COVID-19: BEYOND TOMORROW

The Urgency and Challenge of Opening K-12 Schools in the Fall of 2020

Joshua M. Sharfstein, MD  
Department of Health Policy and Management, Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland.

Christopher C. Morphe, PhD  
Johns Hopkins School of Education, Baltimore, Maryland.

The sudden closure of kindergarten through 12th grade (K-12) schools nationwide this spring likely helped to avert a medical catastrophe from the coronavirus disease 2019 (COVID-19) pandemic. This decisive step, however, is casting a long shadow. By the time the school year ends in June, more than 55 million US children will have missed months of in-class instruction. The educational effect to date represents only one dimension of the harm to children.

More than 20 million children rely on school breakfast or lunch; surveys now indicate that 1 in 5 mothers with children younger than 12 years old report that their children are going hungry. Millions of children have lost access to health services through school-based health centers. There are major divides by race/ethnicity, geography, and economic class in access to home computers and high-speed internet. When prolonged school closures are combined with summer break, some children may to fall behind normal academic growth by as much as a year in mathematics.

The "COVID slide" will likely be greatest among those students who are already at educational and social risk. Children with significant learning disabilities may regress without in-person instruction. In addition, school closures are combined with summer break, some children may to fall behind normal academic growth by as much as a year in mathematics.

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Reopening schools this fall is an urgent national priority. To achieve this goal as safely as possible and reduce the chances that schools are required to close again, policy makers at every level should consider embracing a framework with these 6 components.

Create the Conditions for a Successful Reopening

Whether closing schools contributes more than modestly to a decline in coronavirus infection is a matter of ongoing debate. Nonetheless, in the event of significant community spread in the fall and winter months, parents and teachers are likely to again demand school closure, and, if they do, elected leaders are likely to agree. The best way to avoid a replay of the widespread closures is to control the pandemic more effectively in the future. To open school safely, communities should drive down the spread of COVID-19 over the summer while building a strong public health response for the fall. Every community should implement a rigorous program of testing, contact tracing, isolation, and quarantine.

Establish Distancing at Each School

Following guidance developed by the Centers for Disease Control and Prevention, schools should implement distancing whenever there are even low levels of community transmission. Protocols should involve creating more space for children in the classroom (with desks spaced 6 ft apart), keeping groups of children together throughout the day to limit mixing, staggering drop-offs and pick-ups, closing common areas, adding transportation options to increase spacing (such as on buses), limiting nonessential visitors, and canceling extracurricular activities that require close contact. Staff and older students should wear cloth face coverings, particularly when it is difficult to maintain distancing.

Prioritize Children Most at Risk From Missing School

School systems should make on-site education a high priority for youth who experience barriers to remote learning, students who receive special education services or nutritional support at school, and younger children (for whom online learning may be particularly challenging). School districts and individual schools within districts that have greater numbers of such children should be provided with additional resources for space, new staffing, and educational technology. Restructuring school time with strategies such as alternate morning, afternoon, daily, or weekly schedules may be needed to permit distancing. These schedules should offer more in-school time to those children at greatest risk, while providing access to appropriate educational technology for all.

Ready a Strong Public Health and Environmental Response

To prevent the spread of infection, schools should provide parents a checklist to document that children have no symptoms every morning and no other family members are ill at home. Schools should also use paraprofessionals (such as nursing aides and other trained staff) to screen children quickly on arrival, make handwashing and other supplies readily available, and adopt schedules for cleaning high-touch areas and disinfecting classrooms, with appropriate protective equipment for maintenance staff. When symptoms appear, prompt testing should be available. Schools should inform their communities when cases are identified and establish protocols for further testing of classmates and staff, additional school cleaning, and home isolation and quarantine.
Respect the Valid Concerns of Individual Families and Teachers
Regardless of the measures used by schools, some teachers may be unwilling to return to the classroom, and some families may be unwilling to send their children to school. Parents and guardians who are older than 65 years or have chronic health conditions, or families with infants or other children with health conditions, may be legitimately concerned for the risk of transmission within their household. To accommodate these families, school systems should use the summer to identify and train teachers at high risk to serve as remote learning experts, with the potential to flex and incorporate other students and teachers during periods of quarantine or school closure.

Recent reports of a multisystem inflammatory syndrome in children associated with current or prior severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection emphasize that reopening schools is not without risks for children. While this syndrome appears uncommon, the potential for serious illness in children may lead some families to choose fully online options. Active surveillance for this new condition will be essential to informing school policy and public understanding over time. It will be important to present the facts to parents; regardless of what procedures are put in place, it will not be possible to reduce the risk of COVID-19 transmission in schools to zero.

Link Curricula, Teaching Strategies, and Remote Learning Technologies
Given the likelihood of blended learning for many students, as well as periodic returns to fully remote learning in case of rising community spread of COVID-19, school systems should identify appropriate curricula that have both in-person and remote strategies, leveraging technology where age appropriate, and linked to specific learning objectives.

Preparing K-12 classrooms for the fall will require substantial resources and personnel. School systems should develop plans informed by public health guidance with broad input from parents, teachers, unions, school health services, and, where possible, students. Considerations should include not just academic planning, but also family support. Given the pandemic-related stress many children have experienced, school systems should hire additional counselors, social workers, and nurses to reach out to assist families on a regular basis. Lessons from successful community schools should be applied broadly for these types of interventions.

Congress should quickly make sufficient funding (in the billions) available to states and localities to support K-12 education for the fall. Extra funds should be available to public school districts that would be expected to face the greatest gaps in staffing and infrastructure, based on formulas that measure the number of children who receive nutritional assistance and special education services.

The federal government should also accelerate research relevant to school reopening. Critical questions include how best to care for children with respiratory disease and multisystem inflammatory syndrome from COVID-19, the extent of transmission in school settings, the relationship between school shutdowns on community spread, and the value of specific educational designs and interventions for disease transmission and learning. There is much to learn now from countries that are opening K-12 schools during community transmission of SARS-CoV-2. A cohort of teachers should be identified to assess whether antibody levels are associated with immunity from further infection; results could inform future staffing policies. A parallel research program to study the effects of remote learning programs is also needed. An advisory body with representation from the medical, public health, ethics, and educational communities should summarize the results of this research and its implications for practice on a regular basis.

The COVID-19 pandemic is more than a short-term threat to the nation’s health. Through its effects on children, the legacy of COVID-19 will last for years. The urgency and challenge of reopening schools requires the nation’s full attention today.

REFERENCES

ARTICLE INFORMATION
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