

Protecting American Indian and Alaska Native Families from Respiratory Syncytial Virus: A Toolkit for Tribal Home Visitors



February 2026



Disclaimer: The information and resources included in this toolkit are meant to supplement the incredible work Tribal home visitors and Early Head Start staff are already doing to improve the health and safety of American Indian Alaska Native (AI/AN) families. Any guidance presented is not meant to replace or supersede policies or protocols established by your governing agency.

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Background

Respiratory syncytial (sin-**SISH**-uhl) virus, or RSV, is a threat to the health and safety of AI/AN children and families. There is recent research showing AI/AN infants and toddlers are at increased risk of severe illness from RSV when compared to young children in the general United States (U.S.) population.^{i,ii} RSV immunization is an effective way to protect AI/AN families from severe disease, helping them to stay healthy and sustain their traditional way of life.ⁱⁱⁱ Because of this, the Centers for Disease Control and Prevention (CDC) seeks help from Tribal home visitors, Early Head Start staff, and home health workers to educate on and advocate for RSV immunization within AI/AN communities.



As a trusted voice within the AI/AN community, you have the power to advocate for RSV immunization and to share important RSV facts with participants, community elders, friends, and family members that could save lives.



Tribal home visitors and home health workers can use this toolkit to help communicate with AI/AN families about RSV immunization. This toolkit includes:



What You Need To Know About RSV

- Review information on RSV immunization choices for AI/AN families, including the RSV vaccine for pregnant women and RSV antibody for infants and young children.



RSV Communications Materials

- Printable resources such as FAQs, factsheets, and infographics made specifically for AI/AN families can be referenced or shared during participant visits.



What You and Your Participants Need to Know About RSV



What is RSV?

- Respiratory syncytial (sin-SISH-uhl) virus, or RSV, is a common virus that affects the lungs, usually causing mild, cold-like symptoms. However, it can cause severe illness for certain family members, especially young children and certain adults.
- RSV spreads through respiratory particles from coughs and sneezes or by touching surfaces contaminated with the virus.

RSV can lead to severe disease.

When is RSV season?

“RSV season” refers to the time of the year when the virus is most likely to spread within a community. In most areas of the U.S., this season starts in the fall, peaks in the winter, and ends in the spring. However, the timing and severity can vary based on your region’s climate. RSV season will likely differ for people living in:

- Alaska
- Guam
- Puerto Rico
- southern Florida
- U.S.-affiliated Pacific Islands
- U.S. Virgin Islands^{iv}

RSV season can vary by location.

Who is at risk?

Virtually all children get an RSV infection by the time they are two years old. Most of the time, RSV causes mild, cold-like symptoms. However, RSV can also lead to severe health conditions, especially for premature infants, infants younger than 12 months of age, some young children under the age of 2 years, some adults, and people with a weakened immune system.^{v,vi}

RSV was the leading cause of infant hospitalization in the U.S. before the introduction of RSV immunizations, resulting in 58,000 to 80,000 hospitalizations annually among children under five years of age.^{vii}

Recent studies show that some AI/AN infants experience higher RSV-related hospitalization rates and ICU admission rates when compared to other U.S. infants. Among AI/AN children under 24 months of age and living on Tribal lands, RSV hospitalization rates have been shown to be **4 to 10 times higher** than the rate in the general population.^x Underlying causes of higher hospitalizations among this group include lack of running water, multigenerational homes, and lack of air circulation during winter months.^{viii}

RSV disproportionately impacts AI/AN children.

RSV immunization can protect infants and young children from severe illness and hospitalization. There are two options to protect infants in their first RSV season.

AI/AN families have two ways to protect their infants and young children from severe RSV disease: **RSV vaccine for pregnant women** and **RSV antibody for infants and young children**. Most infants **will not** need protection from both the maternal RSV vaccine and an RSV antibody in their first season. Two RSV antibody products, nirsevimab and clesrovimab, are available for infants in their first season whose mothers did not receive the maternal RSV vaccine. RSV immunization with **nirsevimab only (not clesrovimab)** is recommended specifically for AI/AN children 8 through 19 months of age for their **second** RSV season, even if the mother received the RSV vaccine during pregnancy.

RSV Vaccine for Pregnant Women

The [Advisory Committee on Immunization Practices \(ACIP\)](#) recommends pregnant women receive a single dose of Pfizer's RSV vaccine **Abrysvo (uh-BRIZ-voH)** between weeks 32 and 36 of pregnancy. In most of the U.S., this vaccine is typically administered from September through January.

Abrysvo can be given with other vaccines and works by passing protective antibodies from the pregnant woman to the fetus to prevent severe RSV disease in infants.^{ix}



Encourage your pregnant participants to speak to their healthcare provider or Tribal physician about the maternal RSV vaccine.

You can also help calculate when exactly your pregnant participants needs to get the RSV vaccine to protect their child by counting 8 and 4 weeks back from the due date. This will identify the 32nd and 36th week range when the RSV vaccine should be administered.

How to Calculate RSV Vaccination Timeframe



Help calculate when your pregnant participant needs to get the RSV vaccine to protect her child.

Count 8 and 4 weeks back from the participant's due date. This will identify the 32nd and 36th week range when the RSV vaccine should be administered.



Week 32



Week 36

September						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Due Date

RSV Immunization for Infants and Young Children

ACIP recommends immunization with an infant RSV antibody for AI/AN children under 20 months old during their first two RSV seasons. It is best given just before the season starts but can be administered anytime during the season if not yet received.

Infant RSV antibody (nirsevimab or clesrovimab) helps prevent severe RSV illness but cannot treat existing RSV infection.^y Infants whose mothers received the RSV vaccine during pregnancy don't need to get infant RSV antibody for their first RSV season.

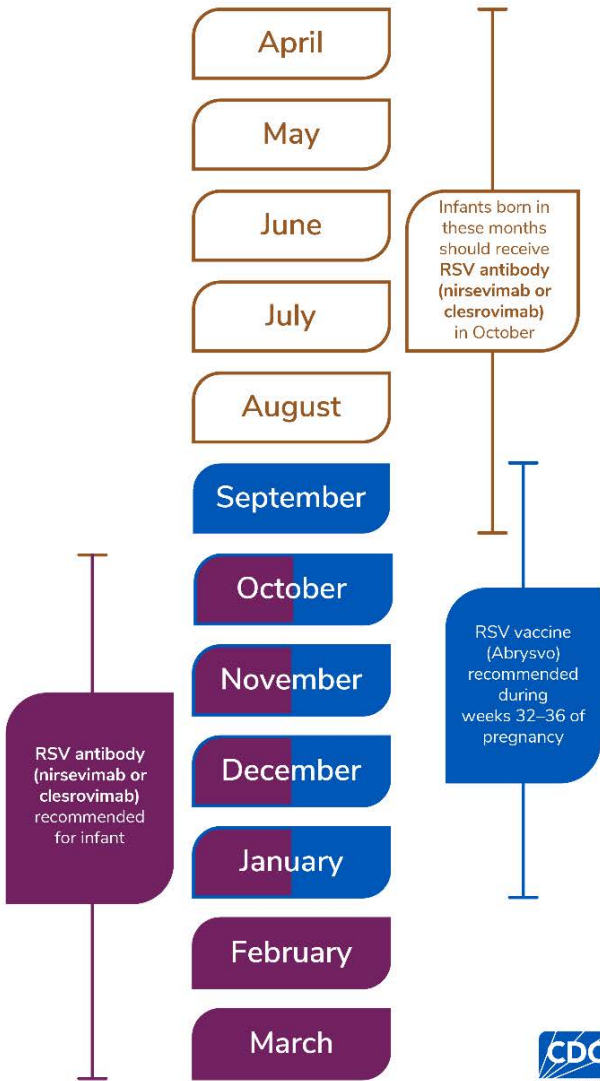
For their first RSV season, either nirsevimab or clesrovimab is recommended for all babies under 8 months of age if:

- The mother did not receive the RSV vaccine during pregnancy.
- The mother's RSV vaccination status is unknown.
- The infant was born within 14 days of the maternal RSV vaccination.^x

Nirsevimab or clesrovimab should be administered shortly before the RSV season begins, or within a baby's first week of life if born during the RSV season (ideally during the birth hospitalization).

For their second RSV season, nirsevimab is recommended specifically for AI/AN children 8 through 19 months of age, even if the mother received the RSV vaccine during pregnancy. Clesrovimab is not recommended for this group.

Timing of RSV Immunizations for Infants and Pregnant Women



Timing and severity of RSV season can vary based on your region's climate.

Talk to a provider for guidance on timing of administration.





Direct expecting parents to contact their healthcare provider or to visit their Tribal clinic or physician to determine which immunization option is best for their family.

Vaccine Access

To locate vaccination services, AI/AN families can use the Indian Health Service's "[Find Health Care](https://www.ihs.gov/findhealthcare/)"¹ map to locate an Indian Health Service, Tribal or Urban Indian Health Program facility.

To find health services outside the Indian Health Service, Tribal, or Urban Indian Health Programs, direct families to use the [HRSA Health Center](https://findahealthcenter.hrsa.gov/)² locator.

The RSV vaccine is also recommended for AI/AN adults.

The RSV vaccine recommended for pregnant women (Abrysvo) is one of three RSV vaccines available to adults to protect them against severe illness. CDC recommends a single dose of RSV vaccine for all adults 75 years of age and older, and adults 50 through 74 years of age and older who are at increased risk of severe RSV disease. Adults at highest risk for severe RSV disease include:

- Adults ages 75 and older
- Adults with chronic heart, lung, liver or severe kidney disease
- Adults with weakened immune systems
- Adults with certain other underlying medical conditions, including some adults with diabetes or obesity
- Adults living in nursing homes

¹ <https://www.ihs.gov/findhealthcare/>

² <https://findahealthcenter.hrsa.gov/>

RSV

Frequently Asked Questions (FAQ) for Tribal Home Visitors: Maternal RSV Vaccine (Abrysvo)

RSV stands for respiratory syncytial (sin-SISH-uhl) virus. It is a common virus that can cause severe respiratory illness in infants, toddlers, and some adults.



»» Individuals at risk:

? Who is at risk? Why are infants and toddlers (under 20 months of age) particularly vulnerable?

Anyone can be infected with RSV. However, infants, toddlers, and some adults often have weakened or underdeveloped immune systems that make them more vulnerable to the virus and at risk for severe illness. In addition, infants and toddlers under 20 months have narrow airways that easily get clogged with mucus, which can cause respiratory distress.

»» Maternal RSV Vaccine Overview:

? What is the maternal RSV vaccine, and how does it work?

The RSV vaccine (Abrysvo) is given to pregnant women to protect their infant from the virus. When pregnant women get the vaccine, they generate protective antibodies against RSV. These antibodies are transferred to their infant during pregnancy and will protect the infant in their first months of life if RSV is circulating in the community.

? What are the benefits of the maternal RSV vaccine?

The maternal RSV vaccine is given to pregnant women so their infant can be born with protective antibodies.

RSV

Frequently Asked Questions (FAQ) for Tribal Home Visitors: Maternal RSV Vaccine (Abrysvo)

Should pregnant women receive maternal RSV vaccination with each pregnancy?

If a pregnant woman has already received a maternal RSV vaccine during a previous pregnancy, CDC does not currently recommend getting another dose of RSV vaccine during subsequent pregnancies. Instead, the baby should receive RSV antibody (nirsevimab or clesrovimab).

What are the potential side effects of vaccination?

Similar to other vaccines, RSV immunization can have side effects. Most common side effects after RSV immunization are usually mild or moderate. There can be pain where the shot was given, headache, muscle pain, and nausea. If any other symptoms occur, be sure to contact your clinician.

»» Vaccination Options:

Which product is better – infant RSV antibody or maternal RSV vaccine?

CDC recommends all babies be protected from severe RSV during their first RSV season by **either** a maternal RSV vaccine given to the mother during pregnancy **or** an infant RSV antibody (nirsevimab or clesrovimab) given to the baby. Most babies do not need both. Pregnant women should talk to a healthcare provider about which choice is right for their family.

The RSV antibody nirsevimab is recommended for AI/AN children 8 through 19 months of age for their second season, even if the mother received the RSV vaccine during pregnancy.



RSV

Frequently Asked Questions (FAQ) for Tribal Home Visitors: Maternal RSV Vaccine (Abrysvo)

»» Timing and Access:

? When should mothers receive the maternal RSV vaccine?

Pregnant women should receive the vaccine between 32 and 36 weeks of pregnancy before or during RSV season.

? Where can I receive the maternal RSV vaccine while pregnant?

Pregnant women should inquire at nearby clinics about the availability of the RSV vaccine.

»» Additional Preventive Measures

Some other steps you can take to protect your infant or toddler from RSV infection are:

- Wash hands frequently with soap and water, especially before touching your child. Always have hand sanitizer ready in case soap and water are unavailable.
 - Ask all home visitors to wash their hands thoroughly with soap and water upon entering.
 - Provide hand sanitizer with at least 60% alcohol at the entrance for quick and easy use.
- Clean and disinfect surfaces frequently. This can include toys, doorknobs, countertops, etc.
- Avoid close contact with people who are sick. If possible, keep your child away from crowded places, especially during RSV season.
- To reduce the risk of infection, limit the number of visitors at any given time. Consider scheduling visits at different times to avoid overcrowding.
- If possible, request that visitors wear masks inside your home, especially if they have been around others who are sick or are unsure of their health status.

RSV

Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Immunization for Infants and Toddlers

RSV stands for respiratory syncytial (sin-SISH-uhl) virus. It is a common virus that can cause severe respiratory illness in infants, toddlers, and some adults.



»» Individuals at risk:

? Who is at risk? Why are infants and toddlers under 20 months of age particularly vulnerable?

Anyone can be infected with RSV. However, infants and toddlers often have weakened or underdeveloped immune systems that make them more vulnerable to the virus and at risk for severe illness. In addition, infants and toddlers under 20 months have narrow airways that easily get clogged with mucus, which can cause respiratory distress.

? What happens when an infant or toddler gets RSV?

- For infants and toddlers, RSV can lead to more severe respiratory symptoms such as difficulty breathing, severe coughing and wheezing. Depending on skin tone, lip, nail beds, and skin may appear pale, gray, or blue.
- Severe illness can develop including bronchiolitis (inflammation of the small airways in the lung) and pneumonia (infection of the lungs).
- Children will need to stay out of childcare until they are no longer ill and should stay away from other children and those with underlying health conditions.
- Each year in the U.S., an estimated 58,000-80,000 children younger than 5 years are hospitalized due to RSV infection.



RSV | Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Immunization for Infants and Toddlers

»» RSV Immunization Overview:

? What is the RSV immunization, and how does it work?

An RSV antibody is given to infants entering their first RSV season and some toddlers younger than 20 months entering their second RSV season. It strengthens their body to help fight RSV infection and prevent them from getting very sick.

? What are the benefits of the RSV immunization for infants and toddlers?

- Protection in the first months of life, when they are most vulnerable to infections, especially during the fall and winter seasons.
- Lower the risk of severe illness or hospitalization, both of which can cause strain on families.
- Peace of mind for parents and families, knowing they have taken the necessary steps to keep their child safe.

? What are the potential side effects of RSV immunization?

Vaccines and monoclonal antibody products, like any medicine, can have side effects. There can be redness, pain, hardness, or swelling where the shot was given, as well as rash. If any other symptoms occur, be sure to contact your clinician.

»» Vaccination Options:

? Which product is better – infant RSV antibody or maternal RSV vaccine?

CDC recommends all babies be protected from severe RSV during their first RSV season by **either** a maternal RSV vaccine given to the mother during pregnancy **or** an RSV antibody (nirsevimab or clesrovimab) is given to infants. Most babies do not need both. Pregnant women should talk to a healthcare provider about which choice is right for their family. All AI/AN infants and toddlers 8 through 19 months of age should receive the RSV antibody nirsevimab for their second RSV season, regardless of maternal vaccination. (Clesrovimab is not recommended for this group.)

RSV | Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Immunization for Infants and Toddlers

If a pregnant woman receives the RSV vaccine during pregnancy, does her infant need an RSV antibody as well?

It depends. If the RSV vaccine was received during pregnancy and the infant was born more than 14 days after the maternal RSV vaccination, the infant does not need an RSV antibody for their first RSV season. However, all AI/AN infants and toddlers 8 through 19 months of age should receive the RSV antibody nirsevimab for their second RSV season, regardless of maternal vaccination.

Timing and Access:

When should infants and young toddlers receive RSV antibody?

- Infants younger than 8 months born before RSV season should receive an RSV antibody (nirsevimab or clesrovimab) shortly before entering their first RSV season.
- Infants younger than 8 months born during RSV season should receive an RSV antibody (nirsevimab or clesrovimab) within one week after birth – ideally during the birth hospitalization.
- Some older infants and toddlers 8 through 19 months – including AI/AN children – should receive the RSV antibody (nirsevimab only) shortly before or as early as possible during their second RSV season, even if their mother received the RSV vaccine during pregnancy.

Where can I take my child/children to receive the RSV immunization?

You can take your children to a clinic that is a Vaccines for Children (VFC) provider. All AI/AN children are eligible for free vaccines through VFC regardless of insurance status.

Your state or local health department can provide more information on where to find VFC providers. Most pediatricians in the U.S. and territories are VFC providers, and in certain states, schools are also enrolled in the VFC program.

To find a health center near you, please visit:

<https://findahealthcenter.hrsa.gov/>

RSV | Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Immunization for Infants and Toddlers

»» Additional Preventive Measures

Some other steps you can take to protect your infant or toddler from RSV infection are:

- Wash hands frequently with soap and water, especially before touching your child. Be sure to always have hand sanitizer ready in case soap and water are not available.
 - Ask all visitors to the home to wash their hands thoroughly with soap and water upon entering the home.
 - Provide hand sanitizer with at least 60% alcohol at the entrance for quick and easy use.
- Clean and disinfect surfaces frequently. This can be toys, doorknobs, countertops, etc.
- Avoid close contact with people who are sick. If possible, keep your child away from crowded places, especially during RSV season.
- To reduce the risk of infection, try to limit the number of visitors at any given time. Consider scheduling visits at different times to avoid overcrowding.
- If possible, request that visitors wear masks while inside your home, especially if they have been around others who are sick or are unsure of their health status.

RSV | Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Vaccine (GSK Arexvy, Pfizer Abrysvo, or Moderna mResvia) for Adults

RSV stands for respiratory syncytial (sin-SISH-uhl) virus. It is a common virus that can cause severe respiratory illness in infants, toddlers, and some adults.



»» Individuals at risk:

? Who is at risk, and why are some adults particularly vulnerable?

Anyone can be infected with RSV. However, older adults and adults with certain conditions often have weakened immune systems or other health complications that make them more vulnerable to the virus and at risk for severe illness.

»» RSV Vaccine Overview:

? What is the RSV vaccine, and how does it work?

The RSV vaccine (GSK Arexvy, Pfizer Abrysvo, or Moderna mResvia) works by helping their body build up protection against RSV, so if they ever get infected, they'll be better equipped to fight it off.

? What are the benefits of the RSV vaccine for adults?

- Protection when they are most vulnerable to infections, especially during the fall and winter seasons.
- Lowering risk of severe illness or hospitalization, both of which can cause strain on families.
- Peace of mind, knowing they have taken the necessary steps to keep themselves safe.



RSV

Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Vaccine (GSK Arexvy, Pfizer Abrysvo, or Moderna mResvia) for Adults

? Who should receive the RSV vaccine?

CDC recommends an RSV vaccine for all adults ages 75 years and older and for adults ages 50–74 years who are at increased risk of severe RSV.

Conditions that increase the risk for severe illness include chronic heart or lung disease; liver and severe kidney disease; weakened immune system; certain other medical conditions, including some people with diabetes and some people with obesity; and living in a nursing home.

? What are the potential side effects?

There can be redness, pain, and/or swelling where the shot was given. Other possible side effects are fatigue, headache, muscle pain, and nausea. If any other symptoms occur, be sure to contact your clinician.

»» Timing and Access:

? When should adults be vaccinated?

If they have not gotten an RSV vaccine yet, adults can get one at any time, but the best time to get vaccinated is in late summer and early fall before RSV usually starts to spread in the community.

? Where can I go to receive the RSV vaccine?

- Adults should inquire at nearby clinics about the availability of the RSV vaccine.
- To find a health center near you, please use your internet browser to visit <https://findahealthcenter.hrsa.gov/> or <https://www.ihs.gov/findhealthcare/>

RSV | Frequently Asked Questions (FAQ) for Tribal Home Visitors: RSV Vaccine (GSK Arexvy, Pfizer Abrysvo, or Moderna mResvia) for Adults

»» Additional Preventive Measures

Some other steps you can take to protect yourself and family from RSV infection are:

- Wash hands frequently and thoroughly with soap and water. Be sure to always have hand sanitizer (with at least 60% alcohol) ready in case soap and water are not available
- Clean and disinfect surfaces frequently, such as doorknobs, countertops, light switches, and remote controls.
- Avoid close contact with people who are sick. If possible, avoid crowded places, especially during RSV season.
- If possible, request that visitors wear masks while inside your home, especially if they have been around others who are sick or are unsure of their health status.

Infograph for RSV Immunization Choices for AI/AN Families

Protect Your Child From RSV

Respiratory syncytial virus (RSV) infection puts American Indian and Alaska Native (AI/AN) infants and toddlers at risk of serious illness.

There are **2** steps you can take to protect your child from RSV

Step 1

Talk to your healthcare provider and determine which immunization option is best for you and your family:

Maternal Vaccination Abrysvo (uh- BRIZ -voh)

Vaccination against RSV is recommended for women who are between 32 and 36 weeks pregnant from September to January in many parts of the United States.



-OR-

RSV Preventive Antibody clesrovimab (clez- ROHV -i-mab) or nirsevimab (nir- SEV -i-mab)

Infants under age 8 months, who were born during or entering their first RSV season, should receive one injection.



Step 2

Additional dose of RSV Preventive Antibody

All AI/AN children ages 8 through 19 months entering their second RSV season should receive **nirsevimab**. This additional dose of nirsevimab is recommended even if maternal vaccination was received in the previous RSV season.



Recognizing RSV Symptoms in Infants and Toddlers

Respiratory syncytial virus, or RSV, is a common virus that affects the lungs and breathing passages. Virtually all children get an RSV infection by the time they are two years old.



RSV was the leading cause of infant hospitalization in the U.S. before the introduction of RSV immunizations. It can be especially dangerous for AI/AN infants and toddlers, as recent studies show that some AI/AN infants experience higher RSV-related hospitalization rates and ICU admission rates when compared to other infants.



What are the symptoms of RSV in infants and toddlers?

RSV may not be severe when it first starts. However, it can become more severe after a few days with the illness:

Early symptoms of RSV may include:

- Runny nose
- Eating or drinking less
- Coughing, which may progress to wheezing or difficulty breathing

In infants (younger than 6 months old), symptoms of RSV infection may include:

- Irritability
- Decreased activity
- Eating or drinking less
- Breathing difficulties or pauses in breathing for more than 10 seconds



Importance of early recognition:

Most infants recover in a week or two. Still, RSV can be serious, causing severe illnesses such as bronchiolitis (inflammation of the small airways in the lung) and pneumonia (infection of the lungs).



When to seek emergency care:

Call your healthcare provider or your tribal clinic or physician if your child is having difficulty breathing, not drinking enough fluids, or experiencing worsening symptoms.

Vaccine Glossary of Terms

1. **Abrysvo (Pfizer)** - RSV vaccine given to prevent severe RSV disease in adults. It is also the ONLY RSV vaccine approved for use during pregnancy to protect infants from RSV-associated lower respiratory tract infection. The vaccine should be administered to women who are 32 through 36 weeks pregnant from September through January in most of the U.S.
2. **Arexvy (GSK)** - RSV vaccine given to prevent severe RSV disease in adults.
3. **Clesrovimab or Enflonsia (Merck)** - An injectable monoclonal antibody that prevents severe RSV disease in infants
4. **Immunity** - Protection against a disease.
5. **Immunization** - The process of being made immune to an infectious disease, typically by the administration of a vaccine. Other immunizing agents, such as monoclonal antibodies, can also induce immunity.
6. **mResvia (Moderna)** - RSV vaccine given to prevent severe RSV disease in adults.
7. **Nirsevimab or Beyfortus (Sanofi)** - An injectable monoclonal antibody that prevents severe RSV disease in infants and young children.
8. **Respiratory syncytial virus (RSV)** - A common respiratory virus that usually causes mild, cold-like symptoms such as running nose, coughing, and sneezing.
9. **RSV monoclonal antibody** - Man-made proteins that can help your body fight off disease and reduce the risk of severe disease and hospitalization.
10. **Vaccine** - A preparation used to stimulate the body's immune response against specific diseases.
11. **Vaccination** - The physical act of administering any vaccine.

References

- i. <https://stacks.cdc.gov/view/cdc/131586>
- ii. <https://pubmed.ncbi.nlm.nih.gov/26065863/>
- iii. <https://www.cdc.gov/media/releases/2024/s0307-rsv-immunization.html>
- iv. <https://www.cdc.gov/rsv/php/surveillance/>
- v. <https://www.cdc.gov/rsv/infants-young-children/>
- vi. <https://www.cdc.gov/rsv/adults/>
- vii. <https://pmc.ncbi.nlm.nih.gov/articles/PMC11299857/>
- viii. <https://www.cdc.gov/vaccines/vpd/rsv/index.html>
- ix. <https://www.cdc.gov/mmwr/volumes/72/wr/mm7234a4.htm>
- x. <https://pubmed.ncbi.nlm.nih.gov/37449336/>

Additional Resources

- [Talking to Your Pregnant Patients about Vaccines – CDC](#)
- [Talking to Parents about Vaccines for Infants – CDC](#)
- [#HowIRecommend Vaccination Video Series – CDC](#)
- [VacciNative: Vaccination Information for Natives by Natives – Indian Country ECHO](#)
- [Communicating with Families and Promoting Vaccine Confidence –American Academy of Pediatrics](#)