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Is it Safe to Reopen Schools?

An Extensive Review of the Research

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The Evidence Project
At the Center on Reinventing Public Education
COVID Collaborative
United States of Care
CRPE Reinventing Public Education
AEI American Enterprise Institute
Opportunity Labs
Walton Family Foundation

One year after nationwide public school closures, a growing body of medical research and the firsthand experiences of school systems worldwide can provide a sound basis for determining a reopening strategy. This report examines the collective findings of more than 130 studies and considers their implications for current decisions. These studies cover a wide array of topics, including risks for children, transmissibility concerns, and the impact of school reopenings on community spread.

An unprecedented educational challenge

By the end of March 2020, all public schools in the United States were closed to slow the spread of the novel coronavirus SARS-CoV-2. More than 50.8 million children stayed home as school systems scrambled to transition to remote or hybrid learning platforms. While the decision to close schools was difficult, the debate over when and how to reopen safely and responsibly has grown increasingly complex and politically fraught.

Decision-making in the absence of data

State policymakers and local school leaders were forced to make hugely consequential decisions with incomplete and sometimes contradictory data. Were children key drivers in the transmission of the virus? How long should schools be closed for? How vulnerable were children to severe symptoms from COVID-19 infections?

Initial federal guidance focused mainly on *how* to safely operate schools with preventive measures, such as wearing masks, physically distancing students, and increasing ventilation. There was far less specific guidance on *when* it is safe to reopen schools, leaving it to state and local leaders to establish thresholds for community conditions and protocols for testing and managing inevitable cases.

Public skepticism of the government's guidelines

The country's deeply polarized political and media atmosphere dramatically exacerbated all of these challenges. Confidence in the government and key institutions are at near-record lows, with just one in five American adults saying they trust the government "to do the right thing" most or all of the time. Erosion of public trust has fueled skepticism of scientific research, noncompliance with protective measures, and outright antagonism over business restrictions and school closures.

Concern for the safety of in-person learning

Within local communities, many teachers expressed grave concern over the health risks, and parents worried about their children's safety. As a result, many school system leaders opted to continue with remote learning while the path to reopening remained uncertain.

The toll of school closures on students and families

It is critical to weigh the public health benefits of school closures against the academic and social/emotional costs suffered by students, families, and society as a whole. Many of the trade-offs—such as steep learning loss, declines in mental health, and the economic impact on families—will have far-reaching consequences that could last for years beyond the pandemic.

A starting point for evidence-based conversations

We believe this report can be a starting point for evidenced-based conversations around reopening schools. There will be more studies of the coronavirus, its new variants, and the efficacy of mitigation measures, but they should be weighed against the substantial body of research already available.

Key Findings

The cumulative body of research provides answers we did not have a year ago and also provides a roadmap for how to safely and resume in-person instruction: [1]

- The vast majority of research from around the world suggests that children comprise a small proportion of diagnosed COVID-19 cases, develop less severe illness, and have lower mortality rates.
- Studies suggest attending school does not increase risk to children, particularly if health protocols are followed.
- Evidence points to schools mirroring the transmission rates of their communities. Schools themselves do not appear to drive community transmission. High school students are more likely to contract and spread infection, but there is considerably less risk in grade school children.
- Protective measures such as mask wearing, physically distancing, increasing hygiene regimens, and improving ventilation add layers of protection that can mitigate risks for students and school staff.
- COVID-19 vaccinations, symptomatic testing and isolating potentially infected individuals, and asymptomatic COVID-19 screening tests offer additional preventive benefits.
- Any public health benefit gained from school closures must be weighed against the significant—and potentially lasting—costs imposed on individual students and society as a whole.
- A growing body of research suggests children face greater health risks due to missed health screenings, food insecurity, and mental health challenges.
- Severe learning loss for many children, particularly children of color, will lead to lower educational attainment and lower future earnings.

[1] *Honein MA, Barrios LC, Brooks JT. Data and Policy to Guide Opening Schools Safely to Limit the Spread of SARS-CoV-2 Infection. JAMA. Published online January 26, 2021. doi:10.1001/jama.2021.0374*

The path forward →

As more research becomes available, leaders must continuously evolve their strategies. Managing the uncertainty and risks created by new variants of the coronavirus requires doubling-down on proven mitigation measures and protocols.

Closing schools should be a last resort and done only after all other community mitigation measures have been deployed. In such cases, there should be extreme urgency to reopen schools as quickly and safely as possible.

State and local leaders should default to having students attend school in person and then adjust based on community risk factors and the capacity to implement essential health protocols.

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