HEALTH WORKER COMMUNICATION FOR COVID-19 VACCINATION

Flow diagram for communicating during COVID-19 vaccination sessions



*These steps can be carried out prior to the vaccination event, in-person or via virtual platform, at a group educational session, community meeting, or one-on-one interaction. These steps may need to be briefly repeated on the day of vaccination to affirm vaccination.

Before vaccination, pregnant women should be provided with information about:

- the risks of COVID-19 in pregnancy
- · the likely benefits of vaccination in the local epidemiologic context, and
- the current limitations of the safety data in pregnant women.

It is not necessary to conduct pregnancy testing prior to vaccination. There is **NO** need to delay or terminate pregnancy because of vaccination.

COMMONLY ASKED QUESTIONS AND KEY MESSAGES:

Are pregnant women at higher risk for complications of COVID-19?

- Pregnant women who get COVID-19 are more likely to have complications (e.g. admitted to intensive care, needing a machine to help them breath, etc.) compared to non-pregnant reproductive aged women.
- COVID-19 in pregnancy has also been associated with increased risk of pre-term birth and neo-natal intensive care.
- Pregnant women who are older (≥35 years) or have high body mass index (≥30), or an existing co-morbidity such as diabetes or hypertension, are at particular risk of serious outcomes of COVID-19.

Can COVID-19 vaccines harm babies in the womb?

- Pregnant and lactating women were not included in the initial clinical trials of COVID-19 vaccines, and long-term safety data are not yet available. However, studies are underway.
- The information we have so far shows that the vaccines do not have any negative effect on babies in the womb.
- They are not live vaccines, so they cannot infect either mother or baby with COVID-19.

Are COVID-19 vaccines recommended for pregnant women?

- WHO recommends the vaccination of pregnant women when the benefits outweigh the potential risks (e.g. pregnant women at high risk of exposure to COVID-19, or with comorbidities that place them in a high-risk group for severe COVID-19).
- Pregnant and lactating women were not included in the initial clinical trials of COVID-19 vaccines, and long-term safety data are not yet available. However, studies are underway.
- · Available data from animal studies have not shown harmful effects in pregnancy.
- Large numbers of pregnant women have chosen to be vaccinated in the USA, UK and other high- income countries. Safety surveillance has not found any pregnancy-related issues.
- Vaccination should protect pregnant women like everyone else. Vaccine effectiveness is likely to be comparable to non-pregnant women; initial studies show that immune responses following vaccination are similar.

Are COVID-19 vaccines recommended for lactating women?

- WHO recommends the vaccination of lactating women just like other adults (vaccine effectiveness and safety are expected to be similar).
- Breastfeeding has substantial benefits for both for babies and mothers.
- Currently there are no data on the safety of COVID-19 in lactating women or their breastfed infants. However, COVID-19 vaccines are unlikely to pose a risk to the breastfeeding infant.
- WHO recommends continuing breastfeeding after vaccination.

In what way will getting the COVID-19 vaccine help pregnant or lactating women?

• Since pregnant or lactating women may be at higher risk of exposure and/or severe disease (due to being a health worker or having a specific co-morbidity), choosing to get the vaccine will help protect them against COVID-19.