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Balancing act: Parental choice vs children's health rights

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EDITORIAL

The issue of children's rights and parental autonomy in accessing health care has long been debated. Parents, as the child's primary caregiver, strongly influence decisions affecting their children's health, particularly medical ones. They become legal guardians and make decisions for minor children.¹ It should be noted that these decisions must be made with the child's best interests in mind. Many factors will influence parent's decision, each unique to the situation.

Consider preventable conditions, such as administering vaccines to infants and children. In this situation, parental knowledge, trust, perceived vaccine risk, belief in the need for vaccines, the relationship between parents and healthcare providers, and social vaccination norms all play a role in decision-making.²⁻⁴ A parent's decision to not vaccinate their child can have serious consequences for both the child and the community. In March 2023, a two-year-old child in West Java, Indonesia, was diagnosed with acute flaccid paralysis (AFP) caused by circulating vaccine-derived poliovirus type 2 (cVDPV). The child had not received any polio vaccines, including oral poliovirus vaccine (OPV) and inactivated poliovirus vaccine (IPV). Children under five who live in these areas must receive two additional doses of OPV, regardless of vaccination status.⁵ In this context, it appears that parental autonomy harms not only the child's health, but also the children who live nearby.

In other contexts, it is common to hear of cases of children who were not in an emergency but were taken to the emergency room (ER). Approximately 40% of pediatric patients' ER visits are not appropriate for their condition.⁶ This situation is motivated by various reasons. First, parents believe that they can reduce the severity of their child's illness, typically caused by negative or traumatic previous experiences. Second, they may receive advice from family or other health professionals. Third, the principle of practicality and speed. Children who are taken to the ER can be treated immediately, and parents can attend to other tasks. Fourth, parents feel more satisfied coming to the ER because the examination facilities are more adequate, both in terms of equipment and expertise, compared to primary care.⁷ Fifth, parents believe that their child's condition is an emergency.⁸ In this situation, parents adopt the principle that it is better to be cautious than to have something bad happen to their child.

The two contexts above demonstrate the importance of parents' knowledge about their children's health. With modern technology, parents can easily obtain information from a variety of sources. Most parents get information about their child's condition from online sources.⁹ Google is the most frequently visited website,¹⁰ but other media such as YouTube, Instagram, TikTok, and other social media platforms are also viable sources of information.

The author examines search trends for the term "child's fever" in Indonesian on the Google Trends website in July 2024. This website displays the search trends for keywords searched by the public via Google. The search location is limited to Indonesia, and the search period is July 2023 to June 2024. The results show that searches for this keyword range from 50 to 100, indicating that searches for children's fever are extremely popular or frequently searched throughout the year. The public's interest in children's

fever is followed by a variety of other searches, including "good fever-reducing medicine at the pharmacy", "first aid for dengue fever in children", and "already taking paracetamol but the child's fever doesn't go down". "Typhus", "kangaroo care", and "hand, foot, and mouth disease" were among the related topics that emerged. Fever-related searches continued, as did curiosity about therapies and diseases associated with these symptoms.

Searches using these keywords are then performed on the Google search engine. Four of the top ten websites discussing children's fever are doctor education websites, two are hospital websites, one is the Ministry of Health website, one is the Indonesian pediatrician organization website, one is the village website, and one is a hygiene product company website. Most of the content focuses on how to treat fever in children, while the remainder discusses fever in general. The dominance of information in the context of searching for this keyword is already on the right track; however, this does not guarantee that other health-related keywords will yield the same quality of information. Several factors must be considered, such as the importance of filtering the information gathered. The massive amount of information provided by online media increases parents' anxiety⁹ and leads to rash decisions.

To avoid misinformation, particularly in the context of children's health, parents should consider the source and context of the information when selecting the information to be used. Ensure the source is credible, such as reputable health organizations like World Health Organization (WHO), the Ministry of Health, or medical associations. The author's background should also be considered, such as whether he/ she has health qualifications or are competent to discuss the disease or symptoms under discussion. Given the dynamic and rapid development of health science, it is critical to ensure that parents receive up to date information and pay attention to when the health articles are written. In terms of information content, parents should be concerned if there is bombastic information. They should check the facts from reputable organizations or research on the subject. Always double-check the supporting evidence listed to ensure that it is relevant to what is being written. Parents may be advised to join a specific health community or consult a doctor directly. Many platforms now allow for online consultations with doctors, so distance and time are no longer major barriers.

Parental decisions have a direct connection to children's health. The shades of gray vary depending on the severity of the risk, the quality of the available information, and the child's age and understanding. Navigating this complex landscape necessitates a collaborative effort. Open communication between health professionals, parents, and (depending on age) the child is critical. Doctors must provide patients with clear, evidence-based information about treatment options, including risks and benefits. Parents should be encouraged to ask questions and express their concerns without passing judgment. Understanding each other's roles and maximizing information will result in a balance between parental autonomy and children's health rights.

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