

## Bechara Choucair, MD, discusses the nation's vaccination strategy

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### Featured topic and speakers

In today's COVID-19 Update, AMA Chief Experience Officer Todd Unger talks with Bechara Choucair, MD, vaccinations coordinator on the White House COVID-19 Response Team in Washington, D.C., about the nation's vaccination strategy, including vaccine requirements, pediatric vaccination and boosters.

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### Speaker

- Bechara Choucair, MD, vaccinations coordinator, White House COVID-19 Response Team

### Transcript

**Unger:** Hello, this is the American Medical Association's COVID-19 Update Video and Podcast. Today I've got the honor of talking with Dr. Bechara Choucair, vaccinations coordinator on the White House COVID-19 Response Team in Washington, D.C., about the nation's vaccination efforts. I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Choucair, thank you so much for taking time out of, what I can't imagine, how busy your schedule is right now. I thought I'd just start off with a quick question. You bring to this role an enormous amount of experience with major health systems like Kaiser Permanente at Trinity as well as the Chicago Department of Public Health. What is it like to be in a role like this with such huge visibility, importance and impact right now with our nation?

**Dr. Choucair:** Well, thank you, Todd, for having me. I'm really excited to be part of this podcast here this morning. And let just start that I'm humbled to be able to be in this role at this moment in our

history at this moment and the response to the pandemic. In my experience, whether at big health care center systems like Kaiser Permanente or Trinity Health or at community health centers like Heartland Health Centers or Crusader Community Health or at Public Health, the Chicago Department of Public Health, I feel like it brings that intersection between public health and health care, and this is extremely important as we've learned again and again in the response to the pandemic. Bringing those two disciplines together is so critical so I'm privileged to have had the opportunity to work in both systems, the public health system and the health care system, and be able to bring all of this to public service with me.

**Unger:** Well, vaccination and particularly vaccination requirements have been a huge topic over the past couple of weeks. Let's begin with the recent announcement about new vaccination requirements for private sector workers. Can you talk about the rationale for this decision and some of the specifics?

**Dr. Choucair:** Well, what we know is that over the last several weeks and a few months actually thousands and thousands of businesses, Todd, have implemented vaccine requirements, whether they're businesses, health care organizations, universities. And what we've seen is, those vaccine requirements work. They get more and more people vaccine. Take United Airlines, for example. Now, they're at over 99% of their employees vaccinated. Tyson Foods, where over 96% of their employees are vaccinated and they didn't start there. They started in the mid-50s or high-50s. So we know vaccine requirements work. That's why part of the strategy that the president announced back in September was to direct the Department of Labor to issue these Emergency Temporary Standards, which it did last week, that requires businesses with 100 employees or more to ensure that every one of these employees is either vaccinated or is getting tested weekly.

And the Emergency Temporary Standards that were issued last week put January 4 as a deadline to give businesses enough time to be prepared to ensure that their employees are either vaccinated or starting to get tested on a weekly basis. We know vaccine requirements work. We've seen it from businesses that have already implemented that it will get more people vaccinated. And, on top of that, we also know based on some projections from Goldman Sachs and others that this is also good for the economy. A lot more people will feel more comfortable coming back into the workforce knowing that they'll be surrounded by people who are vaccinated. So, it's good for getting more people vaccinated, good for the economy and we know it works.

**Unger:** Absolutely. In the space of health care specifically, the administration also unveiled some new emergency regulations for health care workers. What do physicians need to know about that?

**Dr. Choucair:** Well, I have to start, Todd, by saying that we've already been seeing hospitals across the country and health systems across the country implement vaccine requirements before the president announced the policy to push for vaccine requirements for health care workers. We've seen thousands of hospitals, hundreds and hundreds of health systems implement vaccine requirements. We know this is not something new for the health care systems. I've practiced in many health care

systems throughout my career and vaccine requirements are part of the way we do business. It's good for patients. It's good for workers. It's good for everybody. We've seen that already happening with lots of health care systems, and now with the new CMS rule that was issued also last week, it requires now about 70,000 or so health care organizations or institutions across the country to make sure that their health care workforce is fully vaccinated.

There's no best out option for health care workers and we're seeing more and more health systems adopt those. This is going to cover about 17 million workers across the country and just like it is with the OSHA rule for businesses, private businesses, health care systems have until January 4 to get in compliance with this rule. The other thing I will add is to make it simpler for health care organizations to be able to adopt this rule. Health care organizations will only have to focus on the CMS rule. They don't have to worry about the contractors rules or the OSHA rule. They'll be covered by the CMS rule.

**Unger:** And how do these vaccine requirement announcements differ from other requirements that the administration has previously announced?

**Dr. Choucair:** Well, we already have requirements for federal workforce and federal contractors. So, for the federal workforce, now we're actually approaching to the deadline where all of our federal colleagues, federal employee colleagues, should be vaccinated and that would be November 22. Now, for contractors, this also will have the deadline of January 4. So federal employees, federal contractors are also covered by vaccine requirements.

**Unger:** All right, well, in another big and recent development, the U.S. expanded COVID vaccine eligibility by about 28 million people with the authorization of the Pfizer vaccine for the five to 11-year-old age group. How are you approaching vaccine distribution for this age group? And what lessons have you learned and are able to apply based on past distribution efforts?

**Dr. Choucair:** Well, let me just start, Todd, by saying what a monumental moment it is and what a sigh of relief it is for so many parents, for so many of us that now 28 million kids, ages five to 11 across the country are becoming eligible to get the vaccine. So we're really thrilled about that. And we've been preparing for this moment for weeks. We've been working with state government, local public health agencies. We're spending a lot of time, as you can imagine, with health systems, doctors, pediatricians, family physicians. They're critical for the vaccination efforts for five to 11. We're working with community health centers, with pharmacies, with schools to make sure they're also hosting vaccination clinics for kids five to 11.

We've been working on this distribution channel for a while. We've already shipped millions and millions of doses of the vaccines that are now at more than 20,000 locations across the country to make it as easy and as convenient for parents to get the vaccine. And we've learned a lot from the process for adults and adolescents, that we're taking all these lessons learned and we are already distributing doses. There are tons of kids that have already gotten vaccinated. We actually estimate

that by end of day on Wednesday, we would have had more than 900,000 kids have received their first shot. So we're really excited about the rollout and we know we still have a lot of work to do.

**Unger:** That's fantastic news. In terms of learnings, transport yourself back to the original rollout of the vaccine and I think there were some equity concerns, especially when there's a more reliance on these mass vaccination centers, how have you addressed equity challenges in pediatric distribution?

**Dr. Choucair:** Well, I'll start by saying that equity has always, always, always has been at the center of our vaccination effort from day one and it's also at the center for our effort for pediatrics. So we are focusing big time on community health centers, where we know 60% plus of people who receive care at community health centers are people of color, about 90% live below 200% of the federal poverty level. So community health centers across the country are always prioritized. They can access vaccines through the state but they can also access vaccines directly through the federal government. And we're always supporting community health centers across the country to be able to deliver vaccines.

We're also working with rural health clinics, rural hospitals to make sure access to rural communities is there and we continue to build on all of our efforts that we've done for adults, mobile clinics, pop-up clinics, partnering with faith-based organizations, partnering with community based organizations that are trusted in the communities. All of those efforts make a big, big difference when it comes to equity. And, look, we know that this worked for adults. You look at vaccination rates for adults amongst different racial and ethnic groups, and they're pretty much comparable. So we were able to close the gap for adults and we're going to do as well as we can and as good as we can to make sure that there's no disparities in vaccinations when it comes to kids five to 11.

**Unger:** It is incredible how much we've learned over the past year and a half and how you have translated that into plans for distribution for this new group. We have a couple of specific questions that we had bubble up from physicians about the five to 11-year-old age group for you to answer. Number one, "I have an 11-year-old, maybe on the bubble between 11 and 12. Should I wait for my child to turn 12 before being vaccinated?"

**Dr. Choucair:** Well, the CDC recommends for kids five to 11 and 12 to 17 to get vaccinated as soon as possible. So I would encourage people to try to get their kids vaccinated as soon as they can. The Advisory Committee for Immunization Practices to the CDC had made some recommendations. CDC has issued some clinical recommendations as to what happens if a kid is at 11, what dose do they get? And then if they turn 12 for their second dose, what dose to get? So I feel like all of those have been taken care of. So my recommendation to everybody is just get your kid vaccinated as soon as you can. And, look, if you get the kid vaccinated the week of November 15, that means those kids will be fully protected by Christmas. So we'd want to make sure that we do everything we can to celebrate the holidays in the most safe, possible way.

**Unger:** Absolutely. Second question, concerns about myocarditis. Should parents be concerned about this when vaccinating their children?

**Dr. Choucair:** Well, couple of things I would start with. One, from the trials that we've seen for the kids five to 11, we have seen no cases of myocarditis. Now, obviously, in the trials, there weren't millions and millions of kids who were vaccinated so we have to be careful about that. Now, what we also know is that the rate of myocarditis in kids ages five to 11 is lower, significantly lower, than it is for older adolescents or young adults. So we already know that the baseline cases of myocarditis is low. Now, when you look at older adolescents and young men, we know the rate of myocarditis as a result of the vaccine is also extremely rare. And what we know is, when it happens, it's fairly mild and it usually resolves on its own, in most instances with minimal or no clinical intervention.

So, again, we haven't seen myocarditis in the trial. The rate of myocarditis in kids five to 11 is much low anyway, the baseline rate, than it is for older adolescents or young men. And in that group, the older adolescents and young men, it's extremely rare to get those cases of myocarditis. So I feel like I would fully support and stand behind the CDC and the FDA recommendations that those vaccines are very safe, extremely effective for kids five to 11 and it's recommended for everybody to get them.

**Unger:** That data is so important. Thank you for that clarification. With this age group, again, this is a huge milestone for us, how do you expect this latest authorization to affect overall vaccination rates? You talked a little bit about how many folks in that five to 11-year-old age group have gotten their first shot. We don't really talk about herd immunity, at least I don't hear that as much anymore but is there a magic vaccination percentage that we need to reach to consider moving from pandemic to endemic?

**Dr. Choucair:** Well, look, the herd immunity question is a complex question, as you can imagine, and the way we've been thinking about it now is we'd want to make sure that we're getting as many people protected as possible and that begins by making sure that everyone who's eligible is getting vaccinated. And we've made tremendous progress as a country. We've administered more than 425 million shots of the vaccine. We have more than 80% of adults with at least one shot. We have nearly half of 12 to 17 fully vaccinated and we're starting with a good start with a good program for kids five to 11. We have to do everything we can to protect as many people as we can.

Now, the data are very clear, if you're unvaccinated, you're five times more likely to catch the virus. You're 10 times more likely to end up in the hospital and you're 11 times more likely to die compared to someone who's vaccinated. So the more we get people vaccinated, the safer we are and that's what I tell people. Every time we have a shot in someone's arm, that's one more person that's protected, that's one more family that's safer and that's one more community that's taking one step closer for us to be able to put this pandemic behind us.

**Unger:** Well, absolutely, and as we think about, especially for the five to 11-year-old age group, one

of the biggest challenges that we expect is with parents, obviously, many of whom are already vaccinating themselves but might be hesitant to get their children vaccinated for variety of reasons. We have vaccine hesitancy that's plagued each stage of our vaccine roll out. How are you and the administration addressing hesitancy? Have you found anything to be particularly effective?

**Dr. Choucair:** Well, let me just start by saying, we know there are a lot of parents who have strong vaccine confidence and they want to get their kids vaccinated and they are getting their kids vaccinated. So we want to celebrate that and support them. At the same time, we know there are parents who still have questions and that is totally expected. Those are all legitimate questions and we want to make sure we're doing everything we can to provide answers to parents, give them facts, give them information. That's why the role of physicians is extremely important. That one-on-one conversation between a parent and their pediatrician or their family physician or their nurse practitioner, these conversations are so important to make sure that people are getting facts to their answers. At the same time, we're also working with trusted messengers. We know that people trust people they know. That's why as part of our COVID-19 Community Core, we have 16,000 or more ambassadors across the country who have now answers to a lot of these frequently asked questions. They're involved in answering questions. They're engaging with parents one-on-one.

We've been encouraging states and chapters of the American Academy of Pediatrics and family physicians and AMA chapters to host town hall events answering peoples' questions. Send information from your practice as a physician. There are lots and lots of opportunities that we're engaging in to be able to build vaccine confidence, including a pretty aggressive public education campaign that include earned media as well as paid media. And, look, I'll end by seeing this, back in January, the confidence level for adults in the vaccine was pretty much close to what we're seeing right now for parents' confidence in vaccines for five to 11. And today, we're at more 80% of adults have received one dose. So I have no doubt that with the same tactics that we've used for adults we'll be able to build vaccine confidence and we'll be able to get much higher rates of vaccination for kids five to 11.

**Unger:** Yeah, those are amazing numbers. What an accomplishment. Final question, President Biden has unveiled a six-pronged comprehensive national strategy that employs a science-based approach to curb this pandemic and hopefully save more lives in the months ahead. At the same time, of course, we are fighting misinformation, in many cases, have seen science come under attack and undermine our vaccination efforts. Do you have any final thoughts on how physicians, organizations like the AMA, and other leaders in science can collectively use their voices to help put this pandemic behind us?

**Dr. Choucair:** Well, let me just start by saying a big, huge, huge thank you to the AMA for the outstanding partnership that we've had with you over the last 10 months or so in making sure that factual information is out there, that your voices are there to lift up facts, lift up science so that we can

fight lots of the misinformation that's out there. So we all have a responsibility to play on that front. Individual level, at an individual level, before we forward information, let's make sure that we're checking the source and make sure it comes from respectable sources. Individual physicians, in your practices, make sure you have information available to your patient. Send out information to your patients by email, by mail, by text, whatever you think would be helpful to make sure that your patients are hearing from you directly.

We're encouraging physicians across the country to be really active on social media, active on their local media. We know how important local media is so we have held lots and lots of round table discussions with physicians across the country and I've encouraged them to be quoted in the paper, go do local radio interviews, TV interviews. All of those make a big, big difference. It's unfortunate the amount of misinformation that's out there and physicians and their staff have a huge role to play to be able to help fight this misinformation. And we're all in this together.

**Unger:** Yeah, we're doing everything at the AMA to create a platform to amplify physician voices and make sure they're heard. Dr. Choucair, I can't thank you enough for joining us today. That's it for today's COVID-19 Update. We'll be soon with another segment. For resources on COVID-19, visit [ama-assn.org/COVID-19](https://ama-assn.org/COVID-19). Thanks for joining us. Please take care.

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