

## **COVID-19 vaccine hesitancy in KZN's chronic haemodialysis patients receiving private in-centre chronic haemodialysis**

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### **Abstract**

**Introduction:** Vaccine hesitancy (VH) is a critical concern in the fight against COVID-19, especially among high-risk populations like chronic haemodialysis patients. This study aimed to uncover the dynamics of VH among this unique group and to examine the role of demographics in shaping their attitudes toward vaccination.

**Methods:** The study was conducted in KwaZulu-Natal, South Africa, well after the COVID-19 vaccine rollout, ensuring that the findings reflect a post-rollout context free from initial vaccine disputes. The sample consisted of 128 participants from different haemodialysis units managed by National Renal Care.

**Results:** Demographics such as age, gender, race, and level of education were hypothesized as predictors of VH. However, the analysis revealed that none of these factors had a statistically significant association with hesitancy. Moreover, the study found a notable VH rate of 43.8%, emphasizing the extent of this concern within the patient cohort. The survey further delved into the reasons behind hesitancy, with the primary information source for hesitant patients being the news, followed closely by dialysis staff and social media. Concerns about vaccine safety and efficacy emerged as key factors influencing hesitancy. Intriguingly, the study identified a significant association between self-perceived increased risk of contracting COVID-19 due to kidney failure and vaccine hesitancy. A noteworthy 75% of vaccine-hesitant participants considered themselves at elevated risk. This association was statistically significant ( $p$ -value = 0.021), highlighting the importance of perceived risk in vaccine-related decisions.

**Conclusion:** In conclusion, this research provides valuable insights into VH among chronic haemodialysis patients, with a focus on the impact of demographics. While demographic factors did not prove to be significant predictors of hesitancy, the perceived risk played a vital role. To address VH among this population, tailored educational interventions and patient engagement strategies must consider these findings.