



INTERNAL MEMO

Date:	2 February 2021		
To:	The Honorable Dr ZL Mkhize, Minister of Health	From:	Ministerial Advisory Committee (MAC) on COVID-19

REOPENING OF SCHOOLS FOR THE 2021 SCHOOL YEAR – UPDATED ADVISORY

Problem Statement

As the new schooling year is set to start with schools opening mid-February, consideration needs to be given as to whether schools should be reopened at this time, given that the country is currently experiencing a second wave that is worse than the first wave.

The following 4 questions need to be addressed:

1. Should schools open as planned in February 2021 or should school openings be postponed if rates of infections are still high?
2. If school openings are to be postponed, what criteria should be set for when schools can be opened?
3. Should there be a differentiated approach to school opening based on the age of students?
4. Should timing of school openings be province-specific or a single national approach?

Evidence Review

- While the COVID-19 pandemic in the community is ongoing, there is a continual risk of introduction of the infection into schools through learners and staff who acquire symptomatic or asymptomatic infection in the community.
- As schools have reopened internationally, school-related cases of COVID-19 have been reported, but there is little evidence that schools contribute significantly to community transmission.^{1,2} A 17 country European Centre for Disease Prevention and Control report found that 12 countries reported between 1 to 400 school-based clusters, but most involved < 10 cases and these often could not be definitively linked to in-school versus community-based transmission.¹ Similarly, in the United States, COVID-19 incidence among the general population was similar in counties where schools offered in-person education and those offering only virtual/online education. There was no increase in COVID-19 hospitalization rates

¹ European Centre for Disease Prevention and Control. COVID-19 in children and the role of school settings in transmission—first update. December 23, 2020. <https://www.ecdc.europa.eu/en/publications-data/children-and-school-settings-covid-19-transmission>

² Leidman E, Duca LM, Omura JD, Proia K, Stephens JW, Sauber-Schatz EK. COVID-19 Trends Among Persons Aged 0–24 Years — United States, March 1–December 12, 2020. MMWR / January 22, 2021 / Vol. 70 / No. 3. [COVID-19 Trends Among Persons Aged 0–24 Years — United States, March 1–December 12, 2020 \(cdc.gov\)](https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6903a1.htm)

associated with in-person education.²

- There are no consistent changes in incidence trends associated with timing of opening or closing of schools in South Africa.³
- Closing or opening of schools based on specific epidemiological metrics, such as case or incidence thresholds, is not recommended because there is wide variation in testing practices across geographic regions. This variation undermines the comparability and interpretability of such metrics in different locations.
- Children of school-going age and adolescents compared to adults are less likely to become infected with SARS-CoV-2.⁴
- Emerging evidence from a systematic review of global school transmission studies suggests lower infection attack rate and SARS-CoV-2 positivity rate in students compared to school staff.⁵
- However, adolescents are likely to have a slightly lower or similar rate of transmission compared to adults.^{6,7}
- When children and adolescents are infected, they are more likely to have a mild clinical course of illness.^{8,9,10}
- Children account for a relatively small proportion of SARS-CoV-2 cases and even smaller proportion of admissions to hospitals compared to adults.³
- Potential negative consequences of COVID-19 infections in schools include further disruption of teaching syllabus, potential institutional shut-down, and loss of trust in the institution and government.
- In addition to education, schools provide nutrition and food security, and physical and psychological safety which should be maintained even during the time of a pandemic.
- Recent data from a nationally representative household survey in South Africa (NIDS-CRAM Waves 1-3) shows that during lockdown in May/June while schools were closed, 16% of children experienced hunger “in the past 7 days”, double the rate in 2018.¹¹ This declined to 12% in July/August but since the removal of the top-ups to the Child Support Grant at the end of October 2020, child hunger has again increased to 16% in November/December 2020¹². When schools were completely open (i.e. pre-pandemic and not rotational timetables)

³ Kufa-Chakezhai T, Jassat W, Walaza S, Erasmus L, von Gottberg A, Cohen C. Epidemiology and Clinical Characteristics of Laboratory-confirmed COVID-19 among individuals aged ≤ 19 years, South Africa, 1 March 2020 – 2 January 2021. NICD COVID-19 Special Public Health Surveillance Bulletin. Volume 18 (7).

⁴ Zimmermann P, Curtis N. Coronavirus Infections in Children Including COVID-19: An Overview of the Epidemiology, Clinical Features, Diagnosis, Treatment and Prevention Options in Children. *Pediatr Infect Dis J.* 2020 May;39(5):355-368. doi: 10.1097/INF.0000000000002660.

⁵ Xu W, Li X, Dozier M, He Y, Kirolos A, Lang Z, Mathews C, Siegfried N, Theodoratou E. What is the evidence for transmission of COVID-19 by children in schools? A living systematic review. *Journal of Global Health.* 2020, 10 (2).

⁶ Zhang J, Litvinova M, Liang Y, Wang Y, Wang W, Zhao S, et. al. Changes in contact patterns shape the dynamic of COVID-19 outbreak in China. *Science.* June 2020, 368 (6498): 1481-1486.

⁷ Viner RM, Mytton OT, Bonell C, Melendez-Torres GM, Ward JL, Hudson L, et.al. Susceptibility to the transmission of COVID-19 amongst children and adolescents compared to adults: a systematic review and meta-analysis. doi: <https://doi.org/10.1101/2020.05.20.20108126>

⁸ Qiu H, Wu J, Hong L, Lou Y, Song Q, Chen D. Clinical and epidemiological features of 36 children with coronavirus disease 2019 (COVID-19) in Zhejiang, China: an observational cohort study. *The Lancet Infectious Diseases.* 2020. Available from: [www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30198-5/fulltext](http://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30198-5/fulltext) (Accessed on 20 July 2020).

⁹ Tagarro A, Epalza C, Santos M, Sanz-Santaefemia FJ, Otheo E, Moraleda C, Calvo C. Screening and Severity of Coronavirus Disease 2019 (COVID-19) in Children in Madrid, Spain. *JAMA Pediatr.* 2020 Apr 8:e201346. doi: 10.1001/jamapediatrics.2020.1346.

¹⁰ Livingston E, Bucher K. Coronavirus Disease 2019 (COVID-19) in Italy. *JAMA.* 2020 Mar 17. doi: 10.1001/jama.2020.4344. Epub ahead of print. PMID: 32181795.

¹¹ Van der Berg, S., Zuze, L., & Bridgman, G. 2020. Coronavirus, Lockdown and Children: Some impacts of the current crisis in child welfare using data from NIDS-CRAM. (Online). Available: cramsurvey.org/reports

¹² Van der Berg, S., Patel, L., & Bridgman, G (2021, forthcoming). Hunger in South Africa during 2020: Results from Wave 3 of NIDS-CRAM.

approximately 9.6-million children (80%) receive a free meal at school every weekday.¹³

- The global literature highlights: (i) learning losses as a result of school closures, (ii) how pre-existing education disparities will widen during the pandemic and (iii) the effects beyond education. In South Africa, there is an achievement gap between learners based on socio-economic status. For the socio-economically disadvantaged attending schools is the only modality to access education opportunities and the longer they are out of school the greater the learning losses.^{14,15,16,17}
- Studies have shown that reducing the number of days of schooling has an impact (reduction) on cognitive functioning, particularly crystallized intelligence (e.g. comprehension). Additional schooling time has the effect of raising performance scores, and the longer the time spent in school, the better the performance.^{18,19, 20}
- Learners need continual cognitive stimulation. School closures and disruptions contribute to learning losses because of limited learning opportunities and memory decay.^{21,22, 23, 24}
- The attendance of learners in-person at schools is important for their social and psychological development, but this should be done with full attention to ensuring the safety of children, educators and other school staff members.
- Adherence to prevention interventions can make a significant difference to risk of acquiring SARS-CoV-2. The prevention interventions include 1) engineering controls – (*what we can do to the environment* to reduce transmission), such as ensuring ventilation and sufficient space; 2) administrative controls – (*what we can arrange* to reduce transmission), such as staggered time-tabling, screening, hand hygiene, cough etiquette and regular environmental cleaning; and 3) personal protective equipment – (*what we can wear* to reduce transmission, such as non-medical (cloth) face masks and eye protection visors) should prevent the spread of the virus from the individual with COVID-19 to other learners or staff in schools.
- Symptom screening of learners and staff prior to school entry may limit the potential exposure of learners and staff to SARS-CoV-2.
- Where schools are able to fully implement prevention measures, they can provide a relatively safe environment. Containment of transmission in schools is critical for this.

¹³ Mohohlwane, N., Taylor, S., & Shepherd, D. (2020) COVID-19 and basic education: Evaluating the initial impact of the return to schooling. (Online). Available: cramsurvey.org/reports

¹⁴ United Nations (2020) Education during Covid-19 and Beyond. https://www.un.org/development/desa/dspd/wp-content/uploads/sites/22/2020/08/sg_policy_brief_covid-19_and_education_august_2020.pdf

¹⁵ Hanushek, E.A. and Woessmann (2020) The Economic Impacts of Learning Losses. OECD Publication. <https://www.oecd.org/education/The-economic-impacts-of-coronavirus-covid-19-learning-losses.pdf>

¹⁶ Dorn, E; Hancock, B.; Sarakatsannis, J and Viruleg, E (2020) COVID-19 and learning loss -disparities grown and students need help. McKinsey Company Publication.

<https://www.mckinsey.com/industries/public-and-social-sector/our-insights/covid-19-and-learning-loss-disparities-grow-and-students-need-help?cid=eml-web>.

¹⁷ Reddy, V.; Winnaar, L.; Juan, A.; Arends, F.; Harvey, J.; Hannan, S.; Namome, C.; Sekhejane, P. and Zulu, N. (2020) TIMSS 2019: Highlights of South African Grade 9 Results in Mathematics and Science. HSRC. Pretoria. http://www.timss-sa.org.za/download/TIMSS-2019_Grade9_HSRC_FinalReport.pdf

¹⁸ Aucejo, E.M. and Romano, T.F. (2016) Assessing the effect of school days and absences on test score performance. *Economics of Education Review*, 55(C): 70-87

¹⁹ Carlsson, M., Dahl, G.B., Öckert, B. and Rooth, D.-O. (2015) The effect of schooling on cognitive schools. *Review of Economics and Statistics*, 97(3): 533-547

²⁰ Lavy, V. (2015) Do Differences in Schools' Instruction Time Explain International Achievement Gaps? Evidence from Developed and Developing Countries. *Economic Journal*, 125(588): F397-F424)

Recommendations

- As South Africa is now past the peak of the second wave with cases declining rapidly, there is no reason for schools (early child development centers, special need schools, primary and secondary schools) to remain closed. All schools should open as soon as feasible, no later than 15 February 2021 as currently planned.
- Ensure all schools have the necessary Personal Protective Equipment (PPE) (as prescribed in Standard Operating Procedures of the Department of Basic Education).
- As schools open the following risk mitigating strategies should be in place:
 - All schools should promote physical distancing for all students and staff when arriving and leaving school. Drop-off and collection times for children/ students to be staggered for different grades to allow for less crowding at start and end of school.
 - A distance of at least 1 meter should be maintained at all times during and after classes.
 - Ventilation of classrooms should be maintained through keeping windows and doors open during classes.
 - Where classrooms do not have enough space to accommodate learners with a separation of at least 1 meter, other venues like community halls and churches should be considered for use as classrooms, failing which students should attend schools on a rotational time-table.
 - If possible, where schools follow a rotational timetable learners should attend on alternate days rather than alternate weeks. Learners need continual cognitive stimulation. School disruptions contribute to learning losses because of limited learning opportunities and memory decay. With schools having proper systems in place to prevent transmission of infection and early detection of cases, alternate day attendance at schools is preferred as it minimizes disruptions in learning
 - Movement of students between classrooms should be minimized and mixing of classes or grades should be discouraged. It is recommended that teachers should move around the school rather than children.
 - Perform hand hygiene with alcohol-based hand-rubs at minimum, at start and end of the school day, on entry to a new classroom, before and after breaks and before leaving for home.
 - Hand washing should be carried out after going to the toilet, before eating at break-time and after playing outside.
 - Provision of facilities to enable handwashing or hand sanitizing at easily accessible sites throughout the school.
 - Students and staff should wear clean, comfortable cloth masks appropriately at all times. Mask breaks for both children and staff are recommended to be taken every 2 hours, through everyone going outside, taking off masks, and breathing deeply with social distancing in place. Masks to be put back after 15 to 20 minutes and carry out hand hygiene before returning to class.
- A comprehensive guideline on the response to individuals with COVID-19 in schools should be adopted and implemented in all schools. The National Institute of Communicable Diseases

(NICD) guideline on Management of COVID in schools can be utilized and adapted.²⁵

- Schools to appoint a designated staff member to be responsible for communication in collaboration with the Provincial Education Department (PED). Communication regarding COVID-19 infections in schools should be timely, transparent and provide as much information as possible while retaining confidentiality and avoiding stigmatizing language.
- Strengthen the transparent sharing of information on COVID-19 infections in children as part of the daily national COVID-19 statistics by the Department of Health (DoH) and NICD.
- COVID-19 response teams are created (or if available, School Health Team of the Integrated School Health Programme (ISHT) to be utilized) in every school district or in the province in collaboration with the DoH. These response teams to investigate, mitigate and respond to cases of COVID-19 that are detected in learners or staff. The response teams to include DoH, PED, senior management from the affected school (school principal and/or designated staff), school governing bodies, teacher and/or organized labour representatives and student representation.
- COVID-19 response teams, school principals or designated staff members and school governing bodies be trained on operationalizing the comprehensive guidelines for COVID-19 detection, response and prevention procedures for Schools. Such training should be facilitated by units experienced in managing the investigations of clusters of infectious cases, e.g. the NICD or other public health units.
- The national and provincial departments of education to recognize that COVID-19 infections and potential clusters of cases will occur in schools despite the best efforts and that they adopt a transparent and 'no-blame' culture in order to facilitate clear reporting, directed and positive responses to individuals with COVID-19 in school.
- Provincial departments of education monitor the implementation and adherence to COVID-19 preventive measures in schools as previous MAC advisory (Getting Children back to school safely).
- Closure of an entire school should be a last recourse measure that should be carefully considered, made by the levels of authority empowered to make such a decision. If closure cannot be avoided, rather let it be limited to the specific class or grade affected. Deep cleaning and/or fumigation is not recommended. All equipment and rooms where individuals who have confirmed or suspected COVID-19 have been within the last 48 hours should be identified for appropriate cleaning. Cleaning involves wiping surfaces (not spraying) with disinfectants such as 70% alcohol.
- The adoption of the adapted NICD guidelines²⁵ pertaining to COVID-19 response in schools, and the implementation of the above recommendations will contribute to learner and staff safety, ensure public trust in educational institutions and authorities, and contribute to the country efforts to contain the spread of COVID-19.
- The DBE should fast-track agreement in the Education Labour Relations Council on comorbidities processes for teachers.

Thank you for consideration of this request.

²⁵ https://www.nicd.ac.za/wp-content/uploads/2020/11/Revised-DBE-guidelines-Management-of-COVID-in-schools_Sept2020.pdf

Kind regards,



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PROF MARIAN JACOBS

CO-CHAIRPERSONS: MINISTERIAL ADVISORY COMMITTEE ON COVID-19

DATE: 2 February 2021

CC:

- » **Dr S Buthelezi (Director-General: Health)**
- » **Dr T Pillay (Deputy Director-General)**
- » **Incident Management Team**