

The science of the pandemic supports teachers' concerns over the dangers of school reopening—Part one

Benjamin Mateus
19 January 2021

This is the first of a two-part article.

The Democratic Party, under the leadership of President-elect Joe Biden, has set as one of its key initiatives the reopening of in-class instruction for all public schools across the nation amid a ceaselessly raging pandemic. This remains the final hurdle in fully implementing the policy of herd immunity.

The \$1.9 trillion economic rescue package being proposed to counter the economic downturn and COVID-19 crisis has earmarked \$400 billion for vaccine rollout and “safe school reopening.” After decades of austerity and dismantling of the institutions of public health and education by both the Democrats and Republicans, promises to fund efforts that would require years of investment to sustain these critical programs simply ring hollow.

In December, Biden pledged, “It should be a national priority to get our kids back into school and keep them in school. If Congress provides the funding, we need to protect students, educators and staff. If states and cities put strong public health measures in place that we all follow, then my team will work to see that the majority of schools can be open by the end of my first 100 days.” The number of “ifs” in this pledge should make one pause and ask “if” this should be construed as even a serious proposal.

To make good on his promise, Biden has turned to Connecticut’s education commissioner, Miguel Cardona, who spearheaded the opening of most schools in his state, to assume the helm as secretary of the Department of Education. In this regard, the Democratic Party is preparing to carry the baton in a race to open all aspects of society in complete unity with the plans of outgoing President Donald Trump and the Republican Party.

In November, Cardona made significant remarks that have no basis in science, but are aimed at sustaining a certain pretense of concern for education: “Closing schools alone would not reduce ... the transmission risk in other places,” he said. “In school, we know that students have their mitigation strategies, like distancing and facial coverings.”

This statement not only denies that schools are vectors for the pandemic, but suggests that removing children from schools would actually endanger them, making them more vulnerable to ongoing chains of infections in communities. Later we will address the specific science on these assertions.

Cardona then proceeded to appeal to educators’ concern for their students as a means of browbeating them to go back to schools. “There’s no way to ensure that’s happening outside of school when they’re not with us,” he said. “What we’re learning ... it’s families in

already challenged communities that are under-resourced, that need more support. So, by doing these things [opening schools], we’re not only bringing the issue up, we’re using that to guide whatever resources we distribute.”

More sophisticated than Trump’s obvious indifference to the consequences for either teachers or students, this patronizing form of persuasion is a dangerous proposition when confronting a deadly virus that is running rampant throughout the country.

Appealing to teachers’ emotions

Like Cardona’s argument, a recent provocative policy piece authored by the dean of the School of Public Health at Brown University, Dr. Ashish Jha, and Professor of Economy Emily Oster, titled, “Schools and the path to zero—Strategies for pandemic resilience in the face of high community spread,” begins with an introduction aimed at appealing to teachers’ emotions rather than bullying them Trump-style.

They write, “Schools fill essential functions in our society including education, childcare and provision of nutrition and health. School closures, combined with the lack of paid leave and limits on support for small businesses, have had profound impacts. Parents are forced out of work. The deep inequities of American society are reinforced and expanded. Despite the best efforts of education districts, there is no doubt that remote instruction generates large learning gaps and links to higher rates of mental illness, while depriving children of formative social and peer relationships. For untold thousands of children, schools are their only source of healthy meals. And for too many children, they are a refuge from precarious home life, a place where observant teachers can be a safety net. Some children will struggle to make up the growing social and educational deficit caused by prolonged school closings.”

The appeal to teachers’ concern for their students is quite obvious. Children are supposedly safer at school than at home, both from the virus and their irresponsible parents. Children’s health and nutrition can be better monitored at school while they receive critical educational instructions to assure them future success. Meanwhile, their parents need to return to work to ensure they can bring home a paycheck. But acknowledging deep social inequities is a far different thing than proposing how they can be overcome. In fact, the authors

present these inequities as a permanent fixture of American life that has to be tolerated. Like COVID-19, poverty and deprivation just have to be lived with.

Once schools are reopened, they can't be shut again, the authors clearly believe. They openly state that closing schools to contain outbreaks should be a measure of last resort. When one begins to parse through the details that are enumerated under subheadings like "Four challenges for trust," "Infection control team in every school," "Occupational safety and health standards" and "Weekly COVID testing," one is struck by the underlying contradictions in these formulations. They sound wonderful, but no resources are being provided to put them into effect. On the contrary, years of underfunding and austerity have made the United States the ideal place for the coronavirus to spread.

The vaccine rollout debacle has only been the latest in the missteps and ineptitude that have characterized the country's response to the health crisis. What has indelibly been imprinted on the consciousness of the working class are the harrowing images of beleaguered health care workers without PPE, presidential promises of quack cures, mile-long lines of cars waiting hours at food banks and testing centers, and the bodies of their families and friends piled up in refrigerated containers waiting to be buried.

Public health is the cornerstone in the fight against any pandemic. Regardless of various therapeutics being touted or promises of vaccines that have yet to arrive, without these measures in place, no society stands a chance against viral infection of epidemic potential.

Testing and contact-tracing

Briefly, looking at the contact-tracing situation in the US, according to the website, "test and trace," 40 states have received a failing grade in their contact tracing infrastructure. They are not planning to hire more staff to account for a rise in cases. New York state, which has one of the most robust programs in the country, is short 12,482 tracers. California is projected to need another 26,129 if it plans to address the present acute crisis.

Last July, the American Medical Association told House and Senate leaders that at least 100,000 or more contact tracers are needed "to meaningfully control the transmission of the virus as states continue to lift social distancing restrictions." At a minimum, a robust testing program should test enough symptomatic people and their contacts to yield no more than a 3 percent positivity rate before considering reopening the economy. This requires that 70 to 90 percent of contacts for infected individuals be identified, isolated or quarantined. There are presently 67,050 contact tracers in the nation. The United States is short 635,967 contact tracers. It is no wonder any such discussions on these issues are mute in the mainstream press.

The primary focus of the Biden administration's plan to reopen schools is testing. But the fundamental reason for testing is that it is an essential adjunct to the contact-tracing programs. It functions at a social level to locate where the virus is and where it is going and allow measures to contain the spread. A standalone test merely to inform a person of their status on the given day, at the given hour, has quite limited utility. Yet, testing is now erroneously being conducted to open sporting venues, allow air travel to vacation destinations and bolster the fraudulent back-to-school campaign.

The whiteRockefellerpaper, *Foundations for Resetting of America's Response to COVID-19*, is a prospectus that dovetails in this effort with Biden's initiative. It declares: "Our third Action Plan lays out a new plan for the largest domestic testing scale up to date and proposes 14 executive actions for the current and incoming administrations to take in order to rapidly alter the trajectory of the pandemic in the United States. Testing all US public K through 12 schools would cost \$42.5 billion, or \$8.5 billion per month for the remainder of the school year from February to June 2021."

The plan proposes to test every child once a week and all staff twice a week. They affirm that by the end of January, the country will likely be able to conduct more than 70 million tests each week, and this would rapidly climb to 200 million by April. They do acknowledge at the end of their lengthy report that the American Federation of Teachers has estimated that an additional \$116.5 billion would be required for more staff, PPEs, enhanced cleaning, additional safety measures, *excluding testing and building upgrades* (emphasis added). It bears pointing out that since mid-November, the US testing capacity has stagnated, ranging from 10 million to 14 million tests a week.

It is essential to place the scope of the reopening school efforts in its correct scale.

There are 53.1 million K-12 students who are enrolled in an assortment of public, private and charter schools. More than 18 million young adults attend college and universities. More than 10 million educators, staff and sundry personnel help run these institutions. The US has approximately 13,600 school districts, close to 131,000 schools, of which 56,000 are elementary, 18,000 middle and 25,000 high schools. The average public school's enrollment is 528 students.

This implies that, at a minimum, 90 million tests a week have to be administered just to this sector with all the problems that rapid antigen tests have with accuracy. Adding further complexity to the issue, the Centers for Disease Control and Prevention has also recently published a study that confirms that at least 60 percent of all infections are caused by asymptomatic people, which puts into question the ability to pick up new infections with such a strategy. A test can only inform a person of their status at the moment the test is taken. If they become infective hours or days later, this may be completely missed.

To be continued



To contact the WSWS and the
Socialist Equality Party visit:

wsws.org/contact