Considerations for Reopening K-12 Schools during COVID-19

Texas Research-to-Policy Collaboration Project

A Resource for Improving Measurable Impact

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Background:

In response to COVID-19, most K-12 schools cancelled in-person classes starting in mid-March.[1] On March 19, 2020, Governor Abbott issued an executive order closing all Texas schools; schools completed the 2019-2020 school year through remote learning.[3] In July, the Texas Education Agency released school reopening guidance that included flexibility at the local level to delay start dates and optional online-only delivery for the first several weeks of the 2020-2021 academic year.

Education in Texas[2]

In 2019-2020,

- over 5.4 million students were enrolled in Texas public schools
- 60.2% of students were identified as economically disadvantaged and eligible for free or reduced-price meals
- 20.3% were identified as English language learners
- 10.7% of students were served in special education programs

Evidence is mixed regarding the role children play in transmission of COVID-19 and in the severity of illness among children. Early research has found that COVID-19 affects children less than adults, and among children affected, illness appears less severe.[4,5] However, there is also research indicating that children aged 10-19 years transmit COVID-19 at rates similar to adults.[6] One recent study reported a 40% increase in child cases in the two-week period ending July 30, while another study reported that viral load in children under the age of 5 is significantly greater than in adults and children over the age of 5.[7,8]

At Issue:

Concerns about in-person instruction:

- Without comprehensive national and/or state testing and contact tracing systems, and with COVID-19 cases increasing across the U.S. between early June and mid-July, school administrators and staff, parents, policy makers, and public health professionals are concerned about the unknown health consequences of resuming in-person instruction at the start of 2020-21 school year.[9,10] Schools include adult teachers and staff, along with children, and re-opening schools could open a new vector for transmission that currently does not exist.
- Roughly 30% of U.S. teachers are over the age of 49, putting them at higher risk of COVID-19 illness and complications.[11]
- Flu-like activity increases in the fall among children and adults, which can further burden the healthcare system in areas with high rates of COVID-19 infection.

Concerns about remote instruction:

- Time away from school interrupts vital services including school nutrition programs, special education and language support services, physical education, mental health and educational

counseling, and consistent hands-on instruction that are especially critical for under-privileged students who have fewer educational opportunities outside of the classroom.[12,13,14]

- Distance learning creates practical and economic challenges for parents, as working parents, particularly essential workers, need to either miss work or find childcare alternatives when schools are closed for in-person instruction. In May 2020, roughly 34% of U.S. adults were considered essential workers who were working outside of the home.[15]
- Approximately 1.8 million (34%) public school students in Texas do not have reliable access to the Internet at home, and roughly 25% of Texas public school students do not have a suitable device for distance learning.[16] These data indicate that distance learning is not a viable option for these students unless these resources are made available.

Summary and Guidance:

While many schools are planning to begin the school year remotely, most schools will likely resume in-person instruction at some point during the 2020-21 school year. The benefits of in-person instruction are significant, however, reopening schools during the COVID-19 pandemic may result in serious health consequences for school staff, students, and families. Over the summer, the Centers for Disease Control and Prevention released guidelines for reopening schools and the Texas Education Agency issued its own public health planning guidance for reopening Texas schools. Using the CDC guidelines as a framework, public health experts at UTHealth School of Public Health developed a comprehensive list of considerations before reopening schools for in-person instruction.[17] While these recommendations were developed to provide guidance to school administrators and staff, they offer helpful guidance in COVID-19 mitigation and prevention measures.

5 Planning Rules for Opening Schools:

Until a COVID-19 vaccine is available, prevention mitigation is necessary:

1. **Rule of Law:** watch for federal-, state-, and county-level executive orders and proclamations
2. **Rule of Science:** Reductions in 7-day moving average in deaths and new cases per 1,000/day consistently for a 14-day period
3. **Rule of Place:** limit or prevent exposure
    a. Super-spreading people
    b. Super-spreading environments, ventilation

Planned response for school exposure/outbreaks that address closures, cleaning, disinfection

4. **Rule of People:** train students, teachers, and staff by training to protect themselves and reduce risk
    a. Encourage adequate sleep
    b. Decrease anxiety/stress with physical activity (outdoors is safest)
    c. Strengthen immune system with proper nutrition
    d. Symptom tracking prior to coming to school
    e. Ensure up-to-date vaccinations, including an annual flu shot
    f. Facilitate 6-foot physical distancing with floor markings, desk arrangements
    g. Handwashing and sanitizer stations in all rooms; bathrooms should be stocked with soap and towels
    h. Up-to-date PPE* for staff; masks for all children
5. **Rule of Policy:** controls must be designed, implemented, monitored, and adapted
    a. Distance learning and non-punitive sick/stay-home policies
    b. Coordination of testing results and care between campus, health care, and public health systems in the community
    c. Regular and consistent communication between parents, faculty and staff, health care providers, and public health experts

**PPE refers to personal protective equipment and includes items such as face masks and shields, gloves, and goggles.*

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