Vaccinate ALL 58
Together we can end the pandemic.

QUESTIONS &ANSWERS
YOUTH 5-11 COVID-19 VACCINES

November 4, 2021

Q: Kids do not contribute to the community spread of COVID-19. Why should they be vaccinated?

A: Children are susceptible to serious complications from the virus and will benefit from the protection given by the COVID-19 vaccine. Children also can spread the virus to others, including more vulnerable members of our family and community, such as grandparents and those with compromised immune systems. We are also learning from antibody studies that children are also infected about as often as adults.

COVID-19 is the 8th leading cause of death for children ages 5-11. Children can also experience "long COVID," and in some instances, the virus has caused a response where a hyperactive immune system attacks the child's body (called Multisystem Inflammatory Syndrome in Children or MIS-C).
Getting our eligible youth vaccinated protects them from COVID-19 illness, helps keep our schools and communities safe, and protects our loved ones who are at higher risk of severe disease or death.

Q: Schools are overwhelmingly safe and the risk of infection due to an exposure at school is already low. Why do kids need to be vaccinated?

A: California's K-12 safety measures – including universal masking indoors, robust testing measures, and rigorous contact tracing – have successfully curbed the spread of COVID-19 in our schools.
However, vaccines are how we end the pandemic. The COVID-19 vaccine provides excellent protection and enables fully vaccinated students to remain in school and avoid interruption to in-person education, even if they are exposed to someone with COVID-19, so long as they remain without symptoms. Also, fully vaccinated students are not recommended to participate in screening testing at school.

Q: Do I need to provide consent or be present for my child's COVID-19 vaccination?

A: Children and adolescents ages 5 and over will need the consent of a parent or legal guardian in order to be vaccinated. Families should check with their vaccine provider on acceptable forms of consent, including in-person consent, a signed written note, or a phone call with verbal consent.

Call your family doctor or go to VaccinateALL58.com for more information on the COVID-19 vaccine for children aged 5 and over. Or visit MyTurn.ca.gov or call 833-422-4255 to schedule an appointment.

Q. Why is the vaccination policy in the UK different from ours? Why do they only require one dose rather than two and say eligible youth should get the vaccine during the summer?

A. The UK and some other European countries have taken a different approach to administering vaccines by focusing on people 16 and up and spacing out doses (of two shot vaccines) in order to help address supply constraints and maximize community immunity.

Recommendations in the UK have changed: While the UK's Joint Committee on Vaccination and Immunization did not recommend vaccinations for all youth 12 up during the summer (they did recommend youth with underlying conditions to get vaccinated), the country's top medical officers are now recommending all eligible unvaccinated youth get vaccinated to help prevent a winter surge and keep the virus from spreading in the nation's schools. A third of all recent cases reported in the UK are under 15, much higher than other European countries with vaccinated teens, and this has been pointed to as the "fuel" for England's current surge.

Q: Why did it take longer for the COVID-19 vaccine to be approved for youth?

A: COVID-19 vaccine trials began with older, more vulnerable populations and then extended to younger ages. This phased eligibility approach balances the need for both safety and speed.

Comprehensive clinical trials in more than 4,500 children ages 5-11 demonstrate the COVID-19 vaccine is safe and effective in this age group, resulting in a strong anti-body response in children who received the vaccines and more than 90 percent effective in preventing infection.

Q: Should children with underlying health conditions or allergic reactions be vaccinated against COVID-19?

A: Yes. It's very important for children with underlying conditions to be vaccinated against COVID-19. Many conditions and chronic illnesses increase the risk of severe disease.

Allergic reactions to the COVID-19 vaccine are rare and very few people have had severe adverse reactions.

But — if your child has allergic reactions to the flu vaccine or other severe allergies, you should report that to their healthcare provider before they receive the COVID-19 vaccine.

Parents or guardians should consult their child's healthcare provider to discuss any concerns — including underlying conditions or previous allergic reactions — prior to vaccination.

Q: Are children really at risk from COVID-19?

A: Yes. Children are susceptible to serious complications from the virus and will benefit from the protection given by the vaccine. COVID-19 is the 8th leading cause of death for children ages 5-11. Children can also experience "long COVID" and in some instances, the virus has caused a response where a hyperactive immune system attacks the child's body, called Multisystem Inflammatory Syndrome in Children (MIS-C) which can be quite serious leading to ICU admission and sadly,

death in almost one percent. Most kids with MIS-C had mild infections, and half were previously healthy.

Q: Is the COVID-19 vaccine safe for children?

A: Yes. Comprehensive clinical trials in more than 4,500 children ages 5-11 demonstrate the COVID-19 vaccine is safe and effective in this age group, resulting in a strong antibody response in children who received the vaccines.
Clinical trials began in June for 5–11-year-olds in which a lower dose Pfizer-BioNTech vaccine was tested. Pfizer announced in late September that their data demonstrated the vaccine is safe and produces a significant immune response. After this thorough study and the clinical trials, the FDA authorized the Pfizer-BioNTech vaccine for emergency use. The CDC and Western States Scientific Review Group reviewed all data and recommended the vaccine for all children ages 5-11.
There's consistent and real-world evidence of the vaccine's safety and effectiveness. The vaccine has been given safely to millions of youth since it was authorized for ages 16 and up last December and for ages 12 and up in May.

Q: When will children 5-11 years old be eligible to receive the COVID-19 vaccine?

A: Children ages 5-11 can receive their vaccine as early as Thursday (11/4), as soon as the federal and state review process is complete.

Q: Where and how will the youth vaccine be administered?

A: California was allocated 1.2 million pediatric doses with additional supply from the federal government becoming available in the coming weeks. Distribution of these vaccines will be the same as throughout the vaccination effort with direct shipments to local health jurisdictions and providers.

Q: Is this a different vaccine and what is the dosage?

A: The COVID-19 vaccine for children ages 5-11 contains a smaller amount of the same mRNA material that has been given safely to millions of youth since it was authorized for ages 16 and up last December and for ages 12 and up in May.
The dosage of Pfizer's 5-11 vaccine is in two, 10-micrograms (mcg) doses administered 21 days apart. This dosage is one-third of the adolescent and adult dose of two, 30-mcg doses. The clinical trials demonstrated a robust antibody response and favorable safety outcomes in kids ages 5-11 who received the two-dose regimen.

Q: Will children need a booster shot?

A: Not currently. At this time boosters are only recommended for adults.

Q: Will younger kids experience the same symptoms as adolescents and adults?

A: After COVID-19 vaccination, some children – like adults - may have some mild side effects like soreness, headache, fever, chills. These are normal signs that your body is building immunity and, while they may affect your child's ability to do daily activities, they should go away in a few days. Some people have no side effects at all. The risks from COVID-19 far outweigh the possible mild side effects from the vaccine.

Q: What is the state doing to ensure equitable distribution for the safe delivery of vaccines for children 5-11?

A: California will administer vaccines with the strategies laid out in the state's COVID-19 Vaccine Action Plan. The state will be leveraging existing infrastructure and partnerships currently used to administer vaccines for 12 and up. This includes working closely with local health departments, schools, community partners and others to administer vaccines safely and equitably through mobile clinics and vaccine pop-ups in hardest-hit communities across the state.

Q: How do I get my child vaccinated?

A: There are many ways to get your eligible children vaccinated by either making an appointment or visiting a walk-in clinic. You can call your pediatrician or local health clinic to schedule your child's vaccination appointment. You can also visit MyTurn.ca.gov or call 833-422-4255 to find a vaccine near you.

Q: Why can't I rely on my children building their own immunity to COVID-19 rather than assume the risk of the unknown?

A: Children are susceptible to serious complications from the COVID-19 virus and will benefit from the effective protection given by the vaccine . The Pfizer-BioNTech vaccine was found safe for the 5-11 age group. It has been given safely to millions of youth since it was authorized for ages 16 and up last December, and for ages 12 and up in May.

Q: How do we know it is safe since the COVID-19 vaccine developed so quickly?

A: COVID-19 vaccines have gone through extensive clinical trials and the most intensive safety review in U.S. history. The technology behind the mRNA COVID-19 vaccine is not new. Researchers have been studying and working with mRNA vaccines for decades. This allowed vaccine makers to get a jump-start and quickly develop the vaccine against COVID-19.

Q: If my child already had COVID-19, do they still need to get the vaccine?

Yes, doctors and scientists recommend that children and adolescents ages 5 and up get the vaccine, even if they've had COVID-19. We don't know how long someone is protected from getting sick after recovering from the virus. And we don't know whether the immunity developed against one strain provides enough protections against new variants. ***Here's what we know: These free, safe, and effective vaccines will help kids fend off the worst outcomes of this infectious virus, including the highly contagious Delta variant.***

Q: Can the COVID-19 vaccine affect my child's development or fertility?

A: There is currently no evidence that any vaccines, including COVID-19 vaccines, cause female or male fertility problems.

No loss of fertility was reported in the COVID-19 clinical trials — or in the millions of people who have since received the vaccine.

COVID-19 vaccines are safe and effective, and no concerns regarding growth and development have been identified during the clinical trials in children ages 5-11, nor any that have been raised in the ongoing trials with children as young as six months.

In fact, being vaccinated allows our young people to get back to doing the things that support their development, such as in-school learning, socializing and sports.

Q: What about possible serious side effects from the vaccine?

A: The nation's immunization experts analyze all reports concerning any possible serious side effects following a COVID-19 vaccine.

For instance, there have been rare, reported cases of inflammation of the heart muscle known as myocarditis and pericarditis— usually a week after receiving the second dose of mRNA vaccine. Cases have generally occurred in young adults, men, and people with certain medical conditions or recent medical procedures. In contrast, COVID-19 disease can cause myocarditis that is more severe than cases seen rarely after immunization.

These are rare, short-term occurrences. The risk is low, and those affected generally recover rapidly. Some people have required treatment, while others have not. Most cases are mild.

Meanwhile, COVID-19 disease can have long-term effects, making vaccination critically important.

Q: Will my child need to wear a mask at school after getting vaccinated?

A: Yes, vaccinated Californians must continue to wear masks indoors in schools to protect themselves and others.

Universal masking, combined with vaccination measures and access to regular testing, have been key to the state's nation-leading success in keeping schools open – resulting in California accounting for less than one percent of all school closures nationwide, despite educating 12 percent of the nation's public-school students.

Now is not the time to let our guard down – especially as the winter months approach. Ongoing vigilance is critical to protect against COVID-19. This is particularly important for schools, where many children are only beginning to get vaccinated.

Q: Once the COVID-19 vaccine is FDA fully approved, will it be required for in-person learning?

A: Gov. Gavin Newsom recently added the COVID-19 vaccine to the list of vaccinations required to attend school in-person when the vaccine receives FDA full approval. The state already requires that students are vaccinated against viruses that cause measles, mumps, and rubella. The eradication of smallpox, as well as prevention of meningitis, measles and whooping cough show that vaccines work. Vaccinations help protect young people, their families and communities against COVID-19 and its highly contagious variants.

Many U.S. colleges and universities require proof of vaccination for attendance.

Q: If I have a strong personal belief against the vaccine, can my child receive an exemption and go to school?

A: School vaccine requirements established by regulation, not legislation, are subject to personal belief exemptions. Additional details will be available after the rulemaking process is initiated. However, the more vaccinations that get into the arms of eligible Californians the more we can stop the spread, shrink the pool of people vulnerable to COVID-19 and keep our schools and communities safe. Adding children ages 5-11 means we can vaccinate another 9 percent of our state's population who remains vulnerable to COVID-19.

Q: When should my child be vaccinated against COVID-19?

A: Eligible Californians should get vaccinated as soon as possible. Vaccinations for 5–11-year-olds is the first week of November, just in time families to strengthen their protection against COVID-19.
The Pfizer-BioNTech vaccine is a two-dose series administered 21 days apart. Full protection against COVID-19 can take up to 2 weeks after the second dose. Children can also receive their flu shot at the same appointment as the COVID-19 vaccine.

Q: How do mRNA vaccines work? Are they safe and do they alter your DNA?

A: The mRNA, or messenger RNA, form of vaccine helps our cells make a "spike protein" from the virus that acts to trigger an immune response in the system. It does not change our DNA or RNA. The technology utilized to make these vaccines has been developed over the last 20 years. Messenger RNA has been studied for over a decade for effectiveness in influenza, Zika, rabies, and new cancer treatments. Pfizer and Moderna are manufacturing this type of vaccine to help us get this public health crisis under control safely and effectively.