2020 will be remembered as the year in which the COVID-19 pandemic emerged, with its immense effects on humanity, quality of life and economy worldwide. 2020 ended with a glimmer of hope with the FDA approval of a COVID-19 vaccine for use in adults aged 16 years and older. The vaccination campaign was a success: in countries with high rates of vaccination, the number of new infections declined rapidly despite the alleviation of lockdown restrictions. However, activities of unvaccinated population (mainly teenagers and children), both in school and outside, still need to be limited. Epidemiological data show that the younger the child, the less susceptible to COVID-19, and the less likely to transmit the disease. Children tend to develop an asymptomatic disease and present a more favorable outcome than adults. Nevertheless, recent emergence of new COVID-19 variants increases the risk that children will develop a more severe disease and will be more likely to transmit the disease [1], [2], [3].

Increasing the vaccination rate should help achieving herd immunity and the recovery of global economy. In May 2021, the FDA and the Committee for Medicinal Products for Human Use (CHMP) approved the use of the COVID-19 vaccine for teenagers aged 12 years and older. In light of the emergence of new COVID-19 variants, and in an attempt to control the pandemic, some countries consider extending the vaccine population to include children aged 12 to 16 years. In order to employ such a strategy it is important to understand the parents’ hesitancy regarding the vaccination of their children, since parents are usually the decision makers.

In Israel, the vaccination campaign began in mid December 2020, and by June 3rd, 2021, 59.35% of the population were fully vaccinated. On January 17th, 2021, the highest 7-day moving average of new infections per day was measured, 8624. With time, and as the vaccination rate increased, this number gradually declined and reached 15 new cases per day in the beginning of June 2021. However, due to the emergence of the delta variant, the weekly average of new cases increased to 450 in the beginning of July.

Based on an Israeli nationwide observational study, vaccine effectiveness against symptomatic SARS-CoV-2 infection, COVID-19-related hospitalization, and COVID-19-related death exceeded 96% across all age groups. The study found a positive correlation between vaccination rate and age: for ages 70 years and older vaccination rate exceeds 95%; for 50-70 years it is ~90%; and for 20-40 years ~80%. Vaccination rate in Israel for the first vaccine reached a plateau over the previous two months, increasing only by 2.3%, from 60.7% on April 1st, 2021, to 63% on June 1st, 2021 [4], [5], [6]. This phenomenon was observed in other countries as well and is likely caused by vaccine hesitancy, defined by the World Health Organization (WHO) as a delay in acceptance or refusal of vaccination despite the availability of vaccination services [7]. The causes of vaccine hesitancy vary by country and are vaccine-specific, indicating a need to strengthen the capacity of national programs to identify local causal factors and to develop appropriate strategies [8], [9].