VACCINATING CHILDREN AGAINST SARS-COV-2

Vaccinating children against SARS-CoV-2: maximise uptake among adults while prioritising the most vulnerable

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Lavine and colleagues call for a much needed reconsideration of the push to vaccinate children against SARS-CoV-2.¹ In my (highly privileged) social circle in Toronto, most 12 year olds have already had their first vaccine. Meanwhile, the number of fully vaccinated Canadian adults, including those at risk, remains low.

To spell out the concerns with vaccinating children against SARS-CoV-2:

- The risk of severe sequelae from covid-19 to children is very low, making it hard to justify exposing them to any vaccine related risks
- The risk of transmission from children is also low. Even if we were to assume that vaccines prevent transmission from children to adults, we cannot rely on children being vaccinated instead of putting the onus on adults to get vaccinated
- In Canada, most at-risk adults have only received their first dose of vaccine, with their second dose being scheduled four months later because of limited supply. It would make more sense to give vulnerable adults their second doses rather than vaccinating children
- Globally, it is hard to accept what is happening in India—a major vaccine exporter sending their vaccines to privileged 12 year olds while they experience a calamity.

There may be circumstances where vaccinating children would be desirable—for example, those with medical conditions that put them at particular risk from severe covid-19.

In our eagerness to emerge from this pandemic, it is imperative that we remain level headed. Children have already paid a high price during lockdown, including school closures. Vaccinating them against SARS-CoV-2 is a strategy with questionable benefits and unnecessary risks; rather, the focus should be on maximising vaccine uptake among adults, while prioritising the most vulnerable.

Finally, we need to think beyond political borders in order to tackle this pandemic effectively and ethically.

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