

CHILDREN'S COVID-19 VACCINATION

FAQ

Updated on January 20, 2022

This document contains a series of FAQs regarding COVID-19 vaccines for children. This information is based on currently available scientific evidence, reports, emergency use authorization details, and expert opinion, and is subject to change as information evolves. This document is accurate as of January 2022 and will be frequently updated as new evidence and information about COVID-19 vaccines becomes available.

Is my child eligible to receive a COVID-19 vaccine?

Currently children age 5 and up are eligible for vaccination against COVID-19. As of late October 2021, the two-dose Pfizer vaccine received Emergency Use Authorization (EUA) from the FDA for use in children 5-11. Older children ages 12-17 have been eligible to receive the two-dose Pfizer vaccine since July 2021. Trials for kids under 5 are underway.

Aren't children at low risk of contracting COVID-19 or becoming sick from it? Why should I vaccinate my child given this lower risk?

Though fewer children have been sick from COVID-19 compared to adults, children can be infected, get sick, and spread the virus to others. While most children have mild symptoms, they can become extremely ill, resulting in hospitalization and death. More than 9.5 million children in the U.S. have tested positive for COVID-19, and cases among children have reached the highest numbers reported since the start of the pandemic. For the week ending January 13, over 981,000 child cases were reported, up nearly triple from counts just two weeks prior.

Vaccination for eligible children is safe and effective at preventing them from becoming severely ill from COVID-19. The benefits of vaccination far outweigh the risks of vaccination. More than 209.5 million people, including over 13.3 million children ages 12-17, have already been fully vaccinated in the U.S. Additionally, since younger children were approved to receive the Pfizer vaccine, over 7.5 million children ages 5-11 have received their first dose. Vaccination not only safeguards your child's health, but it also protects friends, siblings, grandparents, and others in your community who may be elderly, immunocompromised, or too young to become vaccinated.

Beyond the health benefits of vaccination are the social and developmental benefits. Children have suffered greatly during the COVID-19 pandemic, often missing in-person educational and recreational opportunities that offer stimulation, socialization, and support. Between early August and October, more than 2,000 schools (with more than 1 million students) were forced to close because of outbreaks; now, after the holidays, many districts around the country have reverted to remote learning again due to skyrocketing case counts. Vaccination will allow children to return safely to activities that spur mental, physical, and intellectual growth, without fear they will become sick or pass the virus on to others in their families or communities. The longer the virus is able to travel through our communities, the greater the chance activities (sports, camps, school, etc.) will be shut down again, isolating children and taxing families.

Is it safe for my child to receive a COVID-19 vaccine?

Medical and public health experts trust the very serious and thorough FDA trial and approval process for the vaccines, as well as the public health regulatory system that constantly monitors ongoing vaccine safety and effectiveness. Speak to your pediatrician to learn more.

What are the main side effects and risks of COVID-19 vaccination for my child?

Side effects among children who have received the vaccine are similar to those experienced by adults. This can include pain at the injection site, fatigue, headache, chills, muscle pain, fever, and joint pain. These side effects are

usually mild and last 1-3 days. Younger children (age 11 and under) who receive the smaller vaccine dose may actually experience less side effects than adults and older children who receive a larger dose.

Over 13.3 million children ages 12-17 have been fully vaccinated in the U.S. (and 7.5 million younger children ages 5-11 have received at least a first dose), safely and with very few reports of major side effects. Experts do not anticipate any long-term issues with the vaccinations and encourage vaccination to protect against the high risk from COVID-19. The CDC, FDA, public health and medical experts are constantly monitoring the safety of the vaccines.

Regulatory agencies are monitoring limited reports of heart issues including myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining outside the heart) after COVID-19 vaccination. Compared to the millions who have been vaccinated with no cardiac issues, the reported cases—mostly among young men and adolescent males after mRNA COVID-19 vaccination (Pfizer or Moderna)—are extremely rare. Indeed, the risk of these conditions is higher for those who become infected with COVID-19. Most cases are mild and recover quickly with little to no medical treatment. The CDC and the FDA continue to monitor these instances and constantly evaluate for safety.

Speak with your pediatrician to address any concerns over vaccine safety.

What about the long-term effects of the vaccine on my child?

Experts are confident that the COVID-19 vaccines are safe for children now and into the future. There is no biologically plausible explanation for long-term negative effects for children. The Pfizer and Moderna vaccines use mRNA technology, which works like a ‘blueprint’ to help our body ‘build’ the coronavirus proteins so our natural immune process can develop antibodies to respond if the actual coronavirus infects us. The special thing about these mRNA blueprints is they don’t actually make coronavirus, but mimic it to prepare our bodies’ defenses. Once this process happens, the molecule leaves our bodies, so it is not stored long term and cannot affect our bodies’ processes down the line.

There is no evidence that any vaccines, including COVID-19 vaccines, cause issues with puberty or fertility. Experts recommend that your child receive a COVID-19 vaccine as soon as they are eligible, as there are no empiric or theoretical concerns about future puberty or fertility. Like with all vaccines, medical experts will continue to study side effects and will update the public with any new findings as they become available.

Is the vaccine dose different for children than adults?

The Pfizer vaccine dose approved for younger children ages 5-11 is one-third the dose given to people 12+. This is primarily because young children have particularly robust immune systems, and thus need a lower dose to produce a similar antibody response as older children and adults (and minimize side effects). Children ages 5-11 will be given two shots of the Pfizer vaccine three weeks apart.

Should I wait to get my child vaccinated against COVID-19?

No, you should not wait to get your child vaccinated—it is recommended that you have your child vaccinated as soon as they are eligible in order to protect them and your family against COVID-19. The FDA trial and approval process to evaluate the safety and effectiveness of the COVID-19 vaccine in children is very thorough and trusted by experts worldwide. There is also a robust public health regulatory system that constantly monitors vaccine safety. You should feel confident that the EUA for children indicates the Pfizer vaccine is safe for your child and effective at protecting your child against severe illness from COVID-19.

Experts recommend that you vaccinate your child as soon as possible at the recommended dose for their current age and not wait until they are eligible for a higher dose at age 12. The sooner your child is able to be protected from severe COVID-19 illness, the better—and this also limits their ability to become infected and transmit the virus to others in their family or community.

Does the vaccine work? Is there an issue with the Omicron variant?

Every time a virus is passed on to another person mutations can occur. Any of these mutations may make the virus more transmissible and/or deadly. As long as transmission is allowed to occur (e.g. within under-vaccinated communities) there is potential for new variants to emerge. The Omicron variant is more infectious than previous ones, meaning that it spreads more easily through our communities. It is now causing the vast majority of COVID-19 cases in the U.S.

COVID-19 vaccines are primarily intended to lower the risk of severe illness and death from the virus, which they continue to do extremely well. No vaccine is perfect, and breakthrough cases are expected; the Omicron variant is causing more breakthrough cases than other versions of the virus. However, it is encouraging to see that the vast majority of these cases are either asymptomatic or mild. If your eligible child is not vaccinated, they continue to be at risk of serious illness or death.

Should I give my child any pain relievers prior to vaccination?

No. The CDC and medical experts recommend that you do not give your child any pain relievers or over-the-counter medications prior to COVID-19 vaccination. Ask your child's healthcare provider for advice on using a pain-reliever after vaccination if your child is uncomfortable.

Can my child receive the COVID-19 vaccine at the same time as other vaccines or if they have recently received other vaccines?

Yes, the CDC advises that COVID-19 vaccines may be administered without regard to timing of other vaccines. This means that COVID-19 vaccines can be safely and effectively given with other vaccines, including the flu vaccine, during the same visit and/or recently.

What is a booster dose? Can my child receive a booster dose?

A booster shot is an additional dose of a vaccine given after the initial recommended primary series. Boosters are administered as an additional layer of defense to restore protection which may have decreased over time. In the context of the highly transmissible Omicron variant, boosters offer a substantial increase in protection against symptomatic infection and are recommended by the FDA and CDC for all eligible populations. *The CDC recommends most people receive a booster dose of one of the mRNA vaccines (Pfizer or Moderna) over a Johnson & Johnson booster dose in most situations, where possible. Speak to your doctor to learn more.*

- Any adult 18+ who received the Johnson & Johnson vaccine at least 2 months ago should get a booster shot of any of the available vaccines.
- Anyone age 18+ who received the 2nd dose of either the Pfizer or Moderna vaccine at least 5 months ago should get a booster dose of any of the available vaccines.
- **Anyone age 12-17 who received the 2nd dose of the Pfizer vaccine at least 5 months ago is eligible to get a Pfizer booster dose.**

The CDC recommends that some younger children (5-11) who are moderately or severely immunocompromised may be eligible for an additional dose 28 days after their second shot of the Pfizer vaccine. Speak with your health care provider if you have questions about your child's eligibility for a booster dose.

Do I need to pay for my child to become vaccinated?

No! All vaccines are provided through the U.S. government and will be free of charge to all individuals, including those without insurance. For those who have insurance, your information may be collected so the vaccine provider can bill the insurance company for administrative costs, but there will be no out-of-pocket cost to the individual.

Where can I get my child vaccinated?

If your child is eligible for vaccination (5+), they will be able to get their vaccine at a variety of locations, including your pediatrician's office. Your child may have access to the vaccine at school-based clinics, pharmacies, local children's hospitals, or other types of sites. You can search online for locations in your area here: <https://www.vaccines.gov/search/>. Refer to your local health department or pediatrician for more details, as there may be opportunities not listed on this website.

The ideas presented in this document reflect the latest public health thinking and scientific evidence as of January 2022. You are advised that the COVID-19 vaccine landscape remains highly fluid, and it is your responsibility to ensure that decisions are made based on the most up-to-date information available. Partners In Health does not provide medical advice, diagnosis or treatment in the United States. Always seek the advice of a physician or other qualified health care provider with any questions regarding a medical condition. The information, including but not limited to, text, graphics, images and other material contained in this document, are intended for informational purposes only.