FAQ: The COVID-19 Vaccine and Continued Precautions

CASA programs, staff and volunteers in Texas face decisions regarding vaccination and continued protocols of protection during the COVID-19 pandemic. While each program makes their own determinations on these critical issues, Texas CASA offers the following FAQ with best practices. This FAQ is excerpted from the guidance offered by the Centers for Disease Control and Prevention and is accessible in full on the CDC website.

Do I still need to wear a mask and avoid close contact with others if I have received 2 doses of the vaccine?

Yes. While experts learn more about the protection that COVID-19 vaccines provide under real-life conditions, it will be important for everyone to continue using **all the tools** available to us to help stop this pandemic, like covering your mouth and nose with a mask, washing hands often, and staying at least 6 feet away from others. Together, COVID-19 vaccination and following CDC's recommendations for how to protect yourself and others will offer the best protection from getting and spreading COVID-19. Experts need to understand more about the protection that COVID-19 vaccines provide before deciding to change recommendations on steps everyone should take to slow the spread of the virus that causes COVID-19. Other factors, including how many people get vaccinated and how the virus is spreading in communities, will also affect this decision.

When can I stop wearing a mask and avoiding close contact with others after I have been vaccinated?

There is not enough information currently available to say if or when CDC will stop recommending that people wear masks and avoid close contact with others to help prevent the spread of the virus that causes COVID-19. Experts need to understand more about the protection that COVID-19 vaccines provide before making that decision. Other factors, including how many people get vaccinated and how the virus is spreading in communities, will also affect this decision.

If I have already had COVID-19 and recovered, do I still need to get vaccinated with a COVID-19 vaccine when it is available?

Stopping a pandemic requires using all the tools available. Vaccines work with your immune system so your body will be ready to fight the virus if you are exposed. Other steps, like covering your mouth and nose with a mask and staying at least 6 feet away from others, help reduce your chance of being exposed to the virus or spreading it to others. Together, COVID-19 vaccination and following CDC's recommendations to protect yourself and others will offer the best protection from COVID-19.

What can I do to protect myself from COVID-19 now, before a vaccine is available for my area or population?

You should cover your mouth and nose with a mask when around others, avoid close contact with people who are sick, stay 6 feet away from others, avoid crowds, and wash your hands often. Get more information about these and other steps you can take to protect yourself and others from COVID-19.

Why would a vaccine be needed if we can do other things, like social distancing and wearing masks, to prevent the virus that causes COVID-19 from spreading?

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Does immunity after getting COVID-19 last longer than protection from COVID-19 vaccines?

The protection someone gains from having an infection (called natural immunity) varies depending on the disease, and it varies from person to person. Since this virus is new, we don't know how long natural immunity might last. Current evidence suggests that reinfection with the virus that causes COVID-19 is uncommon in the 90 days after initial infection.

Regarding vaccination, we won't know how long immunity lasts until we have a vaccine and more data on how well it works.

Both natural immunity and vaccine-induced immunity are important aspects of COVID-19 that experts are trying to learn more about, and CDC will keep the public informed as new evidence becomes available.

Are children at risk of contracting COVID-19, and what are their health implications?

(The following information is from the CDC's page, "COVID-19 in Children and Teens." Visit it here for more details.)

Children and teens can get COVID-19. While fewer children have been sick with COVID-19 compared to adults, children can be infected with the virus that causes COVID-19, can get sick from COVID-19, and can spread the virus that causes COVID-19 to others. Children, like adults, who have COVID-19 but have no symptoms ("asymptomatic") can still spread the virus to others.

Most children with COVID-19 have mild symptoms or have no symptoms at all. However, some children can get severely ill from COVID-19. They might require hospitalization, intensive care, or a ventilator to help them breathe. In rare cases, they might die.

CDC and partners are investigating a rare but serious medical condition associated with COVID-19 in children called Multisystem Inflammatory Syndrome in Children (MIS-C). We do not yet know what causes MIS-C and who is at increased risk for developing it. Learn more about MIS-C.

Do babies contract COVID-19, and what are their health implications?

Babies under 1 year old might be more likely to have severe illness from COVID-19.

What are the COVID-19 risks for children with underlying medical conditions?

Children, regardless of age, with the following underlying medical conditions might also be at increased risk of severe illness compared to other children:

- Asthma or chronic lung disease
- Diabetes
- Genetic, neurologic, or metabolic conditions
- Sickle cell disease
- Heart disease since birth
- Immunosuppression (weakened immune system due to certain medical conditions or being on medications that weaken the immune system)
- Medical complexity (children with multiple chronic conditions that affect many parts of the body, or are dependent on technology and other significant supports for daily life)
- Obesity

This list does not include every underlying condition that might increase the risk for severe illness in children. As more information becomes available, CDC will continue to update and share information about risk for severe illness among children.

If your child has an underlying condition, make sure to discuss your child's potential for getting very sick with their healthcare provider. Symptoms of COVID-19 are similar in adults and children and can look like symptoms of other common illnesses such as colds, strep throat, or allergies.