



**World Health  
Organization**

REGIONAL OFFICE FOR **Europe**

# Fourth meeting of the Technical Advisory Group on Safe Schooling During the COVID-19 Pandemic

**Copenhagen, Denmark  
9 March 2021**

## ABSTRACT

The Technical Advisory Group (TAG) on Schooling during the COVID-19 Pandemic was set up to provide strategic and technical advice to the WHO Regional Office for Europe on matters relating to schooling in times of COVID-19, including the epidemiology of school transmission, infection prevention and control and public health measures and their effects on the development and well-being of school-aged children. The TAG aims to identify findings from emerging evidence to inform policy decisions in terms of education, social, development and health outcomes for children and adolescents. This report is of the fourth TAG meeting, held in Copenhagen, Denmark, on 9 March 2021.

### Keywords

CHILD  
SCHOOL  
COVID-19  
SARS-COV-2  
SCHOOL TEACHER  
INFECTION CONTROL

WHO/EURO:2021-2197-41952-57642

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**Suggested citation.** Fourth meeting of the Technical Advisory Group on Safe Schooling During the COVID-19 Pandemic. Copenhagen, Denmark 9 March 2021. Copenhagen: WHO Regional Office for Europe; 2021.

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## Summary

Sars-CoV-2 has taken a heavy toll on children and adolescents, less because of the infection itself and more because of the infection control measures that affect their education, health and well-being. Previous meetings of the Technical Advisory Group (TAG) on Schooling during the COVID-19 Pandemic led to recommendations being made to European ministries of health and education. With increasing cases being seen in Europe since December 2020 and evidence increasing, the TAG revisited its recommendations.

Updates were presented to the TAG on the schooling situation. Children and adolescents in the Region have missed on average 22 weeks of schooling due to partial and complete closures of schools caused by COVID-19. A majority of Member States have been implementing increasing numbers of more severe measures, with some moving to transitioning students to distance learning. Two reviews presented to the TAG suggested that school closures have little impact on transmission dynamics, and that packages of interventions in schools (distancing, masks, hand hygiene and ventilation), applied in an age-appropriate way, should allow schools to stay open even with increasing numbers of infected people in the community. The effect of new variants of concern of SARS-CoV-2 was still not clear, and vaccinations being rolled out in Member States and the effects of both on keeping schools open needed studying.

A survey among teacher associations showed that key priorities to be addressed included digitalization in education, mental health and well-being, class sizes, education resilience, professional development and education recovery.

The TAG initiated its review on the eight key issues previously highlighted. There was agreement that closing schools should still be the last resort and opening schools should be the first priority. Young people in schools needed to be part of the decision-making process on prioritizing and implementing interventions that affect them. A detailed recommendations document will be finalized, endorsed by the TAG, and disseminated widely for impact in countries.

### Young voices

Youth representatives to the TAG presented a survey of schoolchildren and video interviews across the WHO European Region. The summary of the survey was:

- schools should not be closed if non-essential businesses (such as hairdressers and gyms) are allowed to open;
- school closures have been shown to be detrimental to child health and well-being and educational outcomes;
- education systems are lacking in readiness for online education;
- it is difficult to digest information via home-schooling;
- missing out on social interactions and interpersonal relationships is impacting on well-being; and
- teachers are losing their energy to provide lessons in an engaging manner.

## Background

Sars-CoV-2 has taken a heavy toll on children and adolescents, less because of the infection itself and more because of the infection control measures that affect their education, health and well-being. The WHO Regional Office for Europe has established a European regional Technical Advisory Group (TAG) on Schooling during the COVID-19 Pandemic to build an understanding of the effectiveness and adverse effects of infection prevention and control and other measures implemented in school settings and their impact on children's lives. The purpose of the TAG is to ensure that children's lives and education are as unaffected and uninterrupted as possible, while ensuring the safety of children, educators and other school staff and keeping COVID-19 transmission under control.

TAG meetings held in October and November 2020 led to recommendations being made to a high-level meeting of Member States' ministries of health and education in December 2020. A third TAG meeting in January 2021 reviewed the COVID-19 situation with a focus on the new variants of SARS-CoV-2 and discussed the possible impact of using recently licensed vaccines in the context of schools and children's health and education.

The general recommendations from the TAG at the end of 2020 were reflected in the opening remarks of the WHO Regional Director for Europe to the high-level meeting in December:

Schools are an essential part of society and children's lives and health and closing schools should always be a last resort in efforts to control a pandemic. While children are not the drivers of this pandemic, they risk being among its biggest victims: largely spared from the direct health effects of COVID-19 – most cases of COVID-19 in children are mild or asymptomatic – the measures put in place to control the pandemic are having a profound effect on their health and well-being. School closures and mitigations such as distance-learning approaches are going to have a negative effect on children's long-term educational outcomes.

Since early December 2020, with increasing cases in Europe, many countries have closed schools partly or totally. With evidence accumulating and experiences increasing, the TAG needed to revisit its previous recommendations for schooling in the time of COVID. The fourth meeting was dedicated to this review.

## Proceedings of the fourth TAG meeting

**Antony Morgan (Chair of the Technical Advisory Group and Professor in Public Health, Glasgow Caledonian University, United Kingdom)** opened and explained the purpose of the meeting, focusing on how the TAG provides strategic and technical advice to the WHO Regional Office for Europe on matters relating to schooling in times of COVID-19. This is particularly connected to the epidemiology of transmission in schools related to children, infection prevention and control and the effects of public health measures on the development and well-being of schoolchildren. A significant challenge facing the TAG has been keeping up with emerging evidence related to SARS-CoV-2 throughout the pandemic. A general request for continued support in identifying emerging pieces of evidence and presenting them to the TAG was expressed.

The purposes of the fourth TAG meeting were to:

- review key statements associated with each of the previous seven recommendations and endorse their accuracy in reflecting the advice provided to the Regional Office via the TAG; and
- receive new and updated evidence from various TAG members on key areas related to the terms of reference.

**Natasha Azzopardi-Muscat (Director of the Division of Country Health Policies and Systems, WHO Regional Office for Europe)** thanked all members of the TAG for the time and energy they had dedicated to this meeting and to ongoing collaboration. She noted that many children have had their schooling disrupted over the past weeks and months, resulting in severe impacts on their mental and social well-being. Looking forward, she expressed the hope that the recommendations may enable the Regional Office to provide advice and potentially intersect with a third school term in the WHO European Region. This should be understood in the context of two issues:

- variants of concern and their effects on keeping schools open
- vaccinations being rolled out in Member States across the Region.

She expressed the hope that in combination with infection prevention and control measures and more vaccinations of teachers and vulnerable groups, students will be able to remain in school settings for longer periods of time.

**Martin Weber (Regional Advisor for Child and Adolescent Health, WHO Regional Office for Europe)** reminded participants of the declaration of interest that should be completed by all TAG members if there has been any change in their conflict-of-interest status since the third TAG meeting.

## Youth perspective

**Emilia Carai (Copenhagen International School, Denmark)** provided an update on the Young People's Voices video survey results. The survey had 927 responses from 10–19-year-olds (635 girls, 270 boys, 22 not specified) in 16 countries. Emilia highlighted that concerns have been increasing, but not for the majority of those participating in the survey. Students who participated in the video survey described challenges they have faced through the pandemic, including:

- difficulty in taking in information via home-schooling
- the realization of the need for constant social interactions and interpersonal relationships

- teachers losing their energy to provide lessons in an engaging manner
- education systems lacking in readiness for online education.

The clearest impact of measures due to COVID-19 on schooling can be pinpointed in the decrease of physical activity seen across all age ranges. Respondents of all ages also reported negative impacts on mental health due to COVID-19 measures. They posed a series of clarification questions to the TAG:

- How many students have been affected by COVID-19?
- How many students have had severe cases of COVID-19?
- How many students have died due to COVID-19?

Emilia highlighted the need for the TAG recommendations to reach governments and the public. How, she asked, can we justify these closures to children whose mental health is suffering and whose education is being disrupted when there is little evidence to support the full closure of schools when minimal cases are found? A large number of the students surveyed are concerned about their personal safety as a result of COVID-19. This risk perception needs either to be confirmed by the TAG or clarified to schoolchildren as being unwarranted.

## **Overview of school measures and school closures**

**Kayla King (Consultant for Country Health Emergency Preparedness and the International Health Regulations, WHO Regional Office for Europe)** provided a comprehensive overview regarding school measures across the WHO European Region, including updates on rapid diagnostic testing, mask-wearing in schools and emerging trends. She emphasized that across the Region, a majority of Member States have been implementing increasing numbers of more severe measures, with some ultimately moving to transitioning students to distance learning. She presented a snapshot of how Member States currently are engaging in rapid diagnostic testing of students, teachers, education staff and community members. Countries are testing in a variety of ways, including combining testing with a hybrid model of teaching, defining testing as a requirement for teachers or education staff only, and even requiring parents or caregivers to present negative tests when picking up or dropping off children.

She also provided an update on requirements or recommendations for students, teachers and education staff to wear masks when in a school environment. Key takeaways include: mask-wearing is being required in specific environments of the school in many countries; children in primary schools are continuing to attend school in person while older students transition to distance learning, although the pattern is mixed across the Region; and rapid diagnostic testing increasingly is being implemented in Member States.

## **COVID-19, children and schools**

**Jonathan Suk (Senior Expert for Public Health Emergency Preparedness, European Centre for Disease Prevention and Control (ECDC))** presented the results from the ECDC's recently published rapid risk assessment (February 2021). It found the following:

- widespread transmission of variants of concern in community settings increases the chance of COVID-19 in school settings;
- there may be a need for further school closures due to outbreaks or to alleviate pressure on community transmission; and

- countries whose schools remain open need to review and strengthen in-school mitigation measures.

With proper and strengthened in-school mitigation measures (such as physical distancing), the use of hybrid models and keeping other people at home, it should be possible to keep the youngest students in school. Widespread transmission of variants of concern in community settings only increases the chances of COVID-19 in school settings.

He highlighted recent research published by Nature Communications that emphasized the prioritization of pre- and primary schools remaining open, allowing younger children to resume learning and development while older children continue with distance learning until the epidemic level has stabilized. A second piece of research looked at the effects of school closures among parents and teachers. The study highlighted an increased occupational risk to teachers, but no conclusive evidence that school opening had a significantly profound impact on transmission in communities was found. He concluded by emphasizing the need for strong in-school measures.

## **Impacts of school closures**

**Russell Viner (Professor of Adolescent Health, University College London Institute of Child Health, United Kingdom)** described a systematic review of observational data on the impact of schools reopening and community transmission. The review looked at studies with regional, national and timing differences (on the impact of schools on total population infection prevalence) and has been updated to 40 studies of school reopening and closures from the first pandemic wave, focusing on wild-type SARS-CoV-2. The data were too heterogenous to meta-analyse, but 32 studies that looked at school closures were found, ranging from a single-area focus on community transmission (pre-and post-closure) and pooled multiple-area studies (multiple countries, timings and impact of COVID-19).

It was found that most countries that closed schools implemented the closures simultaneously with other non-pharmaceutical interventions (NPIs), making it difficult to separate the effects of school closures from other NPIs. The studies attempted to resolve this in multiple ways (through, for instance, regression adjustment), but a very mixed picture emerged from studies covering moderate risk scales. Three of four studies across multiple countries found that reopening schools had no impact on later prevalence of SARS-CoV-2 in the community. The mixed findings depend, of course, on multiple variables such as quality of data, how schools were closed, how many students were in school, mixing outside of the school environment and age groups.

Professor Viner stated that closing schools will control the pandemic, but countries should not believe that school closures are a so-called magic bullet. He reiterated that a large portion of evidence suggests that school closures have little or no impact, or are not as effective as previously was believed. He emphasized that school closures need to be employed very carefully and that social mixing outside of school should also be reduced. When countries have adequate mitigations in place, schools can reopen with the expectation that the impact on community transmission will be moderate and will not lead to further epidemic increases.

## **Cochrane rapid review and evidence-based recommendations**

**Eva Rehfuess (Chair of Public Health and Health Services Research, Institute for Medical Information Processing, Biometry and Epidemiology, Pettenkofer School of Public Health, Ludwig-Maximilians University, Germany)** provided an update on the Cochrane rapid review



and German evidence-based guidelines regarding measures implemented in school settings in response to COVID-19. Three key takeaways emerged from the Cochrane rapid review regarding evidence on the effectiveness of school measures when schools are open or partially open:

- some interventions are relatively well researched (such as measures to reduce opportunities for contact, such as hybrid schooling), while others are barely researched at all;
- studies are almost exclusively concerned with infectious disease outcomes; and
- almost all studies were modelling studies.

She also highlighted three key strengths of the German guideline process:

- the composition of the guideline panel was extremely diverse (including, for example, students, teachers, parents, scientists and decision-makers);
- the key underlying piece of evidence was the Cochrane rapid review but the process also drew from systematic searches for so-called indirect evidence; and
- the benefits and harms were examined from a societal perspective, making use of the WHO-INTEGRATE framework, an evidence-to-decision framework particularly suitable for complex interventions in complex systems.

Key messages that emerged from the guideline process focused on packaging of measures (finding that singular measures are effective), dependence on levels of transmission and regional or local implementation. An overview of recommendations split into two groups was presented: packages of measures for prevention; and packages of measures for dealing with suspected cases. Evidence-based recommendations include those on reduced numbers of students taught in face-to-face learning environments or being cohorted. Additional evidence-based recommendations address appropriate mask-wearing by students, teachers and other staff, measures taken on the way to school and a general ventilation recommendation. All other recommendations are based on expert consensus rather than evidence.

## **Impacts on teachers across the Region**

**David Edwards (General Secretary, Education International)** highlighted survey results on equity impacts on schools and impacts on teachers. He reported that 15 out of 25 survey participants of teacher representatives at country level reported that they were often or always informed and consulted on COVID-19-related measures affecting education. The three broad areas in which dialogue is occurring identified by the survey are:

- occupational health and safety: priority vaccination for education staff, protection of at-risk education staff and opening or closure of education institutions;
- working conditions: managing an increased workload, virtual or hybrid working environments, teacher shortages and work–life balance; and
- professional issues: end-of-year exams, adapting student assessments, adapting the curriculum and ensuring adequate teaching materials.

Key priorities to be addressed in future dialogues include digitalization in education, mental health and well-being, class sizes, education resilience, professional development and education recovery.

## Discussion on key issues

Following the presentations, the TAG moved into the review of the seven key issues from previous TAGs. An additional key issue regarding vaccination of teachers as a means of keeping schools open (as discussed and supported in the third TAG meeting) was also presented to the TAG. Some issues raised more discussion than others, but due to time constraints, not all key issues were discussed fully. The TAG Chair reminded members that the key issues are recommendations from the TAG to the Regional Office, based on evidence and value judgements made by TAG members, and are not WHO recommendations. They should be accurate representations of the discussions during TAG meetings and should reflect ongoing evidence and findings. As there was insufficient time to complete a full review, it was agreed that proposals for changes to the text of each key issue would be sent by individual TAG members to the WHO Secretariat, which would then incorporate them and send back to members for approval.

Key issue 1, “Keeping schools open is a key objective”, had the most substantial discussion and generally was endorsed by the TAG. A main point that emerged from discussion focused on a relevant issue mentioned by the youth advisors to the TAG: schools should not be closed if non-essential businesses (like hairdressers and gyms) are allowed to open. An amendment was made to the key issue statement, “Schools should be among the last places to be closed, as school closures have been shown to be detrimental to child health and well-being and educational outcomes”, adding that “in general, schools should not be closed when non-essential businesses are still open”; this was agreed and endorsed by TAG members.

Key issue 2, “Testing strategy in the school setting”, followed, with further discussion about on whom testing may be targeted (such as students, teachers and education staff). Many TAG members supported the decision to make the statement more generic to encompass a larger swathe that may be included within testing upon returning to school (Box 1 presents two cases of the use of rapid diagnostic tests in the context of reopening schools in March 2021).

### **Box 1. The use of rapid diagnostic tests in the context of reopening schools in March 2021: country cases**

#### **Austria**

In addition to general mitigation measures such as distancing, hand hygiene and ventilation, mouth and nose masks have to be worn by children in grades 1–8. Children in grade 9 onwards and all teachers have to wear FFP2 respiratory masks. No masks are required for children and staff in nurseries, but staff members self-test twice weekly via a rapid antigen test. All children from primary school onwards self-test via anteronasal rapid antigen tests at least twice a week, guided by school staff. The anteronasal antigen tests used have a good negative-predictive value but a poor positive-predictive value. Children who test positive via an antigen result are sent for a confirmatory polymerase chain reaction (PCR) test by local authorities. **In calendar week 8, 619 of 1 016 234 tested pupils (0.06%) showed a positive antigen result, with 0.20% of teaching staff testing positive in the same period.** Unfortunately, lack of data means it is unknown how many people turned out to have a false-positive result.

#### **United Kingdom (England)**

Schools reopened from 8 March 2021. All teachers are offered home testing twice a week with a rapid test. All secondary school students were tested at least twice before they started school

(a week or so later), and all families with early years, primary and secondary school children and all families of education staff have home-testing twice a week. Children testing positive via an antigen result are not sent for a confirmatory PCR test. **Only 2588 positive results from 4.6 million lateral flow tests were detected in schools between 4 and 10 March (1).**

1. Weekly statistics for rapid asymptomatic testing in England: 4 March to 10 March 2021. In: Gov.uk [website]. London: Department for Health & Social Care; 18 March 2021  
(<https://www.gov.uk/government/publications/weekly-statistics-for-nhs-test-and-trace-england-4-march-to-10-march-2021/weekly-statistics-for-rapid-asymptomatic-testing-in-england-4-march-to-10-march-2021>, accessed 23 March 2021).

Discussion on key issue 3, “Effectiveness of applied risk-mitigation measures on infection control”, highlighted the evidence-based recommendations from the German guidelines, as they show the need to be specific regarding the wording of packages of preventive measures that enable in-school education. While the comparative value of individual measures is still not known, in general, no single measure alone is considered sufficient. It was suggested that school measures and mitigation measures be disentangled to avoid confusion regarding the effectiveness of measures implemented in schools.

Key issue 4, “Educational outcomes, mental and social well-being”, raised issues such as the key issue title becoming a strong indicator statement and a suggestion to include text that highlights mental and social well-being as a key focus of education recovery, adding that schools and health services should make mental and social well-being a priority.

Key issue 8, “Vaccination strategies with the purpose of maintaining education as a societal good”, is a new issue that is based on work carried out during the third TAG meeting. Many members raised issues about its phrasing and it was suggested that the phrasing be changed to reflect teachers being considered for priority rather than being prioritized over other vulnerable populations. Some TAG members emphasized that teachers should be considered for priority if this was the means to keep schools open.

## Main messages

- Children and adolescents in the Region have missed on average 22 weeks of schooling due to partial and complete closures caused by COVID-19.
- Even with the wider spread of more infectious variants, there is no evidence that schools contribute in a major way to community transmission: school closures will not control the pandemic.
- Packages of interventions in schools (distancing, masks, hand hygiene and ventilation), applied in an age-appropriate way, should allow schools to stay open even with increasing numbers of infected people in the community.
- Closing schools should be the last resort and opening schools should be the first priority.
- Young people in schools need to be part of the decision-making process on prioritizing and implementing interventions that affect them.

## **The way forward**

**Antony Morgan** concluded the discussion part by reassuring the TAG that its work would be recognized, as it has contributed significantly to identifying a set of issues that all countries in the European Region should be reflecting. He emphasized that the continued efforts of the TAG are needed, significant and impactful.

General agreement was reached among TAG members that they would submit their suggestions to the WHO Secretariat. Additional edits to the recommendations would then be organized by the WHO Secretariat and a revised version would be sent to all TAG members for final endorsement through an online voting process. The agreed recommendations would then be widely disseminated for impact in countries.

## *Annex 1*

### PROGRAMME

<b>9 March 2021, 10-12 a.m.</b>		
10:00 – 10:00	Opening the meeting and setting the scene	Antony Morgan, TAG chair  Natasha Azzopardi Muscat Director Country Health Policies and Systems
<b>Presentations</b>		
10:10 – 10:20	Young people’s voices: video and survey results	Emilie Carai
10:20 – 10:30	General update on status of school opening and mask wearing	Kayla King WHO EURO
10:30 – 10:40	Update from ECDC	Jonathan Suk ECDC
10:40 – 10:45	Updated systematic review on the impacts of school closures on transmission of COVID.  <a href="https://www.medrxiv.org/content/10.1101/2021.01.02.21249146v2">https://www.medrxiv.org/content/10.1101/2021.01.02.21249146v2</a>	Russell Viner University College London
10:45 – 10:55	Update from the Cochrane review and the German guideline development process	Eva Rehfuss Ludwig-Maximilians University, Munich
10:55 – 11:00	Update from Education International	David Edwards Education International
11:00 – 11:55	TAG recommendations <ul style="list-style-type: none"> <li>• Review of recommendations 1-7</li> <li>• Presentation of two country case studies relating to recommendation 2</li> <li>• Reflections and discussion</li> <li>• Voting on review recommendations</li> <li>• Presentation of the new recommendation, number 8, on vaccines</li> <li>• Voting on recommendation 8</li> </ul>	Antony Morgan TAG Chair Glasgow Caledonian University
11:55 – 12:00	Closure of the meeting	

## ANNEX 2

### LIST OF PARTICIPANTS

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## **The WHO Regional Office for Europe**

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

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WHO/EURO:2021-2197-41952-57642

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