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April 21, 2021

President Joseph R. Biden
The White House
1600 Pennsylvania Avenue NW
Washington, D.C. 20500

Honorable Xavier Becerra
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, D.C. 20201

White House COVID-19 Response Team
The White House
1600 Pennsylvania Avenue NW
Washington, D.C. 20500

Dear President Biden, Secretary Becerra, and White House COVID-19 Response Team,

I am writing from First Focus on Children, a bipartisan children's advocacy organization dedicated to making children and families a priority in federal budget and policy decisions, to urge you to create a plan for getting children of all ages vaccinated against COVID-19 as expeditiously, efficiently, and effectively as possible. Children have suffered immeasurably during the COVID-19 crisis, and we must work tirelessly to ensure that they are protected as soon as possible.

Children have carried some of the heaviest burdens during this pandemic, and it is time for us to stand up for them to ensure that they are able to benefit from the solutions to the pandemic, including a safe and effective vaccine. Children have acutely felt the impacts of the COVID-19 pandemic and resulting economic crisis. Nearly all aspects of children's lives have been upended by these dual crises, from school and child care closures where one in four child care providers remains closed due to COVID-19¹; increases in mental health needs where mental health-related emergency room visits for children went up by up to 31 percent last year²; up to 43,000 children having lost a parent to COVID-19 so far in this epidemic³; more children living in poverty; and increasing numbers of children going hungry. Thank you for the unprecedented efforts and funding included in the American Rescue Plan to address some of these very needs for children. We know these are priorities for this administration, and we look forward to

¹ Leonhardt, Megan. *Over 1 in 4 child-care providers nationwide still remain closed*. CNBC, Dec. 30, 2020. <https://www.cnbc.com/2020/12/30/many-child-care-centers-nationwide-still-remain-closed.html>

² Leeb RT, Bitsko RH, Radhakrishnan L, Martinez P, Njai R, Holland KM. *Mental Health-Related Emergency Department Visits Among Children Aged <18 Years During the COVID-19 Pandemic — United States, January 1–October 17, 2020*. MMWR Morbidity and Mortality Weekly Report 2020;69:1675–1680. https://www.cdc.gov/mmwr/volumes/69/wr/mm6945a3.htm?s_cid=mm6945a3_w

³ Kidman, Rachel et al. *Estimates and Projections of COVID-19 and Parental Death in the US*. JAMA Pediatrics, April 5, 2021. <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2778229?>

seeing the implementation of your efforts. We now must ensure that we build upon these investments as we turn toward vaccinating all children.

Twenty percent of adults say either that they will only get vaccinated if they are required to, or that they will “definitely not” get vaccinated, which represents an improvement in rates, although it is still too low.⁴ We need to reach 70-90 percent vaccination of our country’s population in order to reach herd immunity.⁵ Children make up nearly one-quarter of our population, so simple math says that we cannot reach herd immunity without them. Clinical trials are currently underway for children six months of age and older for the Moderna and Pfizer-BioNTech vaccines, which is encouraging news. Next, we need the federal government to devise a plan specific to children and their needs that will allow them to effectively receive the vaccine after the data proves it to be safe and effective in children.

Some of the challenges of vaccinating children with a safe and effective COVID-19 vaccine will look very different from the current challenges we face in vaccinating adults, and we therefore need a plan tailored to children. These challenges include distribution methods and locations in order to reach all children, vaccine-hesitant caregivers, racial inequities in vaccine distribution and use, and the perception that COVID-19 does not affect children. Our efforts addressing the challenges in vaccinating children must include adequate and planned funding, an effective distribution process, and a public education campaign.

Funding

Just as the American Rescue Plan set aside specific funding for vaccines and vaccine distribution for adults, the administration and Congress must plan now for funding needed to make a unique plan for children accessing vaccines. We cannot wait to do this. We will need significant funding to get children vaccinated against COVID-19 and we must plan for that now. A portion of funds in the American Rescue Plan should be set aside specifically for the purpose of designing and implementing a plan to vaccinate children.

Distribution

We must meet children where they are. That means some will get vaccinated in their medical provider’s office, but not all will. The Vaccines for Children program is an effective tool for increasing vaccination rates in children, but it alone cannot reach all children. The administration must make a plan, as it has for adults, to make vaccines available in a variety of places where children spend their time and where vaccine providers can access them. These locations might include child care providers, schools, community health centers, recreation centers, youth sports venues, and others. This distribution plan must also take into account reaching children with disabilities and chronic conditions, as well as children in congregate care and juvenile detention settings.

Public Education and Outreach Campaign

A public education campaign tailored to caregivers and children must address the numerous challenges in getting children vaccinated. Such a campaign must include reaching out to all populations, including immigrant children and children of immigrants. The campaign must be translated into the top 15 non-English languages spoken in each state. The campaign should include diverse representation of

⁴ Huetteman, Emmarie. *Covid Vaccine Hesitancy Drops Among All Americans, New Survey Shows*. Kaiser Health News, March 30, 2021. <https://khn.org/news/article/covid-vaccine-hesitancy-drops-among-americans-new-kff-survey-shows/>

⁵ Allen, Jonathan & Dan Whitcomb. *Americans celebrate Christmas Eve under spiraling COVID pandemic*. Reuters, Dec 24, 2020. <https://www.reuters.com/article/health-coronavirus-usa/fauci-says-herd-immunity-could-require-nearly-90-to-get-coronavirus-vaccine-idUSL1N2J411V>

community leaders trusted by parents, grandparents, and caregivers. Some of the challenges the public education and outreach campaign will have to address are summarized below.

Perception that children are not impacted by COVID-19

The story of COVID-19 has long been that it does not affect children. We believe that it has in innumerable ways, including children's health. As of April 1, 2021, nearly 3.5 million children have tested positive for COVID-19, and 284 have died due to the virus.⁶ This is an undercount, as not all states report this data and in the same ways, and the child share of overall COVID-19 cases in this country is on the rise. That is 284 preventable deaths and 284 families in unspeakable pain. Children have been susceptible to Multisystem Inflammatory Syndrome in Children (MIS-C), and 75 percent of children with this illness did not experience any COVID-19 symptoms at the time of infection.⁷ This misconception will also have to be addressed by the public education and outreach campaign.

Vaccine-hesitant caregivers

A recent survey shows that 70 percent of parents plan to get vaccinated, while only 58 percent plan to vaccinate their children.⁸ This hesitancy is due to a number of factors, some of which include concerns about how new COVID-19 vaccines are, historic racism in health care, and parents who are opposed to giving their children vaccines of all kinds. The administration must find ways to mitigate this hesitancy including through public messaging campaigns and deploying leaders from different communities to share information about vaccine safety through listening sessions and other public settings.

Combating racism and its effects

Historic and current racism results in disparities in health outcomes. For instance, in children 14 years of age and younger, Black children are 2.5 times more likely to die from COVID-19 than white children, and Hispanic children are nearly three times more likely to die from COVID-19 than white children.⁹ A report from the Centers for Disease Control and Prevention found that although American Indian/Alaskan Native, Black, and Hispanic children make up 41 percent of the child population in the United States, they accounted for 78 percent of COVID-19-related deaths in children.¹⁰ The decline in children's health insurance coverage in the last three years may have contributed to some of these deaths as children went without health coverage and Hispanic children lost coverage at the highest rate.^{11,12} Immigrant families are still uncertain about accessing health care due to the threat of public charge in recent years, which must also be addressed. The administration must work to overcome these disparities by deploying local

⁶ *Children and COVID-19: State Data Report*. American Academy of Pediatrics and the Children's Hospital Association, April 1, 2021. <https://downloads.aap.org/AAP/PDF/AAP%20and%20CHA%20-%20Children%20and%20COVID-19%20State%20Data%20Report%204.1.21%20FINAL.pdf>

⁷ Belluck, Pam. *Many Children With Serious Inflammatory Syndrome Had No Covid Symptoms*. The New York Times, April 6, 2021. <https://www.nytimes.com/2021/04/06/health/covid-children-mis-c.html>

⁸ Robertson, Bethany & Adam Ukman. *First Look: Early Research on Parental Attitudes about the COVID-19 Vaccination and Children Identifies Gaps and Suggests Steps to Decrease Hesitancy*. ParentsTogether, March 31, 2021. https://parents-together.org/wp-content/uploads/2021/03/PT-Brief_-_Parental-Attitudes-about-COVID-19-Vaccine.pdf

⁹ *Understanding the Disparities Data*. The COVKID Project, updated March 18, 2021. <https://www.covkidproject.org/disparities>

¹⁰ Bixler D, Miller AD, Mattison CP, et al. *SARS-CoV-2–Associated Deaths Among Persons Aged <21 Years — United States*, February 12–July 31, 2020. *MMWR Morbidity and Mortality Weekly Report* 2020;69:1324–1329. https://www.cdc.gov/mmwr/volumes/69/wr/mm6937e4.htm?s_cid=mm6937e4_w

¹¹ Dorn, Stan & Rebecca Gordon. *The Catastrophic Cost of Uninsurance: COVID-19 Cases and Deaths Closely Tied to America's Health Coverage Gaps*. Families USA, 2021. https://www.familiesusa.org/wp-content/uploads/2021/03/COV-2021-64_Loss-of-Lives-Report.pdf

¹² Keisler-Starkey, Katherine & Lisa N. Bunch. *Health Insurance Coverage in the United States: 2019*. United States Census Bureau, Sept 2020. <https://www.census.gov/content/dam/Census/library/publications/2020/demo/p60-271.pdf>

community members to educate caregivers on COVID-19 vaccines and to build trust that may not currently exist. CDC recently announced a \$2.25 billion plan for a National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved Communities, Including Racial and Ethnic Minority Populations and Rural Communities. This plan and others that target racism in health care must include children and address the unique challenges they face in accessing health care, overcoming the social determinants of health, and disparities in health outcomes.

As states begin to loosen their COVID-19 restrictions and protections, more adults get vaccinated, and more social activities begin to return to pre-COVID-19 practices, unvaccinated children will be increasingly at risk. The administration must do everything in its power to foster the testing and distribution of safe and effective vaccines for children against COVID-19. Children have carried more burden over the last year during the COVID-19 epidemic than they should ever be asked to. We owe it to our children to protect them from this virus as quickly and effectively as possible, and we must plan now how to give them access to a vaccine once one has been approved for them. Thank you for prioritizing children and their specific needs during the COVID-19 epidemic, and we look forward to working with you to on this vital issue.

Sincerely,

A handwritten signature in blue ink that reads "Bruce Lesley". The signature is written in a cursive style with a large, stylized "L" and "y".

Bruce Lesley
President

Cc: U.S. Vice President Harris
U.S. Surgeon General Vivek Murthy
Dr. Marcella Nunez-Smith
Jeff Zients
Andy Slavitt