



COVID and VACCINE INFO SHEET

Deeper Than Water, Families for Justice as Healing, and Black & Pink Massachusetts worked with doctors and epidemiologists to get accurate information on COVID-19 and the vaccine to send to you so you make informed decisions about whether to vaccinate or not.

We know you are dealing with valid distrust of the prison system as well as real concerns about the medical industry's exploitation and experimentation on Black and Brown people and incarcerated people. ***We know you are trying your best to take care of yourself and make the best decision for your own body and wellbeing. Sending you love and solidarity from your community.***

How does the vaccine work?

The vaccine helps our bodies develop immunity to the virus that causes COVID-19 without us having to get the illness. **The vaccine does not give you the virus or any part of the virus.** The vaccine contains messenger RNA (mRNA), which is like a set of instructions for our cells to make a certain protein that appears on the outside of the coronavirus. The vaccine does not change a person's DNA. The protein does not mean you have the virus. The body destroys mRNA "instructions" from the vaccine once it makes the protein. The protein is what alerts the immune system and tells it how to fight the virus in the future. After you've been vaccinated, it takes a few weeks to work. This vaccine requires two shots, spaced one month apart. The first shot starts building protection, but two shots are needed to get full protection. Studies show that the Moderna vaccine is about 60-70% effective at protecting against COVID-19 after one shot and 95% effective after the second shot. It can take 4 weeks for the first shot to be effective.

Is there anything harmful in the ingredients of the vaccine?

The COVID-19 vaccine does not contain live coronavirus (or any viruses), microchips, tracer technology, fetal tissue, DNA, stem cells, mercury, aluminum, luciferase, pork products, or preservatives.

How was the vaccine tested? How do I know it was tested safely?

The science of mRNA is well established. The research for the COVID-19 vaccine was well funded and the bureaucracy was expedited. Each vaccine has gone through 3 phases of trials. The Moderna vaccine trials included 30,418 people and the Pfizer vaccine trials included 40,277 people, including representation across race, ethnicity, age, sex, and high-risk medical conditions (such as HIV, chronic lung disease, asthma, heart disease, and diabetes). Both vaccines have been tested through the same standard process that other vaccines have gone through. The vaccines have an emergency use agreement from the FDA which means that it has been reviewed and deemed safe for administration based on the best available evidence. Trial results have been published in one of the best peer-reviewed scientific journals: the New England Journal of Medicine.

How do we know the vaccine the DOC gives us is the real vaccine?

While there is no way to visually distinguish between a fake vaccine and the actual vaccine, it is in the best interest of prisons that incarcerated be given the real vaccine. Vaccines work best when most of the population has received them. Therefore, administering a fake vaccine to prisoners would make the vaccinations given to guards less effective, putting them at risk.

What are known side effects of the vaccines?

Some people have reported experiencing: pain and swelling at the injection site, muscle pain, joint pain, fever, chills, tiredness, and/or headache lasting between a few hours and a few days. These side effects are a result of the body's immune system learning to fight COVID-19. A very small number of the millions vaccinated so far have had severe allergic reactions that require immediate medical treatment. Most allergic reactions occur within 15 minutes of receiving the vaccine. Just like the virus, the vaccine is still new and scientists can't be certain that there aren't long term side effects, but the long term side effects of COVID-19 also pose an immediate risk.

Should I still get the vaccine if I have underlying conditions?

Yes, the vaccine has been approved for people with underlying conditions, including HIV, hepatitis C, heart disease, lung disease, diabetes, asthma, arthritis, autoimmune issues, and multiple sclerosis. If you have allergies not related to vaccines (like pets, foods, etc.) then the CDC recommends that you should get vaccinated. The vaccine doesn't contain eggs, preservatives, or latex. If you have had a history of allergies related to vaccines (including allergy to polyethylene glycol (PEG) or polysorbate), the CDC recommends that you do not get vaccinated.

Should I still get the vaccine if I've already had COVID-19?

If you've already had COVID-19, the Center for Disease Control (CDC) recommends that you still get vaccinated. Scientists don't know how long the protective antibodies created by having COVID-19 will last, but there is some evidence that people can get the virus again several months later. The vaccine should offer stronger protection. If you currently have COVID-19, you should wait to get vaccinated until it has been at least 2 weeks after your first symptoms and at least 24 hours since you've had any symptoms.

Can I still get COVID-19 after I've been vaccinated? Can I still transmit it to others?

After you've been vaccinated, it takes a few weeks for the vaccine to work. If others infect you before the vaccine has enough time to work, then you could still get COVID-19. But, if others infect you after the vaccine has had time to work, then you are unlikely to get COVID-19. It's possible for a person to get COVID-19 and spread it to others if they are exposed to the virus right before/after vaccination. Scientists still aren't sure if people can get asymptomatic cases of COVID-19 after vaccination. The COVID-19 vaccine protects you from getting seriously ill. It's still unclear the extent to which you could still pass the virus to others after you've been vaccinated. For this reason, the CDC asks that everyone continue with other precautions to slow the spread of COVID-19 to the best of your ability wherever you are - such as hand washing, masking, and social distancing, even after receiving two doses of vaccine.

GLOSSARY

Asymptomatic - when someone is infected with a disease, but doesn't show any outward signs that they have the virus. People who are asymptomatic can transmit the virus, even if they are not sick from it.

Protein - This is a basic building block of living things. While you may think of it in terms of building muscle, all cells are made up of proteins.

Epidemiologist - A scientist who studies health problems such as diseases, what causes them and how they spread and can be contained.

Antibodies - proteins made by your body to fight specific infections. Once your body has discovered a new pathogen (such as a virus or bacteria), your immune system begins to produce antibodies to fight the infection.

COVID-19 - COVID-19 is the illness that is caused by the SARS-CoV-2 virus. The virus is spread between people who are in close contact with one another. The most common symptoms are fever, cough, headaches, fatigue, muscle/body aches, loss of taste/smell, sore throat, nausea, and diarrhea. You may have heard “coronavirus” and “COVID-19” used interchangeably.

Coronavirus - a coronavirus is a specific subtype of virus. COVID-19 is a type of coronavirus.

Herd immunity - Herd immunity occurs when a virus can no longer spread because it keeps encountering people who are already immune to it (i.e., people who have antibodies against the virus, usually by vaccine). Most estimates suggest that the US will reach herd immunity when 60-70% of the population has built antibodies.