



## **PROTECTION FOR CHILDREN YOUTH VACCINE AGES 5-11**

***As of November 4, 2021***

### **TOP MESSAGES:**

- **Families with children ages 5-11 can now protect their kids from COVID-19** following the FDA's emergency use authorization of a lower dose of the Pfizer-BioNTech vaccine and the CDC's Advisory Committee on Immunization Practices recommendation for use in children ages 5-11. This represents another turning point in our fight against COVID-19 and gets us closer to achieving full family protection against this deadly virus.
- **Comprehensive clinical trials in more than 4,500 children ages 5-11 demonstrate that the COVID-19 vaccine is safe and effective** in this age group, resulting in a strong antibody response in children who received the vaccine.
- **The science and data – now inclusive of younger children – continue to speak loud and clear: These free, safe vaccines will help kids** fend off the worst outcomes of this infectious virus, including the highly contagious Delta variant.
- **When more of our younger family members are vaccinated, they can join their older siblings, family, and friends in being safer**, doing the things they love and that support their long-term health and wellness.
- **Vaccines are how we end the pandemic. We can protect our families and community by helping the eligible young people in our lives get vaccinated.** Call your pediatrician or health clinic to get your child vaccinated or go to [MyTurn.ca.gov](https://myturn.ca.gov) or call the hotline at 833-422-4255 to find a vaccination site near you.

### **TALKING POINTS & DETAIL:**

- **Comprehensive clinical trials demonstrated the Pfizer-BioNTech COVID-19 vaccine is safe and effective in protecting children ages 5-11 against COVID-19. This prompted the U.S. Food and Drug Administration (FDA) on Oct. 29 [to extend the Emergency Use Authorization of the Pfizer-BioNTech COVID-19 vaccine](#) for this age group, following a thorough review of data from their advisory committee.**
  - The CDC's Advisory Committee on Immunization Practices and Western States Scientific Safety Review Workgroup followed with their own respective reviews and approvals of the data supporting the Emergency Use Authorization days later.
- **In June, clinical trials began for children ages 5-11 in which a lower-dose Pfizer-BioNTech COVID-19 vaccine was tested in clinical trials with more than 4,500**

children. Pfizer [announced](#) in late September that their data demonstrated the vaccine is safe and produces a significant immune response, prompting the FDA review process.

- The clinical trial data demonstrated a robust antibody response and favorable safety outcomes in children ages 5-11 who received the two-dose regimen in clinical trials.
  - The COVID-19 vaccine is administered to children ages 5-11 in two, 10-microgram (mcg) doses administered 21 days apart.
  - The dosage is one-third of the adolescent and adult dose.
  - The COVID-19 vaccine was found to be safe for children ages 5-11, with only mild side effects like fatigue, fever and headache.
  - There's consistent, 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.
  - The safety of COVID-19 vaccine continues to be closely monitored
- **Our younger children have remained vulnerable to this highly contagious virus as older Californians have received their vaccines.**
    - There have been more than [6 million pediatric cases](#) in the U.S., nearly 2 million of those occurring in children ages 5-11.
      - There have been more than [67,000 pediatric COVID-19-related hospitalizations](#) and we have lost more than [760 young lives](#) to this deadly virus.
        - As of October 1, there have been more than [5,200 cases of MIS-C](#) associated with COVID-19 in the U.S.
          - The median age is nine years old, and more than [60 percent of the cases](#) have occurred in children who are Latino or African American. There have been [46 deaths](#) associated with MIS-C.
      - Nearly [700,000 children and adolescents](#) in California have been infected with COVID-19. There have been more than 6,500 pediatric hospitalizations in our state since July of last year, and we have lost 37 young lives since the start of the pandemic. There have been [660 cases of MIS-C in California](#) (As of late October).
    - COVID-19 is the [8<sup>th</sup> leading cause of death](#) for children ages 5-11.
      - This is based on annualized total of COVID-19 deaths (Oct '20-Oct '21) compared to 2019 deaths from other causes.
- **Knowing more of our kids are protected against this deadly virus provides parents peace of mind as we get back to in-person activities and spending more time with the ones we love.**
    - COVID-19 vaccination is allowing more of our state's population to safely get back to the activities they love. Vaccinations have allowed kids 12-17 to rejoin sports teams, drama clubs and other activities – programs that enrich their youth and help them grow into healthy adults.

- Our younger children deserve the same opportunities. They've weathered remote learning, adapted to wearing masks and put birthday parties and playdates on hold.
  - These young heroes want to fully participate in life again. With holiday gatherings and festivities approaching, vaccine authorization could not come at a better time.
  - Vaccinating our children will help protect them and our loved ones by slowing the spread of the virus to others, including more vulnerable members of our family, such as grandparents or to others with compromised immune symptoms.
  - Vaccinating our children limits disruption to their learning. Fully vaccinated students may 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.
- **California is employing its equitable distribution plan for the safe delivery of vaccines for children aged 5-11.**
    - California was allocated 1.2 million pediatric doses. Distribution of these vaccines will be the same as throughout the vaccination effort with direct shipments to local health jurisdictions and providers.
    - 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.
      - Once available, youth can receive the COVID-19 vaccine along with other routine immunizations.
      - COVID-19 vaccine is free for all Californians regardless of insurance and immigration status, which will not be asked. COVID-19 testing, treatment or vaccinations will not affect anyone's immigration status or be shared with immigration agencies.
      - In some instances, a vaccine provider may request your Social Security Number and/or government ID, but it is **NOT** required.
      - Children and adolescents ages 5-17 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](https://www.vaccinateall58.com) for more information on the COVID-19 vaccine for children ages 5-11.
    - Parents can also visit [MyTurn.ca.gov](https://myturn.ca.gov) or call 833-422-4255 to schedule an appointment.
- **The technology behind the mRNA COVID-19 vaccine is not new. Researchers have been studying and working with mRNA vaccines for [decades](#).**

- Interest has grown in these vaccines because they can be developed in a laboratory using readily available materials. This means the process can be standardized and scaled up, making vaccine development faster than traditional methods of making vaccines.
- These vaccines are held to the same rigorous safety and effectiveness standard as all other types of vaccines in the U.S.
- **While things are looking up, it is important to remember that the pandemic isn't over yet.**
  - Last year's winter surge was devastating in California. It is critically important to supercharge our immunity before the holidays to stay healthy and keep our loved ones safe who may be at a higher-risk of COVID-19.
  - We are strongly urging unvaccinated Californians to get vaccinated and those who are now eligible to get a booster.
  - We are also encouraging all Californians to get a flu vaccine, which can be administered at the same time as the COVID-19 vaccine or booster.

***In response to mis- and disinformation, including effects on child development, fertility myocarditis:***

- **There is currently no evidence that any vaccines, including COVID-19 vaccines, cause female or male infertility problems.**
  - No loss of fertility was reported in the COVID-19 clinical trials -- or in the millions of women who have received the vaccine.
- **COVID-19 vaccines are safe and effective. There is no reason to suspect the vaccine's ingredients can harm youth development.**
  - 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.
  - COVID-19 vaccines do not change or interact with your DNA in any way. The ingredients in the mRNA vaccine never enters the nucleus of a cell, which is where our DNA is kept.
  - There have been no reports of developmental problems in children born to vaccinated parents.
  - In fact, vaccinating our children enables them to get back to doing the things that support their healthy development, such as in-school learning, socializing and sports.
- **The nation's immunization experts analyze all reports concerning any possible serious side effects following a COVID-19 vaccine. Serious side effects are rare — and the benefits of vaccination far outweigh any risk.**
  - 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.
- It is COVID-19 that could have long-term effects, making vaccination critically important.
- **Vaccines are saving lives and getting us closer to ending the pandemic. Here are some facts:**
  - As of October 6, out of the millions of vaccines safely administered to people under 30 across the U.S., there have been only [877 myocarditis cases after mRNA vaccination](#) reported to the FDA/CDC's Vaccine Adverse Events Reporting System (VAERS).
  - Depending on the levels of COVID-19 in our communities, the following are the [estimated benefits for every million Pfizer-BioNTech COVID-19 vaccinations](#) in children ages 5-11:
    - 18,500 – 58,200 COVID-19 cases prevented.
    - 80-226 hospitalizations prevented.
    - 42-132 MIS-C cases prevented
    - 26-72 ICU admissions prevented.