



POSITION STATEMENT ON COVID-19 VACCINES FOR CHILDREN AND TEENS

WHEREAS, according to the Ohio Department of Education, 2020-2021 assessment scores were generally lower than past years, especially for Black, Hispanic, and economically disadvantaged students. The decrease in the rate of fall third grade proficiency generally was more marked among students learning in districts using a fully remote education delivery model. These preliminary data suggest the state's most vulnerable students generally also have been most affected.

WHEREAS, according to the Centers for Disease Control and Prevention (CDC), variants of the COVID-19 virus have been documented in the United States and some of these variations allow the virus to spread more easily or make it more resistant to treatments or vaccines. One of these variants (B.1.617.2 or "Delta") was first detected in the United States in March 2021 and was initially identified in India in December 2020. These variants seem to spread more easily and quickly than other variants, which may lead to more cases of COVID-19. An increase in the number of cases will put more strain on healthcare resources, lead to more hospitalizations, and potentially more deaths.

WHEREAS, the Ohio Department of Education states that, "The time a child spends in school is precious and should ensure all aspects of a child's well-being are addressed, including the physical, social, emotional and intellectual aspects. Ensuring Ohio students are in school every day is a crucial first step". The potential increase in illness and absenteeism may exacerbate learning loss already suffered during the 2020-2021 school year and complicate the coming school year.

WHEREAS, according to the CDC, although fewer children have been infected with COVID-19 compared to adults, children can be infected with the virus that causes COVID-19, get sick, and spread the virus to others.

WHEREAS, according to the CDC and the American Academy of Pediatrics (AAP), COVID-19 vaccines are safe and effective (including against the currently circulating variants) and have been used under the most intensive safety monitoring in U.S. history, which includes studies in children and adolescents.

WHEREAS, the AAP, the Ohio Department of Health (ODH), and the National Association of School Nurses (NASN) recommend that any COVID-19 vaccine authorized through Emergency Use Authorization by the FDA, recommended by the CDC, and appropriate by age and health status can be used for COVID-19 vaccination in children and adolescents.

WHEREAS, the AAP supports co-administration of routine childhood and adolescent immunizations, including COVID-19 vaccines, (or vaccination in the days before or after) for children and adolescents who are behind on or due for immunizations (based on the CDC/AAP Recommended Child and Adolescent Immunization Schedule) and/or at increased risk from vaccine-preventable diseases.



WHEREAS, the National PTA has a strong history of advocating for vaccination for children as it is proven to be an effective tool in preventing disease. Those who do not get vaccinated are put at risk, and because the SARS-CoV-2 virus is highly contagious, entire communities can be affected. The National PTA is committed to educating families and communities on the importance of early vaccination as well as taking action to ensure all children are protected.

WHEREAS, since 1908, National PTA has devoted great energy to halting the spread of diseases and improving other health conditions that have affected children. Beginning in 1925, PTA was a driving force behind providing check-ups to identify health problems in 5- to 6-year-olds entering school for the first time. This became the main vehicle for immunizing children against diseases. The effort grew into a program through which PTA introduced parents to the practice of getting their children periodic health examinations from birth onward as well as worked with community health agencies to provide necessary services. In 1976, PTA volunteers adopted a resolution on immunization of preschool children, and in 1990, a related resolution was adopted on measles, mumps, and rubella vaccination.

NOW, THEREFORE, BE IT RESOLVED that the Ohio PTA encourages school districts, PTA councils, and local PTA units to:

- Disseminate information to families concerning the importance and necessity of COVID-19 vaccination for eligible children, adolescents, and adults (even for those who have already had COVID-19),
- Provide information to help families obtain vaccinations locally for all children, adolescents, and adults,
- Support the efforts of schools to enforce immunization laws,
- Conduct activities in support of an immunization awareness program,
- Require unvaccinated adults and children to wear masks that cover the mouth and nose when indoors (at least until all ages are eligible for COVID-19 vaccination),
- Promote frequent hand washing with soap and water (or with alcohol-based hand sanitizer if soap and water are not available),
- Work to assess and reduce COVID-19 racial and ethnic health disparities,
- Encourage adults, adolescents, and children to stay home from school if sick,
- Promote partnerships and collaboration with local health departments and other community stakeholders,
- Follow all local, state, and national public health mandates and recommendations.

RESOLVED that effective stakeholder engagement must be inclusive, transparent, provide multiple opportunities for input and include meaningful, clear, and concise communication. All information and protocols should be disseminated to parents, families, students, and communities, using current best practices for family and student engagement. Furthermore, all communication must be accessible to parents with disabilities, culturally appropriate, and available in the languages spoken within the community served.



RESOLVED that as recommendations change with evolving science, research, and viral variations, the Ohio PTA supports and encourages local school districts, PTA units, and councils to follow and support the CDC's current "Guidance for COVID-19 Prevention in Kindergarten (K)-12 Schools". Any areas in which discretion is permissible or areas in which schools choose to deviate from these recommendations should be thoroughly discussed and communicated with local health department leaders, school administration, staff, and parent groups.

RESOLVED that a copy of this Resolution be forwarded to all Ohio state legislators, the Superintendent of Public Instruction, the Ohio Department of Health, and the Governor of Ohio immediately.

Jackie Arendt
President, Ohio Parents & Teachers Association

Adopted at Ohio PTA Board of Directors meeting, July 2021