When children 5 or older became eligible for the Pfizer-BioNTech mRNA COVID-19 vaccine, many parents jumped at the opportunity to get their kids vaccinated. But there is still an alarmingly low number of children who are fully vaccinated against COVID-19 in the U.S.

At this article’s deadline, more than one-quarter of the estimated 28 million American children 5–11 years old had received at least one dose of the Pfizer-BioNTech mRNA COVID-19 vaccine, according to data from the Centers for Disease Control and Prevention (CDC). For adolescents 12–17 years old, about 63% had received at least one dose.

With children as likely to be infected with SARS-CoV-2 as adults, they can get very sick from COVID-19, have both short- and long-term health complications from the disease and can spread the virus to others at home and in school, says the CDC. Additionally, children who get infected with SARS-CoV-2 can also develop multisystem inflammatory syndrome, which is a condition where different body parts become inflamed such as the heart, lungs, kidneys, brain, skin, eyes or gastrointestinal organs.

As parents grapple with the decision to get their children vaccinated against COVID-19, here are some strong points to consider carefully.

**Side effects of the vaccine are mild**

As with adults, the vaccine side effects were mild and self-limiting for children with the most common being a sore arm. Other side effects reported were redness and swelling,
fatigue, headache, muscle or joint pain, chills, fever, swollen lymph nodes, nausea and decreased appetite. Side effects typically occurred within two days after vaccination with most diminishing within two days.

Transmission among kids is worrisome
Although we know that children are at lower risk of severe illness or death from COVID-19 than adults, COVID-19 infections among kids have risen as schools reopened for in-person learning.

It’s the right thing to do
Getting children vaccinated is “the right thing to do because COVID-19 is bad,” said Luke Selby, MD, MS, a surgical oncologist in Kansas City. Even before Delta, and later Omicron, “we knew that when it infected kids, it wasn’t a free ride. And the longer you study something, the more information you get about it, and it came with long-term consequences for children.”

Booster dose provides greater protection
The emergency use authorization of boosters for 12–15-year-olds comes as the U.S. has seen a spike in pediatric hospitalizations driven by the COVID-19 Omicron variant. The broadened access to COVID-19 vaccine booster shots strengthens protection—especially against the Omicron variant—while posing minimal risk for this age group. The CDC also recommends that children 5–11 years old who have moderately or severely compromised immune systems get an additional primary dose of the Pfizer-BioNTech vaccine 28 days after completing their Pfizer-BioNTech two-dose primary series.

COVID-19 is a childhood illness
Children have had their lives upended by the COVID-19 pandemic with remote schooling, canceled play dates and disrupted routines. And while some parents were not initially worried about their children acquiring SARS-CoV-2, the landscape has changed and nearly 30% of COVID-19 cases are now in children.
Children can experience long COVID
While severe COVID-19 has been less common in younger children, they can experience long COVID and other complications. Children can experience persistent fatigue, headaches, sleep problems, trouble concentrating, muscle and joint pain, and cough even after mild COVID infections,” said Sandra A. Fryhofer, MD, a general internist in Atlanta. In fact, multisystem inflammatory syndrome has been most frequent in the 5–11 age group over the last year.

Protect the whole family
Just as getting immunized against influenza can help protect infants under 6 months old who are ineligible for that type of vaccination, receiving the COVID-19 vaccination can help protect younger family members.

The AMA has developed frequently-asked-questions documents on COVID-19 vaccination covering safety, allocation and distribution, administration and more. There are two FAQs, one designed to answer patients’ questions (PDF), and another to address physicians’ COVID-19 vaccine questions (PDF).