COVID-19 vaccines among German Healthcare Workers. *Biol*. 2021;10(8):752. doi:10.3390/BIOLOGY10080752 [Crossref], [PubMed], [Web of Science ®], [Google Scholar]