Coronavirus Vaccination
Frequently Asked Questions
Jan. 7, 2021

Are there FDA-approved vaccines for COVID-19?

Yes, there are currently two vaccines approved by the U.S. Food and Drug Administration (FDA) to prevent COVID-19, the Pfizer-BioNTech vaccine and the Moderna vaccine. These vaccines were approved under FDA’s Emergency Use Authorization (EUA) process, which allows safe and effective medicines to be deployed on an accelerated schedule during a public health emergency such as the current COVID-19 pandemic. The Pfizer-BioNTech vaccine is approved for people over 16 years old, while the Moderna vaccine is approved for those over age 18. Vaccines approved under the EUA process are tested in tens of thousands of volunteer study participants and evaluated by an independent panel of experts under rigorous FDA standards for safety and effectiveness.\(^1\) Two additional vaccines are in large-scale clinical trials and may be approved at a later date.\(^2\)

Are the vaccines safe and effective?

By all accounts, the vaccines are safe and effective. The two approved vaccines are about 95% effective at protecting people from serious illness if they are infected with the virus that causes COVID-19.\(^3\) The vaccines are also demonstrated to be safe by the high standards set for vaccines. Nearly 73,000 individuals took part in clinical trials for the two vaccines. There were no deaths, and nobody reported severe illness following the vaccination.\(^4\) FDA reviewed two months’ worth of safety data in granting the EUA, which is the period in which safety issues typically would surface.\(^5\)

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Do people need two doses of vaccine to be immunized?

All but one of the vaccines that are approved or are in late stages of trials require two doses to be highly effective. The FDA does not recommend changes to protocols for administering vaccines to the public, although it does support clinical study of alternative dosing regimens.\textsuperscript{6}

Did the vaccine test population include Blacks, people of color and other groups that are more vulnerable to COVID?

Yes, the vaccines were tested on diverse populations and found to be safe and effective.\textsuperscript{7} Many Black Americans are justifiably wary of the medical establishment, because of a historic legacy of racism in health care, including carrying out unethical medical experiments on Black people, stealing their biological property for profit and disregarding their health needs.\textsuperscript{8} Still, it is especially critical that Blacks, Latinos and Native Americans receive the vaccine because many work at jobs that put them at additional risk to contract the virus and because these groups are at greater risk of death and serious illness from the disease.

Can I get COVID from the vaccine?

No. Unlike vaccines for other diseases, neither COVID vaccine contains any live virus. It is impossible to get COVID from the vaccine. The vaccines instead instruct your cells to create the signature “spike proteins” of the coronavirus, helping your immune system learn to recognize and fight the virus that causes COVID if you are infected.

Are there side effects to the COVID vaccine?

People taking the vaccine have reported mostly mild, temporary side effects, such as pain where they were injected, fatigue, and occasional fever, headache, or aching muscles and joints. When they occur, these side effects typically fade within a couple of days. Participants report that the side effects are more pronounced after the second injection. These are common side effects with all vaccines and indicate that the body’s immune system is developing protections from the virus.

In rare cases, individuals with severe allergies have experienced anaphylactic reactions to the vaccine. Those individuals were treated and recovered. Vaccine administration protocols calls for recipients to be observed after the injection and to be treated for an allergic reaction if it occurs. Health experts recommend that people who report allergies unrelated to vaccines be given a skin allergy test before receiving the vaccine, and people who have severe allergies to vaccines,

\textsuperscript{8} Michele Norris, Black people are justifiably wary of a vaccine. Their trust must be earned. Washington Post, Dec. 9, 2020, https://www.washingtonpost.com/opinions/black-people-are-justifiably-wary-of-a-vaccine-their-trust-must-be-earned/2020/12/09/4cf5f18c-3a36-11eb-9276-ae0ca7279be_story.html.
medicines or food should not get a vaccine at this time. Ask your doctor if it’s appropriate for you to get a vaccine, given your individual health circumstances.⁹

Should people who recovered from COVID-19 get the vaccine?

Researchers are not certain how long people retain natural immunity after recovering from the illness. Therefore, health experts recommend that people who have had COVID-19 should get a vaccine, but should wait 90 days after their diagnosis.¹⁰ Vaccine trials of participants who have recovered from COVID-19 show that the vaccine is safe in those who were previously infected.¹¹

Can people who are vaccinated still spread the virus?

While we know that the vaccines are highly effective in preventing COVID-19 in those who are infected with the virus, we don’t yet know whether the vaccines prevent people from spreading the virus to others. Further study is needed to determine the vaccines’ effectiveness in this respect.¹² That’s why we need to continue to practice public health measures like wearing masks and maintaining physical distancing where possible until a high enough proportion of the public is vaccinated to stop significant spread of the virus.

How are vaccines being distributed to the public? Who will receive the vaccine first?

Vaccine distribution is a joint federal, state and local effort. Each state was sent an initial shipment of the vaccine. It is up to state and local health officials to administer those vaccines to the public. While the Centers for Disease Control (CDC) recommends who should receive the vaccine first, it is up to individual states to decide priorities for distribution. CDC advises that states offer the first available vaccines to health care personnel and residents of long-term care facilities, followed by frontline essential workers including first responders, public safety workers including corrections officers, and individuals over 75 years old.¹³

Can employers mandate that their workers take the vaccine?

In many cases, employers in non-union workplaces can require their employees to take the vaccine. Employees working under union contracts have rights to challenge vaccine mandates or to demand to bargain over impacts of a mandate. Workers with a disability or a health condition may request

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a mandate exemption under the Americans with Disabilities Act, and employees with religious objections have rights to refuse vaccines protected by the EEOC. These rights are limited, however. If the employer can show that a worker’s refusal to be vaccinated causes an undue burden or pose a direct threat in the workplace.14

Lawmakers in some states are considering restricting vaccine mandates. Legislation that would ban or limit vaccine mandates has been filed in Kentucky, Louisiana, Minnesota, Missouri, New Jersey, New York, South Carolina, Tennessee, Virginia and Washington state. A Florida bill would bar the state or local governments from mandating the vaccine. A competing proposal in New York would make the Covid-19 vaccine mandatory statewide. Oregon already bars health care employers from mandating vaccines.15

Most employers have signaled a preference to educate and encourage employees to voluntarily take the vaccine rather than mandate it. AFSCME supports employers’ efforts to educate workers about the vaccine and works cooperatively with employers to maximize voluntary participation in vaccination efforts.

**How many people need to be immunized for us to resume normal life?**

Public health experts are not yet certain at what point we have enough people immunized from COVID-19, also known as herd immunity, to stop widespread transmission of the virus through the community. Herd immunity is a term used to describe when enough people have protection that it is unlikely a virus can spread and cause disease. Researchers are studying the virus to establish an immunization target. Until then, it is critical that we continue public health measures such as mask wearing and maintaining physical distance where possible.

**Are the vaccines still effective in recent mutations to the virus?**

Researchers believe the vaccines in use today remain effective in current mutations of the virus, including the U.K. variant that reportedly is up to 70% more transmissible. Scientists continue to monitor the virus for any future changes that might impair the vaccines’ effectiveness. The alarming increase in transmissibility in the U.K. variant underscores the urgency of vaccinating as many people as possible, so that we can stop its spread before more people get sick.16

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