



Should We Reopen Schools?

A Child-Centered Position for Uganda

The government of Uganda has imposed a lockdown as a pre-emptive measure to control the spread of the Covid-19 pandemic. This action saw all schools and education institutions close in March 2020 and since then, over 15 million children have been locked out of school with no certainty of when they will reopen. Even with candidate classes and medical students possibly triggering a gradual, phased return, the majority of Uganda's youth remain in their homes. This has meant missed learning opportunities and led to a rise in rates of violence against children (VAC) in their homes and communities.

Much of the current national debate centres around reopening businesses and kickstarting the economy. This is naturally at the forefront of people's minds as their livelihoods are at stake. What appears to be lost in this conversation is that children have an urgent priority too. Their current and future wellbeing depends on having access to a school. For them, and their parents, this question deserves greater attention in our national conversation about how to proceed from here.

How should we move forward?

It is an unenviable task to weigh the risk of a life-threatening infection against loss of an opportunity to learn, restricted self-development, and a rise in VAC. Ultimately the decision will depend on emerging understanding of what importance to place on each of these considerations, how exactly the biology of transmission works, and what resources exist at the school level to comply with prudent and practical standard operating procedures (SOPs). Both sides of the equation have heart-wrenching considerations and we do not pretend that there are easy answers. We certainly do not presume to know the answer, nor are we advocating for a specific position. We are simply proposing two key considerations when weighing this decision:

1. We must strive to integrate children's priorities in whatever decision we arrive at.
2. In the absence of clarity, we must rely on data and learn from experience elsewhere.

1) Child Centric Debate: the price children are paying for the school closure


Who would disagree with the notion that children should be in school? Yet the debate on how we weigh the evolving reality and arrive at policy decisions seems to be muted on what this means for children. While children and their parents have a profound stake in the decisions we make, very little appears to be emerging in public discussions on what is guiding our decisions, and how we decide if children are safer at home or in school. What will be the consequences for keeping children away from school, and who will disproportionately pay the price?

We know that schools provide the best start in life. They enable children to grapple with the present and prepare them for the future. They are places that nurture cognitive, ethical, and social development of children. Beyond producing learning outcomes, schools teach children social, emotional, and other life skills necessary to navigate the ever-changing world, make good decisions and contribute to the development of their communities. They provide spaces, environments and relationships that enable a child to find a path toward a productive livelihood, effective citizenship, and a fulfilling life. For children, access to a school can mean the difference between mobility and progress or being left behind in the stagnation of poverty, especially for the most marginalized, including those living with disabilities and in extreme poverty.

Beyond these longer-term considerations, there are also immediate concerns of safety. We know that proximity to adults under extreme stress is a risk factor for children. We have seen reports of VAC rise and an increased number of calls to the Child Helpline. In a media briefing on 9th of August 2020, the Minister of Information, Communication and Technology (ICT) reported that in a period of five months (March to July 2020), Uganda Police registered 21,000 cases of VAC. Over 50% of these happened at home. Another report from five districts (Ngora, Kitgum, Kyegegwa, Lyantonde and Kasese) indicated that during lockdown alone, 2,300 underage girls were sexually assaulted and impregnated, many of whom were forced into early or unwanted marriage ([Daily Monitor](#)). These figures only account for reported cases of VAC, likely significantly lower than the actual toll. Many more children will be exposed to violence if they continue to stay at home.

2) Evidence and experience from around the world

We are still in an unfolding pandemic and therefore experiences from elsewhere are still being analysed and digested. In the absence of a global consensus, we are still in the position of sifting what lessons we should learn and adapt for our circumstances and the process is complicated by the following reality:



a) Sparse data and experience. Currently there is a lack of data from Uganda to guide the decision on whether to reopen schools or not. Furthermore, the picture is not much clearer across Africa, and only marginally better worldwide. Although African countries remain relatively low in terms of case count (except South Africa, which at the time of writing is fifth in the world but the only African nation in the top 20), this situation may change quickly. This picture may be further obscured by a lack of wide-spread and regular testing.

b) Unclear if children are efficient transmitters or less impacted by the infection. Studies have found children to be less likely (Roland, A. 2020) (between a third to a half) than adults to transmit the virus, but there is very little understanding of why. There is some evidence of an inflammatory condition that affects children (Wilson, K. 2020), but this too is poorly understood. Some new research – like a recent paper from UNICEF (Idele, P. et al. 2020) – questions the narrative that COVID-19 infects children less severely than adults, which argues that risk of infection is dependent on where individuals live and how vulnerable they are to poor health, as evidenced by the higher proportion of COVID-19 cases among those under 20 (11% on average of the national caseload in low-income countries compared to 7% in high income countries).

Other new studies from JAMA Paediatrics (Heald-Sargent, T. et al. 2020) report that young children can carry extremely high viral loads of SARS-CoV-2, the virus that causes COVID-19, which suggests children do pose a risk of transmission to people around them. Furthermore, while masks reduce the spread of COVID-19 in adults, getting children to wear and keep masks on can be a challenge. Unlike contexts like China, Vietnam, South Korea and Japan, where mask usage is already a widespread norm, many cultures – including most countries in Africa – are not used to wearing masks and they can be uncomfortable for children and often fit poorly.

c) Diversity of experience. By early June 2020, although twenty countries had reopened schools (Taiwan, Sweden, and Nicaragua never closed schools at all) – there is hardly any data on outcomes, and reopening has remained largely an uncontrolled and mostly ad hoc experiment with a wide range of approaches in different contexts. Emerging evidence from reopening strategies from South Africa, Finland and Israel (Science Magazine) suggests that keeping student groups small, requiring masks, and maintaining social distancing can keep schools and communities safe. But these SOPs, despite being onerous, are not enough. Community transmission rates must be controlled – the more the virus is circulating in communities, the more likely that students and staff will bring COVID-19 into – and out of – their classrooms.

d) Experiences from Israel and Denmark act as a cautionary tale. Schools in Israel were closed in early March 2020 and fully reopened in mid-May 2020. Within 10 days of reopening, a major COVID-19 outbreak occurred in a high school, with the first two recorded cases there emerging from different communities. More than 150 students and 25 staff members were infected, and 28,147 children were placed under quarantine for exposure (Stein-Zamir, C. 2020). This occurred largely because they were unable to enforce prudent SOPs. Denmark, on the other hand, is a cautionary tale because of why it succeeded. Children between the ages 2 to 12 years were split into small groups of 12 students known as “protective bubbles,” and remained in this consistent cohort (Time). They attended school on staggered schedules, ate lunch separately and had designated zones on playgrounds. They were required to wash their hands every 2 hours, their desks were spaced 2 metres apart, and all their education materials were cleaned regularly. Parents were not allowed on school grounds. The success of this story depended on regimented procedure, availability of resources and active compliance, all conditions difficult to replicate in a place like Uganda.

Potential Options for a Way Forward

What can we learn from these experiences? Uganda is not Denmark, nor is it Israel. Spaced desks and regular handwashing are difficult to enforce in places with large class sizes and a lack of clean running water. Therefore, experience from other places is illustrative but should be translated into a local context. Our decisions should be informed by these experiences but should depend on what is feasible in our context, bearing in mind an investment of Shs97.6 billion estimated for reopening (Daily Monitor). Below we propose two possible scenarios for a way forward:

Scenario 1: Schools Re-open: Safety is paramount and with that in mind, the Ministry of Health drafted some SOPs for the reopening of schools in a 17th June memo from Dr Jane Ruth Aceng (Daily Monitor). While this is an excellent start, these procedures have widely been seen as too stringent and impractical, and it is still unknown whether they will be approved by the Ministry of Education (New Vision). There is therefore a need to:

- Constitute a Taskforce from the Ministry of Education and Sports and Ministry of Health to review these draft SOPs from a realistic point of view and come up with final guidelines to be adhered to. We must also recognize that adherence will be a major challenge.
- Prepare the necessary infrastructure to ensure adherence to health guidelines of handwashing, mask-wearing and social distancing in all the schools. This means from the highest level, emphasize that this is critical, develop capacity to implement the procedure and invest in monitoring compliance.

- Conduct randomised and routine tests and monitor the data fastidiously. Act quickly when a positive result emerges with swift quarantine and contact tracing.
- Institute supplementary mechanisms for ensuring safety of children when schools reopen. This may include enforcing nonviolent ways of disciplining children, zero tolerance of corporal punishment and evidence of school level policies to protect children from sexual and all other forms of violence. More rules and regulations (handwashing, mask-wearing, social distancing) may lead to more 'friction' and violent enforcement. Positive discipline must be promoted over corporal punishment.
- Wherever possible, encourage outdoor learning where flow of air can reduce transmission.
- Consider instituting a hybrid model of either dividing the school population in shifts or alternate weeks of in-person attendance.
- In high-density situations, if access to school can only be for a limited number of learners, prioritize younger learners, those with disabilities and those with most difficulty accessing online learning.
- Disaggregate interventions/guidelines based on the type of school.
 - High-density schools compared to low-enrolment schools may have different infrastructure and space.
 - Urban schools may need different guidelines compared to rural schools.
 - Private schools may have more resources compared to government aided schools.
 - Boarding schools may need additional guidelines.
- Parents and nonessential adults should not be allowed on school premises without permission.
- Schools should be cleaned regularly (after/before each school day). This may pose a challenge and may need an adaptive response.

Scenario 2: Schools Remain Closed: If after careful consideration, it is deemed more prudent to keep schools closed, or a phased reopening continues to leave most children out of school, then attention should be invested in promoting well-being of children at home. This could include:

- Specify regular intervals at which this decision will be reviewed and under what condition it will be reversed.
- Ensure fairness in access to learning materials and other related services. There should be a deliberate plan to cater for children with special needs. The Ministry of Education could broker an agreement with telecommunication companies to make network and internet bandwidth available at discounted rates for educational purposes. Even in this case, the poorest families in Uganda will likely fall further behind.
- Establish partnerships with local agencies, religious groups and community-based organisations to facilitate radio, TV and internet-based learning spaces. Deploy teachers to act as supplementary tutors for small, locally organized learning clusters of children.
- Establish a Taskforce whose role becomes to monitor well-being of children at home and is formally mandated to collect data and produce regular reports to Parliament.
- The Taskforce should develop a clear plan on how to curb the rising rates of VAC.
- Ensure expeditious reporting, tracking, referral, and response (RTRR) of all VAC cases.
- Hold appropriate agencies accountable against the frameworks and plans that were spelled out to ensure child protection during the COVID-19 period.
- Raise awareness on VAC through a national dialogue hosted by senior members within the government and education system, that highlights the impact of the added stress of lockdown and on increased rates of violence. Parents should be encouraged to use non-violent means of disciplining their children, and this should be maintained even beyond COVID times.

Conclusion

In the last 20 years we have taken significant steps to promote access to education. As a result, we have started seeing significant benefits in multiple domains of our society. Long term closure of schools threatens those achievements and therefore requires a bold and courageous response to mitigate such a retreat. The perspective presented in this paper is intended to contribute to a collective dialogue on how we might respond to this challenge and continue protecting the present and future of our children.