Welcome to
Talking with Parents and Children about COVID-19 Vaccines

Vaccinate ALL 58
Together we can end the pandemic.

Thursday, June 15, 2023

12:00PM-1:00PM

#THIS IS OUR SHOT #VACUNATE YA

Continuing Medical Education Disclosure

Disclosure:

None of the Planners, reviewers and presenters have disclosed any relationships with companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Housekeeping

This session is being recorded. Please access today's slides and recording through the following link: EZIZ COVID Crucial Conversations

Please use the "Q&A" or "raise your hand" functions to ask questions.

For follow-up questions, please email rachel.jacobs@cdph.ca.gov.

Questions

During today's webinar, please use the Q&A panel to ask your questions.

Resource links will be dropped into, “Chat”

Webinar Objectives

Participants will learn:

- Reasons for vaccine hesitancy among parents
- Common parental concerns about COVID-19 vaccines and how to address them
- Strategies to effectively speak with parents and children about COVID-19 vaccines

Agenda: Thursday, June 15, 2023

No.	Item	Speaker(s)	Time (PM)
1	Welcome	Rachel Jacobs (CDPH)	12:00 – 12:05
2	Talking with Parents and Children about COVID-19 Vaccines	Ilan Shapiro, MD, FAAP, FACHE (#ThisIsOurShot/#VacunateYa)	12:05 – 12:40
Questions & Answers			12:40 – 12:55
3	Poll and Resources	Rachel Jacobs (CDPH)	12:55 – 1:00

Poll: CDPH appreciates your feedback!

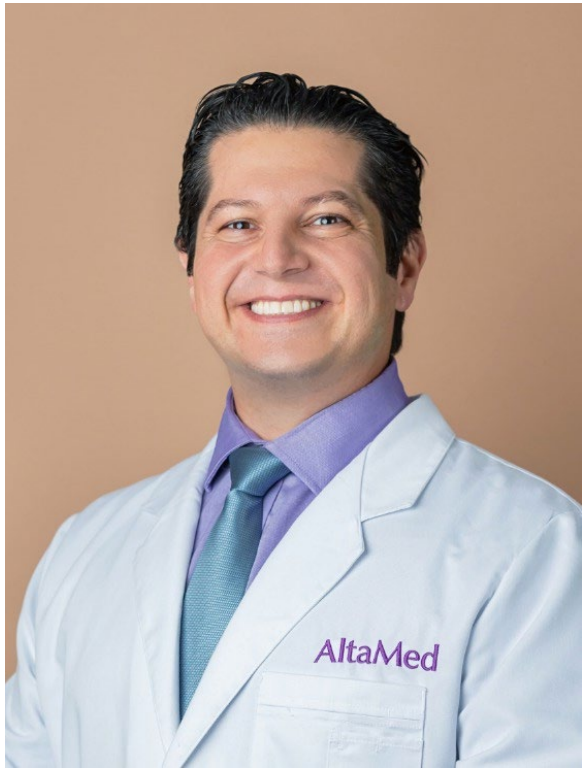
How confident are you in your ability to speak effectively with parents and children about COVID-19 vaccines?

- ❑ Very confident
- ❑ Confident
- ❑ Somewhat confident
- ❑ Slightly confident
- ❑ Not confident

Talking with Parents and Children about COVID-19 Vaccines

Ilan Shapiro, MD, FAAP, FACHE

#ThisIsOurShot / #VacunateYa



The Story…

I. Introduction

II. Understanding Concerns and Misconceptions

III. Presenting the Facts

IV. Addressing Parental Questions and Concerns

V. Vaccinating Children with COVID-19 Vaccines

VI. Emphasizing the Benefits of Vaccination

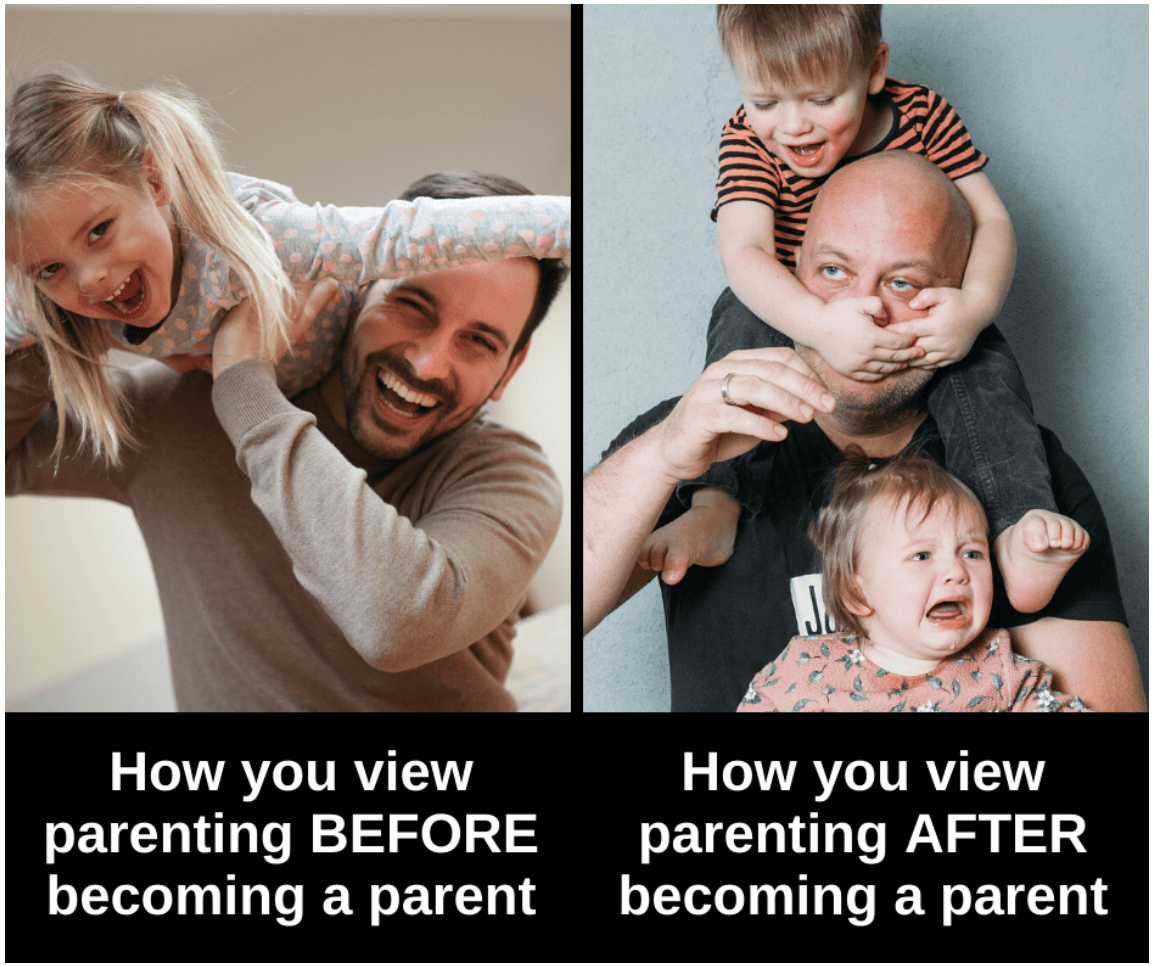
VII. Providing Real-World Examples and Testimonials

VIII. Addressing Vaccine Hesitancy and Building Trust

IX. Resources and Support

X. Q&A Session

The Story…


How you view parenting BEFORE becoming a parent
How you view parenting AFTER becoming a parent

I. Introduction

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II. Understanding Concerns and Misconceptions

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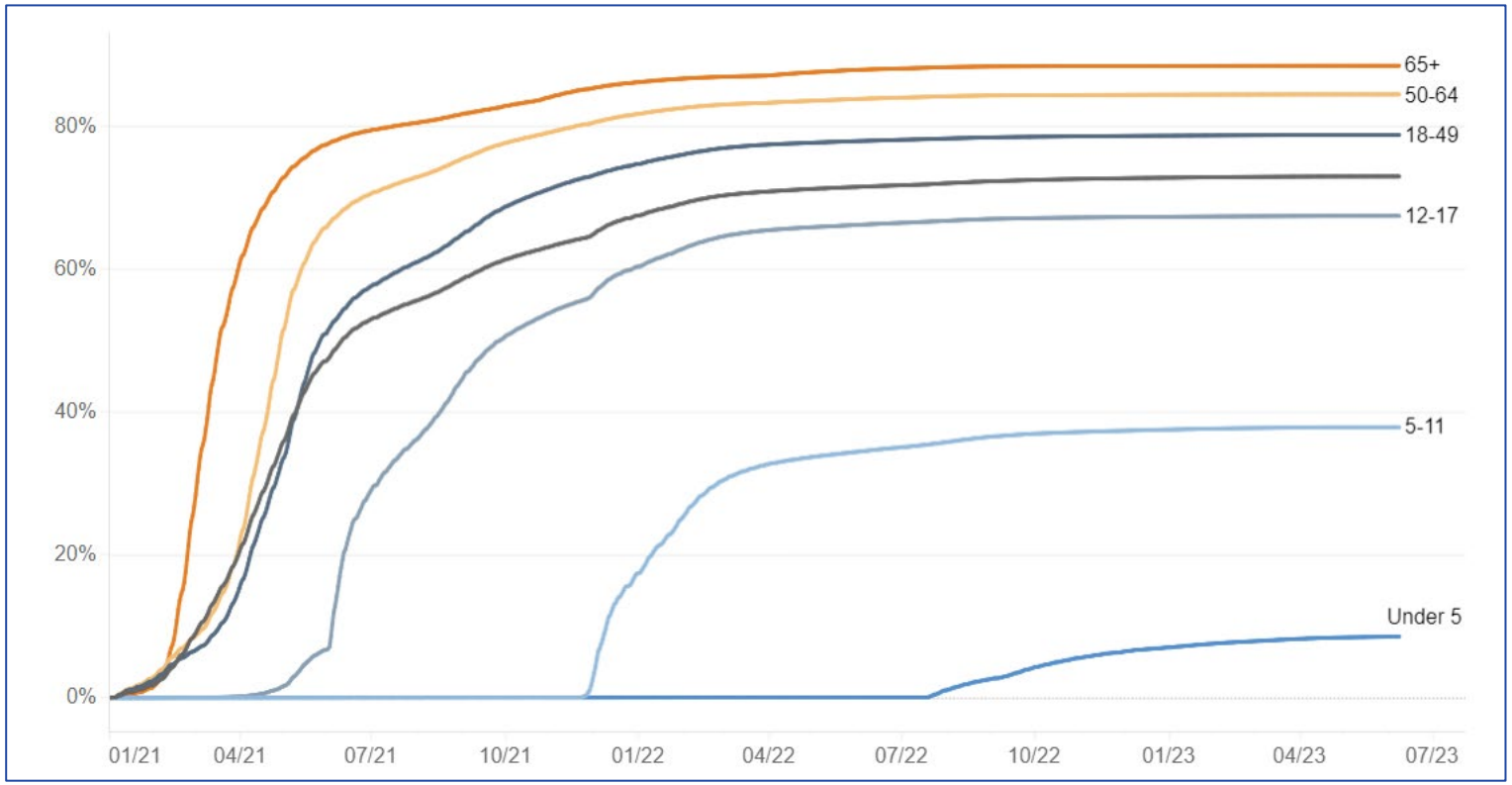
II. Understanding Concerns and Misconceptions

Pediatric Vaccination Data: California

As of 6/8/2023

Percent of children who have received their primary series:

- **Only 8.6%** of children under 5
- **37.8%** of children ages 5-11
- **67.3%** of children ages 12-17



II. Understanding Concerns and Misconceptions

Female (vs. male)

Single (vs. married/living as married)

Older (vs. younger)

Low-income (vs. high income)

Non–college graduates (vs. college graduates)

II. Understanding Concerns and Misconceptions

II. Understanding Concerns and Misconceptions

Concerns about vaccine safety, effectiveness, and accelerated development have been predictive of pediatric COVID-19 vaccine hesitancy in the limited research reported to date.

Parents might also decline vaccination because they believe their healthy child will not get infected, or at least will not become seriously ill, from COVID-19.

III. Presenting the Facts

Addressing common questions and beliefs from parents:

- Does natural immunity replace the COVID-19 vaccine?
- Is it safe?
- What about the heart?
- What about infertility?
- Was the COVID-19 vaccine developed too quickly?
- I just simply do not believe in COVID-19.

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IV. Addressing Parental Questions and Concerns

My child has had COVID-19. Aren't they protected through natural immunity?

Even if your child has had COVID-19, you should still get your child vaccinated.

- Getting a COVID-19 vaccine after having COVID-19 provides added protection against the virus that causes COVID-19.
- People who already had COVID-19 and do not get vaccinated after their recovery are more likely to get COVID-19 again than those who get vaccinated after their recovery.

IV. Addressing Parental Questions and Concerns

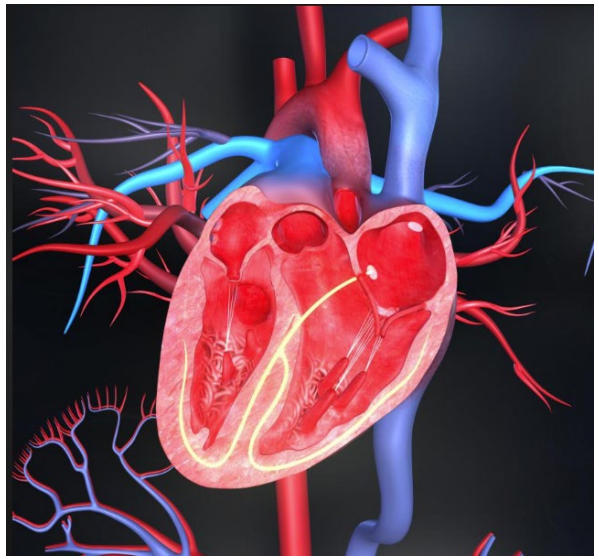
Is the COVID-19 vaccine safe?

- Getting vaccinated is much safer than the risks of getting sick with COVID-19.
- COVID-19 vaccine safety monitoring of over 22,000 children under 5 years old showed vaccination is safe, as have studies in older children (5-11 years old) and adolescents.

IV. Addressing Parental Questions and Concerns

What about myocarditis?

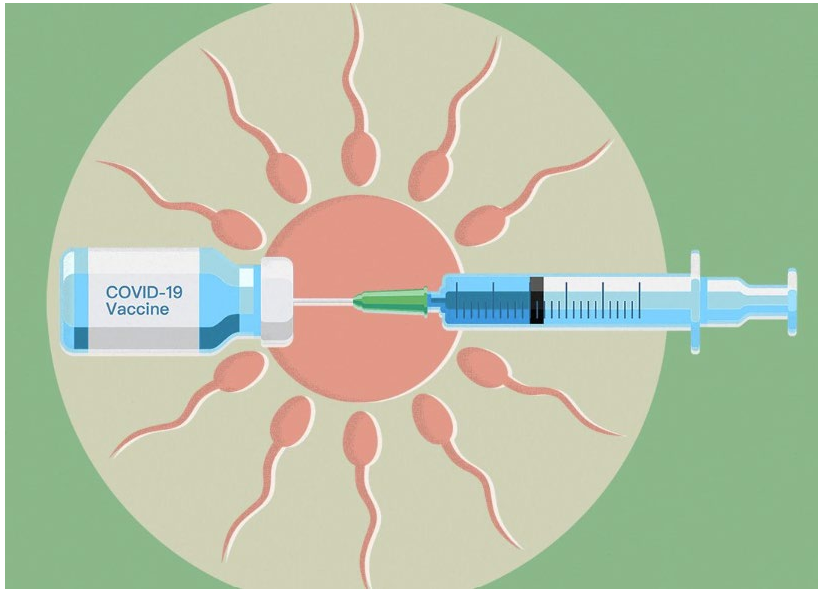
- Myocarditis, or inflammation of the heart, is a rare side effect of some COVID-19 vaccines, but in children, myocarditis has been very rare.
- In children 5-11 years old, the risk of myocarditis from COVID-19 vaccination is about 1 in 1 million.
- The risk of myocarditis is **much higher from COVID-19 infection than it is from the vaccine.**



IV. Addressing Parental Questions and Concerns

Can COVID-19 vaccines affect my child's fertility?

- The vaccines, including vaccine ingredients or antibodies made following vaccination, have **not** been shown to affect fertility.
- Studies show that vaccinated women can get pregnant at the same rates as women who are unvaccinated.



IV. Addressing Parental Questions and Concerns

Was the COVID-19 vaccine developed too quickly?

Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

V. Vaccinating Children with COVID-19 Vaccines

Tips to Ease Anxiety During Vaccination

DISTRACT:

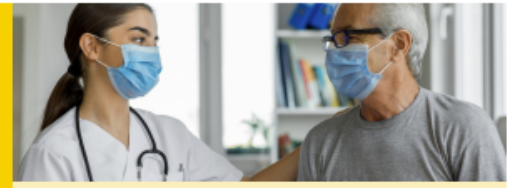
Reduce stress and ease pain.

- Interact warmly with the patient throughout the appointment.
- Point out interesting things in the room or ask them to count all the blue items they see. Tell a story. Ask them to wiggle their toes or tighten and release muscles in their face, hands, or legs.
- Suggest they play a game, watch a video, listen to music, or imagine their favorite place. Parents can try talking or singing to their child.
- Tell them to take slow, deep breaths during vaccination. Children can blow bubbles (imaginary or real) to help them take big breaths.
- Remind them to stay focused on the distraction strategy if their attention wanders.

COMFORT:

Remain calm and stay positive.

- Reassure them that it may sting, but it will only last a few seconds. (Consider using topical anesthetic before vaccination, if appropriate. Allow for time to take effect.)
- Though a seated position is preferred for vaccination, those with anxiety may lie down. Remind them to relax their arms and shoulders.
- Adults may wish to bring a support person or have a friendly hand to squeeze. Parents may hold their child on their lap during vaccination and cuddle them after.
- Allow children to cry – don't force them to "be brave."
- Reward young patients with a sticker or colorful Band-Aid. Parents may offer to take them to the park or to get a treat.
- Give positive reinforcement–tell them they did something good by protecting themselves and those around them.



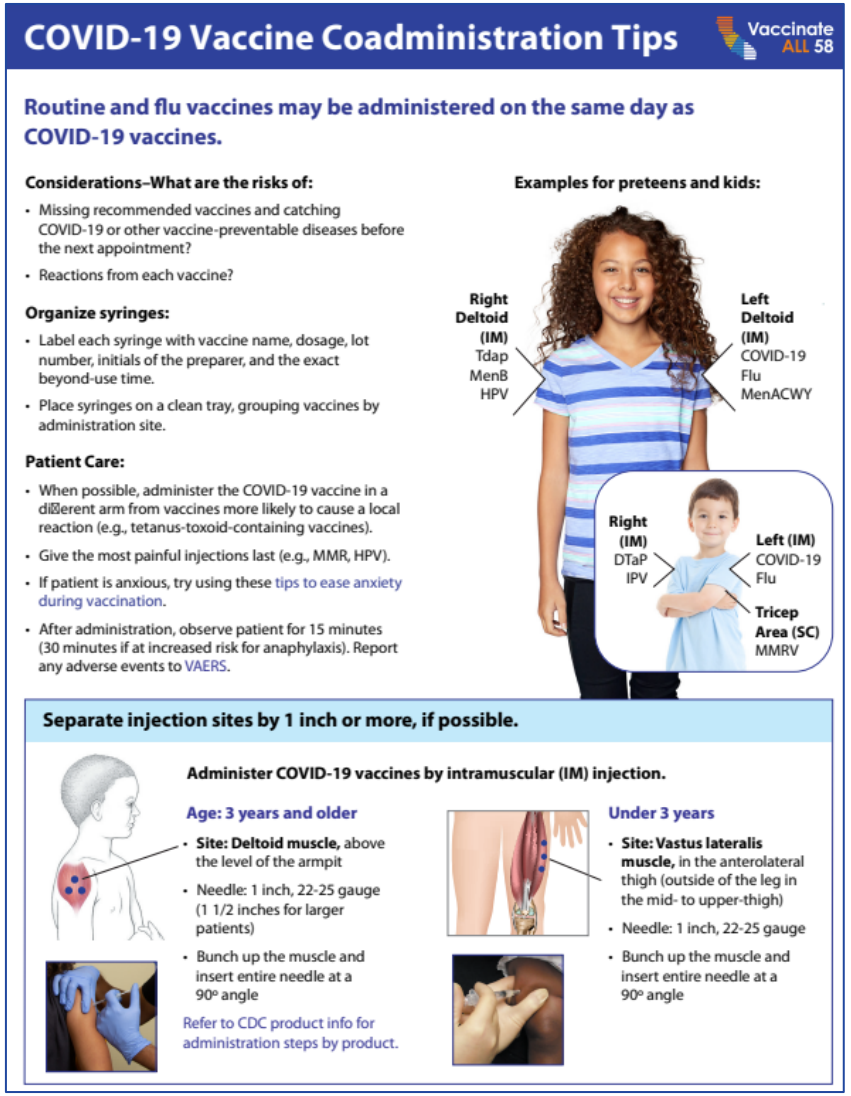
EDUCATE:

Manage pain and side effects.

- Inform patients or their parents that they may experience mild side effects that should go away within a few days. This is a normal sign that their body is building immunity.
- Common side effects include soreness, redness or swelling where they got the shot, feeling tired, headache, muscle pain, chills, fever, or nausea.
- Apply a cool, wet cloth to the area to reduce any soreness where the vaccine was administered. Use or exercise the arm.
- Advise on what pain relievers can be used to help alleviate soreness or other side effects. Aspirin is not recommended for children and adolescents. Instead, use acetaminophen (e.g., Tylenol) or ibuprofen (e.g., Advil, Motrin).

V. Vaccinating Children with COVID-19 Vaccines

COVID-19 Vaccine Coadministration Tips



COVID-19 Vaccine Coadministration Tips

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Routine and flu vaccines may be administered on the same day as COVID-19 vaccines.

Considerations–What are the risks of:

- Missing recommended vaccines and catching COVID-19 or other vaccine-preventable diseases before the next appointment?
- Reactions from each vaccine?

Organize syringes:

- Label each syringe with vaccine name, dosage, lot number, initials of the preparer, and the exact beyond-use time.
- Place syringes on a clean tray, grouping vaccines by administration site.

Patient Care:

- When possible, administer the COVID-19 vaccine in a different arm from vaccines more likely to cause a local reaction (e.g., tetanus-toxoid-containing vaccines).
- Give the most painful injections last (e.g., MMR, HPV).
- If patient is anxious, try using these tips to ease anxiety during vaccination.
- After administration, observe patient for 15 minutes (30 minutes if at increased risk for anaphylaxis). Report any adverse events to VAERS.

Examples for preteens and kids:

Separate injection sites by 1 inch or more, if possible.

Administer COVID-19 vaccines by intramuscular (IM) injection.

Age: 3 years and older

- **Site: Deltoid muscle,** above the level of the armpit
- Needle: 1 inch, 22-25 gauge (1 1/2 inches for larger patients)
- Bunch up the muscle and insert entire needle at a 90° angle

Refer to CDC product info for administration steps by product.

Under 3 years

- **Site: Vastus lateralis muscle,** in the anterolateral thigh (outside of the leg in the mid- to upper-thigh)
- Needle: 1 inch, 22-25 gauge
- Bunch up the muscle and insert entire needle at a 90° angle

VI. Emphasizing the Benefits of Vaccination

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VII. Providing Real-World Examples and Testimonials

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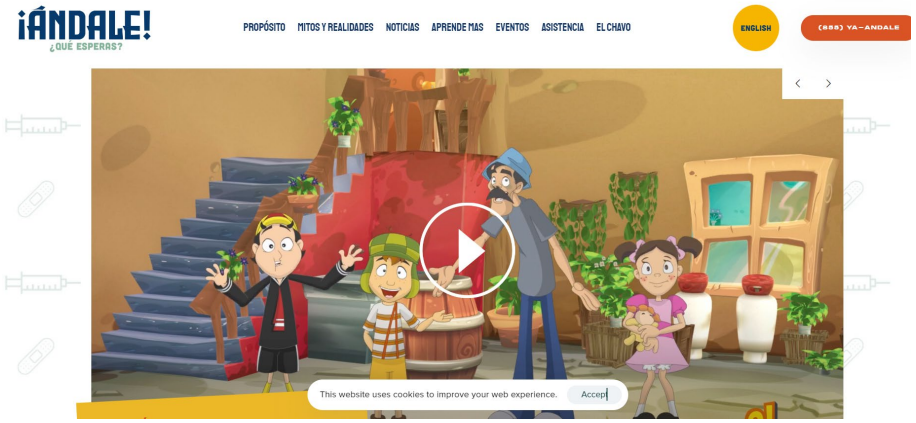
VII. Providing Real-World Examples and Testimonials

Strategies to Combat Misinformation



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VIII. Addressing Vaccine Hesitancy and Building Trust

Conversation Methodology

Aka: Answering Tough Questions/Having Tough Conversations

3	5	3
Steps to Start the Conversation	Key Messages	Post-Conversation Steps

To address patients concerns related to myths and misinformation, use the 3-5-3 method.

3 Steps to Initiating/Continuing Conversations

1

Ask and listen to the answer

“What do you think about the vaccine?”

“Why do you feel that way?”

“What concerns do you have about the vaccine?”

2

Create an alignment of safety

"I would be scared too. Let’s do what’s safe here.”

“We both want what's safest for you.”

3

Find common goals

“We all want our children to be safe.”

“What reasons would motivate you to get vaccinated?”

Find their personally motivating reason.

Key Messages

1

The vaccine will keep you safe.

The vaccine will protect you from getting very sick. Over 260 million Americans, including over 31 million children, have been safely vaccinated and are now protected.

Key Messages

2

Mild side effects are common.

Side effects are a sign that your body is protecting you.
For a few days after vaccination, many people temporarily feel:

- Sore arm (at administration site)
- Tired or fatigue
- Headache
- Muscle pain
- Joint pain

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Key Messages

3

Vaccines are very effective.

Each vaccine is extremely effective at preventing hospitalization and death from COVID-19, including against newer variants. The updated (bivalent) vaccine provides additional protection against circulating strains of the COVID-19 virus.

Key Messages

4

The vaccine is built on 20 years of research and science.

It is good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

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Key Messages

5

Have questions? Please ask.

I am glad you want to know more. Ultimately, the choice is yours. Today or when you're ready, go to myturn.ca.gov or text your zip code to GETVAX or VACUNA to get your vaccine.

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COVID-19 Vaccine Language Tips

Do Say	Don't Say
Vaccination	Injection or shot
A safe and effective vaccine	A vaccine developed quickly
Authorized by FDA based on clinical testing	Approved by FDA; Operation Warp Speed; Emergency Use Authorization*
Get the latest information	There are things we still don't know
Keep your family safe; keep those most vulnerable safe	Keep your country safe
Public Health	Government
Health/medical experts and doctors	Scientists
People who have questions	People who are hesitant, skeptical, resistant, or "anti-vaxxers"

** The perceived speed of vaccine development is a current barrier among many audiences.*
These recommendations are based partly on research conducted by the de Beaumont Foundation.

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3 Steps Post-Conversation

1

Acknowledge their agency and personal choice

“I want your child to get vaccinated today, but ultimately it’s your choice.”

“I'm here as a resource to help you."

2

Keep lines of communication open

Trust is a journey. Give folks a way to reach you that you are comfortable with as they consider their decision.

3

Offer to find a vaccine

Offer myturn.ca.gov or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.

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Connect with Dr. Ilan Shapiro!

ishapirostrygler@altamed.org

@Dr_Shaps

Ilan Shapiro, MD FAAP FACHE

Questions

During today's webinar, please use the Q&A panel to ask your questions.

Resource links will be dropped into, “Chat”

Poll & Resources

Rachel Jacobs, CDPH

Poll: CPDH appreciates your feedback

Following this webinar, how confident are you in your ability to effectively speak with parents and children about COVID-19 vaccines?

- ❑ Very confident
- ❑ Confident
- ❑ Somewhat confident
- ❑ Slightly confident
- ❑ Not confident

Clinical Talking Points for Pediatric Providers

Recommending COVID-19 Vaccination and Boosters: Clinical Talking Points for Providers of Pediatric Services

This resource is designed to help you and your staff have effective conversations with families about COVID-19 vaccines, as you are the most trusted source of medical information for families.

Families can benefit by discussing COVID-19 vaccination.

The top reason parents cite for not vaccinating their children is needing more information. For families who may be hesitant about the COVID-19 vaccine, begin the conversation by asking, *"How do you feel about your child getting the COVID-19 vaccine?"* The goals of these conversations are to have a cordial discussion, answer questions, understand and acknowledge any fears they express, and provide accurate information.

Validate parental concerns and answer questions without judgement.

As their child's provider, your guidance is influential. Hearing from you that immunization is safe and effective can be reassuring. When parents express hesitation, ask about and acknowledge their concerns. For example, *"If I heard those things, I would be scared, too. Let's talk about your concerns."* Let parents know that you share their goal of keeping their children safe.

Give parents accurate information.

Here are common questions and talking points to help parents. Praise parents who ask questions for wanting to know more. Wrap up the conversation by making a recommendation while acknowledging their authority in deciding for their children. For example, *"I think getting vaccinated is best for your child. Ultimately, it's your choice. I'm here to guide you and answer your questions."*

Why should my child get the COVID-19 vaccine and the updated (bivalent) COVID-19 booster?

- **It's effective**. The vaccines do not protect against all COVID-19 infection, but multiple studies have shown it is effective, especially in preventing severe illness and hospitalization, including against newer variants. (See the following links for additional data: 3-to-5-year-olds, 5-to-11-year-olds, 5-to-17-year-olds, 12-to-18-year-olds, and 5-to-17-year-olds bivalent.) The updated (bivalent) booster provides additional protection against circulating strains of SARS-CoV-2.
  - Healthy children can have severe COVID-19, too. In fact, almost half of children younger than 18 years hospitalized with COVID-19 have had no prior health problems.
  - Children with pre-existing conditions are at higher risk for severe COVID-19 outcomes. Vaccination is especially recommended to keep children with chronic conditions and disabilities safe and healthy.
- Multisystem Inflammatory Syndrome in Children (MIS-C) is a serious condition that can happen in children after infection with COVID-19, even if they had mild symptoms or no symptoms at all. The best way to prevent MIS-C is to protect against SARS-CoV-2 infection through vaccination and other preventive actions.

Recommending COVID-19 Vaccination and Boosters: Clinical Talking Points for Providers of Pediatric Services

- The COVID-19 vaccine lowers the risk of MIS-C by 91%, according to data from July-December 2021. In children 5 to 18 years of age, vaccination was associated with a reduced chance of getting MIS-C during the Omicron period.
- In California, there have been over 1,000 cases of MIS-C, many of which were admitted to an ICU (as of 12/19/22).

- Long COVID affects children and adolescents. Children have reported ongoing respiratory, cardiac, neurologic, and other symptoms following COVID-19 infection. Research suggests that people who are vaccinated against COVID-19 are less likely to develop long COVID.
  - In a study of over 3 million children and adolescents, those infected with COVID-19 were more likely to develop diabetes, cardiovascular disorders including blood clots and myocarditis, and kidney disease than those without COVID-19.

Isn't it true that COVID-19 doesn't affect children?

- Unfortunately, no. As of January 2023 COVID-19 has caused more than 15 million children in the US to become ill, more than 180,000 to be hospitalized, and more than 2,000 to die.

My child already had COVID-19, aren't they protected through natural immunity?

- Even if your child has had COVID-19, you should still get your child vaccinated.
  - Getting a COVID-19 vaccine after having COVID-19 provides added protection against the virus that causes COVID-19.
  - People who already had COVID-19 and do not get vaccinated after their recovery are more likely to get COVID-19 again than those who get vaccinated after their recovery.
- If your child recently had COVID-19, you may consider delaying your child's next vaccine dose (primary dose or booster) by 3 months from when their symptoms started, or if there were no symptoms, from when your child tested positive.

Are COVID-19 vaccines and boosters safe for my child?

- COVID-19 vaccines are safe. Over 260 million people, including over 31 million children, have safely received the COVID-19 vaccine in the United States and are now protected against serious COVID-19 infection. This includes nearly 3 million doses of the updated (bivalent) vaccine given to children. Getting vaccinated is much safer than the risks of getting sick with COVID-19.
- Mild to moderate side effects are common and can be a sign that your body is building up its defenses to protect you. It's not unusual for a child to feel sore at the injection site or have a fever, headache, and fatigue for a day or two after vaccination.
  - COVID-19 vaccine safety monitoring of over 22,000 children under 5 years old showed vaccination is safe, as have studies in older children (5-11 years old) and adolescents.
  - Early safety findings for the updated (bivalent) booster in children are similar to those described for monovalent booster vaccination. The most common side effects reported are soreness at injection site, fatigue, and headache.

Recommending COVID-19 Vaccination and Boosters: Clinical Talking Points for Providers of Pediatric Services

What about myocarditis?

- Myocarditis, or inflammation of the heart, is a rare side effect of some COVID-19 vaccines, but in children, myocarditis has been very rare.
  - In children 5-11 years old, the risk of myocarditis from COVID-19 vaccination is about 1 in 1 million.
  - This risk is higher in male teens, about 7-10 in 100,000, however the risk of myocarditis is much higher from COVID-19 infection than it is from the vaccine, and myocarditis is usually much more serious after COVID-19 infection than after immunization.
    - This risk can be reduced by a longer interval time between primary series 1st and 2nd doses, such as 8 weeks.

Can COVID-19 vaccines affect my child's fertility?

- The vaccines, including vaccine ingredients or antibodies made following vaccination, have **not** been shown to affect fertility.
  - Studies show that vaccinated women can get pregnant at the same rates as women who are unvaccinated. A study of more than 2,000 females and their partners found that COVID-19 vaccination did not affect fertility. A recent small study of 45 healthy men also did not show any effects of COVID-19 vaccination on fertility.
  - A study of nearly 4,000 people found a very small, temporary change in menstrual cycle length after vaccination. Periods were late by less than 1 day on average and returned to normal within 1 or 2 months. The changes were temporary and not clinically significant, meaning there was no impact on reproductive health or fertility.
- Hundreds of thousands of people who are pregnant or trying to get pregnant have safely received the COVID-19 vaccine.

Receive additional tips on having COVID-19 conversations with families.

"COVID-19 Crucial Conversations Campaign" helps healthcare professionals counsel patients on COVID-19 vaccines. Register for upcoming trainings or view archived sessions at the campaign webpage.

Thank you.

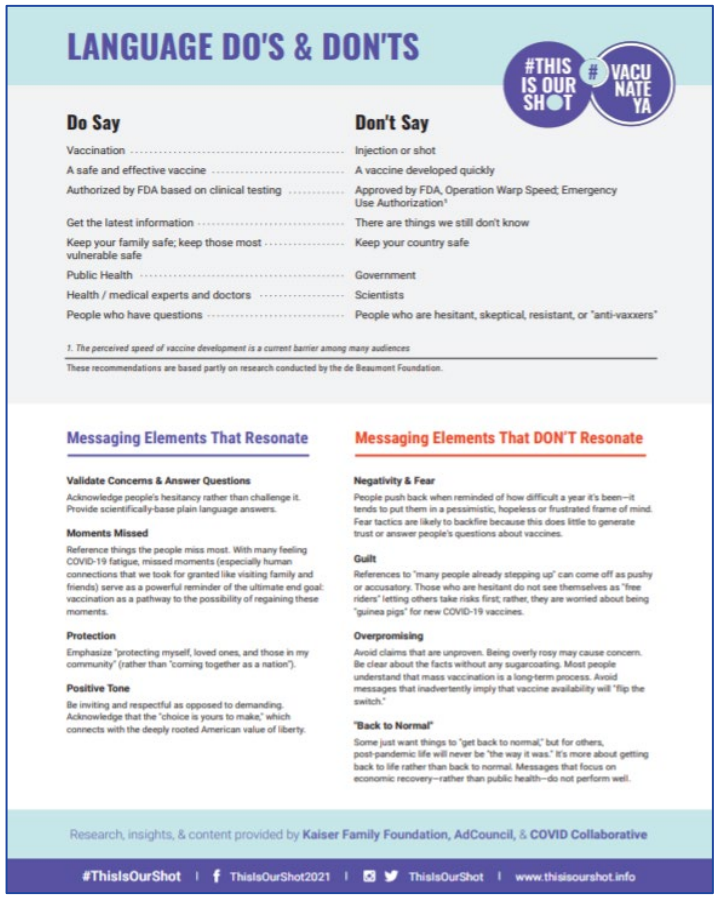
We acknowledge your ongoing efforts to protect children through vaccination. We appreciate your continued partnership in ensuring children and their families are safe and healthy.

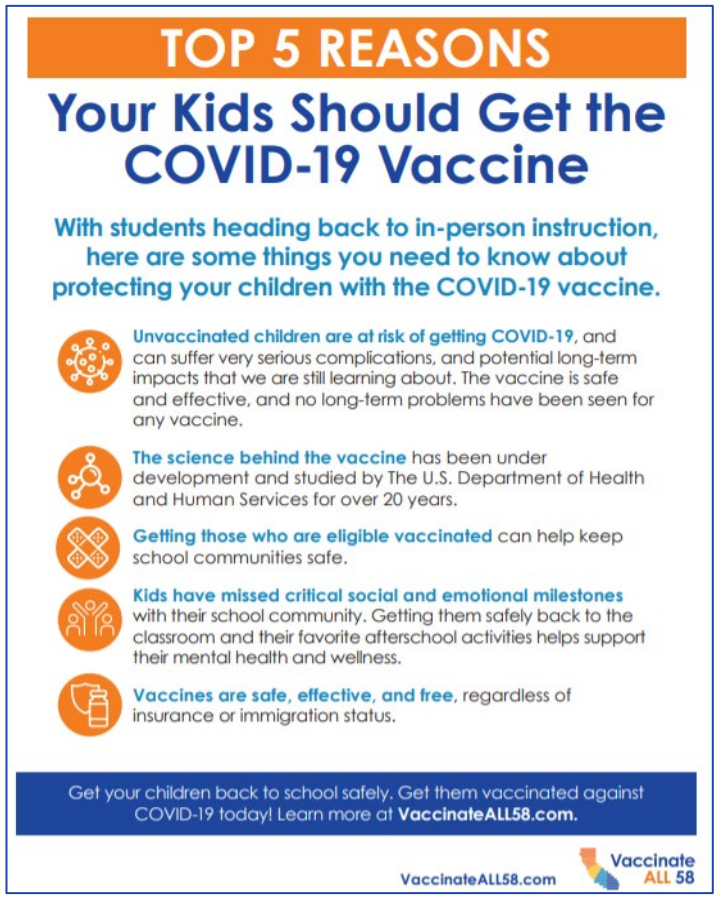
CDPH COVID-19 Pediatric Toolkit

Toolkits, Fliers, Conversation Guides, and Videos

[#ThisIsOurShot Toolkit]

[COVID-19 Crucial Conversations Campaign]





Resources

Join **#ThisIsOurShot / #VacunateYa** for newsletters about COVID-19 and vaccine-related talking points, and social media tips for physicians: https://thisisourshot.info/ / https://vacunateya.com/

Join **Shots Heard Round the World** to connect with a network of health professionals dedicated to combating online harassment of HCPs: https://shotsheard.org/

Health Defend is the evolution of these three programs. It is designed to educate, empower, equip, and defend healthcare professionals so they feel confident amplifying their trusted voice through social media. https://www.healthdefend.com/

COVID-19 Vaccine Support

Type of Support	Description	Updated 11.15.22
COVID-19 Provider Call Center	The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace. • Email: covidcallcenter@cdph.ca.gov • Phone: (833) 502-1245, Monday through Friday from 8AM–6PM
Enrollment Support	For Provider enrollment support, please contact myCAvax Clinic Operations at • Email: myCAvaxinfo@cdph.ca.gov
myCAvax Help Desk	Dedicated staff provide up-to-date information and technical support on the myCAvax system. • Email: myCAvax.HD@cdph.ca.gov • Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM For training opportunities: https://eziz.org/covid/education/
My Turn Clinic Help Desk	For **onboarding support** (those in the process of onboarding): myturnonboarding@cdph.ca.gov For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: mail to: MyTurn.Clinic.HD@cdph.ca.gov or (833) 502-1245, option 4: Monday through Friday 8AM–6PM For job aids, demos, and training opportunities: flu at https://eziz.org/covid/myturn/flu/ and COVID at https://eziz.org/covid/myturn/
Archived Communications	For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit • Website: EZIZ Archived Communications

Upcoming Opportunities

Thank you for joining today's webinar!

Monday

My Turn and myCAvax Office Hours

Next session: Monday, June 26, 12PM-1PM

Friday

Provider Consolidated Webinar

Next session: Friday, June 16, 9AM-10:30AM

Note: Session to include COVID-19 Vaccine and Therapeutics Updates

Special Thanks to

Today's Presenter:

Ilan Shapiro, MD, FAAP, FACHE

Webinar Planning & Support:

Tyler Janzen, Laura Lagunez-Ndereba, Blanca Corona, Billie Dawn Greenblatt, Leslie Amani, Charles Roberts, Rachel Jacobs

Vaccinate ALL 58
Together we can end the pandemic.

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