

#### **End Blanket Closures of Schools Now**

### 15<sup>th</sup> September 2021

Preamble: This document has been developed by a group of concerned teachers, parents and medical professionals who want to see the government prioritize the reopening of schools. The policy brief below has been circulating widely amongst civil society and has garnered a broad base of support. In tandem with a recently launched public campaign to increase awareness around the issue of school closures, we hope to also engage in dialogue with policymakers about the evidence we are presenting.

We write as a coalition of experts and practitioners in Malaysia's education and health sectors, with two major reasons to urge the government to reopen as many nurseries and primary and secondary schools as possible, as quickly as possible. Firstly, with each additional week of school closures, the irreversible damage inflicted on an entire generation of children is escalating. Secondly, there is a large body of scientific evidence and international best practices supporting the safe reopening of schools. For both reasons, keeping schools closed is no longer an option.

School closures today will lower children's income tomorrow. It is estimated that Malaysia's school closures have already caused an average learning loss of eight months. These learning losses will cause a less skilled workforce with an estimated loss in future GDP of RM80 billion per year. School closures also disproportionately impact children from families where both parents must work, and lower the earning capacity of mothers. And the school closures also disproportionately impact children from families where both parents must work, and lower the earning capacity of mothers.

At present, Malaysia does not have a meaningful 'online curriculum delivery'. Even at its best, online learning cannot replicate the nurturing of critical thinking and socioemotional skills through inperson interactions. Additionally, online learning is an ineffective substitute for many children: a UNICEF survey of B40 children in Malaysia reported that nearly 4 in 5 children struggle to focus on learning online, and 3 in 5 children have lost interest in learning.

Separately, anxiety and depression amongst children are also on the rise. When schools close, children living in violent homes are at greater risk of abuse. Physical activity has fallen to dangerously low levels that will ultimately cause another health crisis, such as increased obesity and related medical issues. 8,9

Evidence is emerging that reopening schools can be safe. The latest Malaysian Health Ministry (MOH) data from April to May 2021 indicates that only 2.5% of total cases are attributed to school settings. <sup>10</sup> Data from the University of Malaya in June 2021 indicates that only 1% of pediatric infections in 2021 could be traced to schools, while 90% are linked to transmissions at home, not at school. <sup>11</sup> In Malaysia, the COVID-19 fatality rate for children below 18 is 0.02%. <sup>12</sup>

Globally, studies from the United States, Italy and other European countries have found low transmission rates in schools. <sup>13,14,15,16</sup> Evidence also suggests that when infected, contagiousness is lower for children particularly those under 10. <sup>17,18,19</sup> Global evidence also indicates that school closures are not as impactful as expected, with limited reduction of transmission compared to other public health measures. Many countries in Asia, Europe or North America are able to manage the pandemic while keeping schools open. <sup>20,21,22</sup> Many studies have shown that children have a very low risk of developing severe disease if they are infected with COVID-19. <sup>23,24,25</sup>



We support the following guiding principles to reopen schools, and urge a coordinated all-of-government response to meet these guiding principles:

- 1. Recognize schools as essential. Schools should be rightfully valued and considered essential to the functioning of society. Reopening schools should be independent of the parameters of the National Recovery Plan and should not depend on daily case numbers, ICU utilization and vaccination rates. Teachers and all school staff (e.g. cleaners, clerks, bus drivers and canteen operators) should be considered frontliners and given priority for vaccination.
- 2. Prioritize our most vulnerable. Younger children, children with special needs, and children who are low-income or located in the most remote areas are disproportionately affected by closures and least able to benefit from online learning. Plans for reopening should restore face to face learning for these groups first. In reopening, schools that are under resourced should be prioritized for support for the implementation of SOPs, so that reopening does not widen inequity. Where full reopening is not yet possible, utilize creative options such as rotational models, allowing most severely disadvantaged children to return (e.g. most severely disabled, most dependent on food programmes, or those completely lacking Internet connectivity).
- 3. Take advantage of low hanging fruit. While a blanket reopening of schools may not be immediately feasible, a blanket closure is not the only other option. Many schools can easily and safely be allowed to reopen now. Examples of this include schools in Perlis (where case numbers are close to zero), the nearly 3,000 Sekolah Kurang Murid schools (with fewer than 150 students and very small class sizes), certain schools in extremely remote areas where all students come from the same community (indicating a "safe bubble"), as well the private nurseries, kindergartens and schools which can enforce a high standard of SOPs.
- 4. Decentralize decision making. Parents need the freedom to choose what is best for their family. While we must allow parents to keep their children at home if they prefer, similarly the choice to send children to school must not be taken away. Allow the decisions on school closures to be made by individual schools and their parent communities, in consultation with District Health and Education officials. Specific school premises should be assessed on their potential risk of transmission and allowed to reopen in accordance with the implementation of suitable risk mitigating measures.
- 5. Use scientific evidence, global best practice, and reliable information. Develop a School Reopening Plan that is centered around the evidence as well as global best practices, utilizing the expertise of leading practitioners in the fields of education and health, some of whom have already developed detailed recommendations as individuals or organisations. This plan should also address the large and unequally distributed learning losses already sustained. Develop clear SOPs based on evidence and best practice and prioritize resources and/or reallocate budgets where necessary to implement them. The government should collect and publish relevant public health and education data on children, to guide policies and inform the public.

Taken together, there is no evidence justifying prolonged and blanket school closures. Our children desperately need and deserve a different approach. We call on the government to immediately lift the blanket policy of closing all schools, and to institute immediate and long-term plans for their safe reopening.



### **Endorsed by:**

# **Individuals**

Dr Khor Swee Kheng, Public Health specialist (Co-Author)
Dato' Dr Hartini Zainuddin, Child Activist
Dr JoAnn Rajah, Consultant Paediatrician
Katyana Azman, Consultant Child Psychologist
Dr Lim Wei Yi, Consultant Paediatrician
Dr Rakhee Yadav, Consultant Paediatrician
Dr Sangita Terumalay, Consultant Paediatric Neurologist
Professor Dr Sanjay Rampal, Public Health Specialist
Tan Teng Boo, Fund Manager
Dato' Dr Zainal Ariffin Omar, Public Health Specialist

#### **Medical Associations**

Asthma Malaysia Federation of Private Practitioners' Associations, Malaysia (FPMPAM) Public Health Physician's Association of Malaysia (PPPKAM) Public Health Malaysia

### **Parent Organizations**

Melaka Action Group for Parents in Education (MAGPIE) Parent Action Group for Education (PAGE)

## **Non-Government Organizations**

Angkatan Belia Islam Malaysia, Education Bureau (ABIM)
Childline Foundation Malaysia
Community Transformation Initiative
G25 Malaysia
International Networking of Child Development and Protection (INCHILD)
LeapEd
Pergerakan Tenaga Akademik Malaysia (GERAK)
Persatuan Pengundi Muda (Undi 18)
Teach For Malaysia (TFM)

## Think tanks

Bait Al-Amanah Center for Market Education Research For Social Advancement (REFSA) Socio-Economic and Environmental Research Institute (SERI)

### **Industry Associations**

Association of Kindergarten Operators Sarawak Persatuan Guru Tadika Perak Persatuan Perkhidmatan Taska Sabah Persatuan Tadika Sabah Sabah Chinese Kindergarten Association

## Schools, TADIKAS, TASKAS

Anyaman Preschool, KL



Blue Daisies Kid's Club, KL
Clover Learning Centre, Johor
Forest of Stars, Johor
GAINS Education Group
Hummingbird Learning House, KL
Little Tree House, KL
Rimbun Montessori, KL
Sekolah Sri Aria, KL
SR Seri Presbyterian, Johor
Tadika Sri Gloria, Kepong
Taska Tulip, KL
Taski Dinamik, Kajang
Toddler Town, KL
Whytehouse Education, Penang

# **Education Related Organizations**

Ahlan Academy
Biji-Biji Malaysia
LinDees
Me.reka
Play Unltd PLT
Projek57
RITE Education
Wisdom Clubs
Yayasan Takmir Pendidikan

# **Mental Health Organizations**

Play Therapy Malaysia Power of Play

# **Special Needs Community**

Hils Learning Ohana Association Ipoh, Perak Pertubuhan Perkhidmatan Intervensi Awal The Learning Connection



- <sup>11</sup> Hotspot (in Mandarin). 6 June 2021. https://hotspot.com.my/newsvideo/96416/1907793/
- <sup>12</sup> COVID-19 Deaths among Children in Malaysia. https://codeblue.galencentre.org/2021/06/04/covid-19-deaths-among-children-in-malaysia/
- <sup>13</sup> Viner, Russell M., et al. "Susceptibility to SARS-CoV-2 infection among children and adolescents compared with adults: a systematic review and meta-analysis." *JAMA pediatrics* 175.2 (2021): 143-156.
- <sup>14</sup> European Centre for Disease Prevention and Control. "COVID-19 in children and the role of school settings in COVID-19 transmission." *Stockholm: ECDC* (2020).

  <sup>15</sup> Ibid
- <sup>16</sup> Villani, Alberto, et al. "School in Italy: a safe place for children and adolescents." *Italian Journal of Pediatrics* 47.1 (2021): 1-3.
- <sup>17</sup> Goldstein, E., Lipsitch, M. & Cevik, M. On the effect of age on the transmission of SARS-CoV-2 in households, schools and the community. *medRxiv* 2020.07.19.20157362 (2020) doi:10.1101/2020.07.19.20157362.
- <sup>18</sup> Jones, T. C. *et al.* An analysis of SARS-CoV-2 viral load by patient age. *medRxiv* 2020.06.08.20125484 (2020) doi:10.1101/2020.06.08.20125484.
- <sup>19</sup> Park, Y. J. *et al.* Contact Tracing during Coronavirus Disease Outbreak, South Korea. *Emerging Infectious Diseases journal CDC* 26, (2020).
- <sup>20</sup> Viner, R. M. *et al.* School closure and management practices during coronavirus outbreaks including COVID-19: a rapid systematic review. *Lancet Child Adolesc Health* 4, 397–404 (2020).
- <sup>21</sup> von Bismarck-Osten,C., Borusyak, K. and Schönberg,U.(2021), School closures did not contain the spread of the coronavirus in Germany, «Vox EU», May 8, https://voxeu.org/article/school-closuresdid-not-contribute-spread-coronavirus-germany.
- <sup>22</sup> Gras-Le Guen, C., et al. "Reopening schools in the context of increasing COVID-19 community transmission: The French experience." *Archives de Pédiatrie* 28.3 (2021): 178-185.
- <sup>23</sup> Davies N.G., Klepac P., Liu Y., Prem K., Jit M., Eggo R.M. Age-dependent effects in the transmission and control of COVID-19 epidemics. *Nat Med.* 2020;26:1205–1211.
- <sup>24</sup> Cevik M, Bamford CGG, Ho A. COVID-19 pandemic a focused review for clinicians. Clin Microbiol Infect 2020;26:842-847.
- <sup>25</sup> WHO, EPI Win & infodemic management. *What we know about COVID-19 transmission in schools*. 32 https://www.who.int/docs/default-source/coronaviruse/risk-comms-updates/update39-covid-and-schools.pdf?sfvrsn=320db233 2 (2020).

<sup>&</sup>lt;sup>1</sup> Lim, Abel Benjamin, et al. "The Economic Impact of School Closures in Malaysia." (2021).

<sup>&</sup>lt;sup>2</sup> Russell, L and C Sun (2020), "<u>The Effect of Mandatory Child Care Center Closures on Women's Labor Market Outcomes During the COVID-19 Pandemic</u>", *COVID Economics* 62: 124-154.

<sup>&</sup>lt;sup>3</sup> Caselli, F, F Grigoli, D Sandri, and A Spilimbergo (2020), "Mobility under the COVID-19 Pandemic: Asymmetric Effects across Gender and Age", Covid Economics 64.

<sup>&</sup>lt;sup>4</sup> UNICEF (2020), Families on the Edge Issue 2: Status of the households post-MCO, New York, United Nations Children' Fund.

<sup>&</sup>lt;sup>5</sup> Oberle, Eva, et al. "Screen time and extracurricular activities as risk and protective factors for mental health in adolescence: A population-level study." *Preventive Medicine* 141 (2020): 106291.

<sup>&</sup>lt;sup>6</sup> UNICEF (2021), Families on the Edge Issue 4: Two-steps forward, one step back: The new normal for Malaysia's urban poor?, New York, United Nations Children' Fund.

<sup>&</sup>lt;sup>7</sup> World Health Organization WHO 2020 global status report on preventing violence against children. <a href="https://www.unicef.org/media/70731/file/Global-status-report-on-preventing-violence-against-children-2020.pdf">https://www.unicef.org/media/70731/file/Global-status-report-on-preventing-violence-against-children-2020.pdf</a>

<sup>&</sup>lt;sup>8</sup> Rudd, James R., et al. "Physical literacy-A journey of individual enrichment: An ecological dynamics rationale for enhancing performance and physical activity in all." *Frontiers in Psychology* 11 (2020): 1904.

<sup>&</sup>lt;sup>9</sup> Robinson, Leah E., et al. "Motor competence and its effect on positive developmental trajectories of health." *Sports medicine* 45.9 (2015): 1273-1284.

<sup>&</sup>lt;sup>10</sup> Why It's Pointless to Target COVID-19 Clusters. https://codeblue.galencentre.org/2021/05/13/why-its-pointless-to-target-covid-19-clusters/