What Retirees Need to Know About the Covid-19 Vaccine
Frequently Asked Questions

Are all retirees eligible for the COVID-19 vaccine?

Vaccine eligibility for older adults varies by state. In some states, like New York, older adults who are 65 and older are at the top of the list for receiving the vaccine, while in other states, older adults are only eligible when they are 70, 75 or in some cases, 80 and older.¹

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. 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.² Johnson & Johnson submitted an EUA to the FDA on Feb. 4, 2021 for its single-dose COVID-19 vaccine. Officials will review the submitted data, compile a report, and submit the report to an independent vaccine advisory committee. The committee will meet on Feb. 26 and make their recommendation, which means that the FDA could approve the Johnson & Johnson vaccine by the end of February.³

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-19.⁴ 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. About 21% and 25% of vaccine study participants in the Pfizer-BioNTech and Moderna studies, respectively, were 65 years of age or older. There were no deaths, and nobody reported severe illness following the

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vaccination. The FDA reviewed two months’ worth of safety data in granting the EUA, which is the period in which safety issues typically would surface.

**Have the vaccines been rushed?**

The vaccines’ safety trials and the authorization process are guided by science. The FDA has not lowered their standards for these vaccines. The vaccine trials have held the same scientific standards as other vaccines that have been authorized for use. In addition to completing all three phases of study, the Vaccine and Related Biological Products Advisory Committee (VRBPAC) reviews all the trial data and makes a recommendation to the FDA to authorize the vaccine for emergency use. Then a medical advisory committee, the Advisory Committee on Immunization Practices (ACIP), provides recommendations to the Centers for Disease Control and Prevention (CDC) on how to safely use authorized vaccines. For decades, researchers have been working with mRNA vaccines like the Pfizer-BioNTech and Moderna vaccines. One of the benefits of these new mRNA vaccines is that they can be produced more quickly. Lastly, the federal government has funded vaccine manufacturers to produce the vaccines while they were being studied for safety and efficacy.

**Do people need two doses of vaccine to be immunized?**

The currently approved Pfizer-BioNTech and Moderna vaccines both 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. The Johnson & Johnson vaccine, which is currently before the FDA for Emergency Use Authorization, requires only one dose.

**How long will it take for the vaccine to start working?**

It typically takes a few weeks after vaccination for the body to build protection against the virus that causes COVID-19. With both the Pfizer-BioNTech and Moderna vaccines, peak protection comes after the required second dose. For example, the Moderna vaccine measured 94% efficacy in clinical trials two weeks after the second dose.

**Did the vaccine test population include African Americans and other people of color, as well as other groups that are more vulnerable to COVID-19?**

Yes, the vaccines were tested on diverse populations and found to be safe and effective. Many African 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 African Americans.

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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-ae0ca72729be_story.html](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-ae0ca72729be_story.html)
Americans, stealing their biological property for profit and disregarding their health needs. Still, it is especially critical that African Americans, Latinos and Native Americans receive the vaccine because these groups are at greater risk of death and serious illness from the disease.

Can I get COVID-19 from the vaccine?

No. Unlike vaccines for other diseases, neither COVID-19 vaccine contains any live virus. It is impossible to get COVID-19 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-19 if you are infected.

Are there side effects to the COVID-19 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 call for recipients to be observed after the injection and to be treated for an allergic reaction if it occurs. People will allergies are monitored for 30 minutes after vaccination and 15 minutes for everyone else. 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, 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.

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. Vaccine trials of participants who have recovered from COVID-19 show that the vaccine is safe in those who were previously infected.

Do I still need to wear a mask and socially distance after I get my vaccine?

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

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9 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-ae0ca72729be_story.html


the virus to others. Further study is needed to determine the vaccines’ effectiveness in this respect. That is 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.

Can I visit my family and friends after I get my vaccine?

Even after you are vaccinated you could still pose a health risk to unvaccinated family and friends. Because of this, continue to follow safety precautions such as wearing masks and socially distancing. The risks of serious illness from COVID-19 are highest for unvaccinated people who are older.

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.

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.

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.