

Alison Middleton

From: Natalie Wilson <ndwbooks@gmail.com>
Sent: Thursday, September 9, 2021 5:43 PM
To: Clerk
Subject: Comments for Special Session Sept 9, 2021
Attachments: Opinion Actually, Wearing a Mask Can Help Your Child Learn - The New York Times.pdf; The Covid Variant in Schools What to Know - The New York Times.pdf; Opinion Universal Masking Can Protect Students From Covid - The New York Times.pdf

Follow Up Flag: Follow up
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To: Leelanau County Board of Commissions

From:

Natalie Wilson

Date:

September 9, 2021

Re: Special Session called for "Discussion/Potential Action" regarding the Benzie/Leelanau District Health Department Mask Order

I am a resident of Kasson Township. I am also a graduate of the School of Public Health at the University of North Carolina at Chapel Hill. I offer these comments in support of the Benzie-Leelanau District Health Department and their August 27, 2021 order regarding universal masking indoors at schools.

In my view, the only "discussion/potential action" that should be taken regarding our health department and the masking order is to thank them for their continuing dedicated efforts to combat COVID-19 and to ask them how the Board of Commissioners can better support their efforts.

I have been consistently impressed by the dedication, competence, and professionalism our health department has displayed since the beginning of the pandemic under extremely challenging and changeable conditions. They have been my go-to source for information and services regarding COVID-19. Our health department has provided exemplary service to our community in many ways, including:

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- Providing concise, easy-to-understand,
• and reliable information regarding the ways COVID-19 is transmitted and symptoms of the disease
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-
- Updating information as understanding
• of the disease has evolved over the course of the pandemic
-
-
- Maintaining up-to-date information
• regarding testing resources and clinics;

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-
- Conducting contact tracing and related services to limit outbreaks when they have occurred;
-
-
- Compiling data and issuing regular press releases regarding incidence and trends of cases, hospitalizations, and deaths within our community
-
-
- Serving as a trusted resource for information regarding vaccine development, safety, eligibility, and local availability
-
-
- Offering numerous accessible and convenient vaccination clinics
-

Their efforts have resulted in vaccination rates among Leelanau county residents that exceed statewide rates by 20 percentage points or more. As of September 1, fully 78.8% of our residents ages 12 and over have received their first dose of vaccine, and 74.6% are fully vaccinated. In contrast, statewide rates are 60.5% and 55.9%, respectively.

The leadership and staff of our health department are true heroes. Through their service, they have demonstrated their commitment to the health and well-being of our community. They deserve our deepest respect, gratitude, and especially our trust.

Our health department's August 27 order on masking is clear, well-reasoned, well-supported by reliable data, and in the best interests of all members of our community, from the youngest to the oldest. Issuing it is clearly within their authority and absolutely consistent with their mission and responsibilities.

Not all of our school students, teachers, administration, staff, and volunteers are eligible for or have received vaccinations. While vaccinated people are far less likely to contract or transmit COVID-19, masking is proven to be highly effective in limiting transmission. Universal masking is the simplest way to protect everyone without requiring students to disclose vaccination status, imposing additional burdens on school staff to keep track, or creating social divisions among students based on who is masking and who is not.

Regarding masking in schools and the particular challenges posed by the Delta variant, I call your attention to three articles (attached) that explore the issues. The main points:

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- The Delta variant is more harmful to and more likely to be transmitted by children.
-
-

- Masking is effective in limiting transmission of COVID-19.
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-
- Masking is not detrimental to children's development in general or their education in particular.
-
-
- Because it helps prevent disease transmission and illness, masking presents an opportunity to teach children to practice caring for their community
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Our health department has told us that masks are needed. We should accept their wisdom, and take the opportunity to make the best of it.

To quote from the article by Judith Danovitch, a research psychologist who studies the cognitive and social development of children, "Masks are inconvenient, uncomfortable, and bothersome. But as long as they are needed, we should take advantage of the fact that they offer distinctive opportunities for learning and growth."

I hate COVID-19 and the way it has disrupted everyone's lives just as much as the next person. Like everyone else, I would rather never see or wear a mask again. However, wearing a mask is a small sacrifice to make to protect others. COVID-19 is no joke. A dear friend of mine lost her mother to it. In November 2020, my own parents, both in their 80s, contracted COVID-19 at the senior community where they live in Traverse City. The disease put them both in Munson for weeks. It was the first hospital stay of my father's life. COVID-19 permanently damaged his heart. My mother was receiving the maximum oxygen they could deliver short of putting her on a ventilator, and the doctors were preparing us for her death. She made a sudden and miraculous turnaround, but still hasn't fully recovered and regularly requires supplemental oxygen.

Thank you for your consideration of my comments.

Natalie Wilson
9307 S Novak Rd
Cedar

Attachments:

Anthes, Emily. "The Delta Variant in Schools: What to Know." New York Times. Published August 2, 2021. Updated August 27, 2021.

Danovitch, Judith. "Actually, Wearing a Mask Can Help Your Child Learn." New York Times. Published August 18, 2021.

Zimmerman, Kanecia and Benjamin Jr., Danny. "We Studied One Million Students. This is What We Learned about Masking." New York Times. Published August 10, 2021.

The New York Times | <https://www.nytimes.com/2021/08/10/opinion/covid-schools-masks.html>

GUEST ESSAY

We Studied One Million Students. This Is What We Learned About Masking.

Aug. 10, 2021

By Kanecia Zimmerman and Danny Benjamin Jr.

Dr. Zimmerman is an associate professor of pediatrics at the Duke University School of Medicine. Dr. Benjamin is a pediatric-infectious-disease specialist at Duke Health.

Big questions loom over the upcoming back-to-school season: Should children be required to wear masks? Should children go to in-person classes at all?

If we send children to school without masks, we increase their risk of acquiring Covid-19. Some could suffer illness or die. If we close schools, millions of children will suffer learning loss, and many of them may suffer lifelong effects on their physical and mental health.

For more than a year, we've worked with North Carolina school districts and charter schools, studying the rate of new Covid cases, the efficacy of mitigation measures such as masking and the increased risks of participating in school-sponsored sports. We have learned a few things for certain: Although vaccination is the best way to prevent Covid-19, universal masking is a close second, and with masking in place, in-school learning is safe and more effective than remote instruction, regardless of community rates of infection.

Vaccination is the strongest method for preventing the ill effects of Covid, but students under 12 years of age are ineligible for the vaccines. Masking, then, is one of the best, most readily available methods to protect them from the disease, with universal masking being one of the most effective and efficient strategies for preventing SARS-CoV-2 transmission in schools.

Universal masking in schools can save lives. Voluntary masking in schools will likely be much less effective and could lead to school closures and community transmission. This summer, we've seen that voluntary masking has failed in some schools in Missouri and North Carolina, which saw increases in Covid-19 cases and days missed because of quarantines, prompting several districts to reinstate mask mandates.

OPINION CONVERSATION

Questions surrounding the Covid-19 vaccine and its rollout.

- **What are the next steps for the U.S. in fighting the pandemic?**
Two academics who have studied the disease make a case for tying specific goals to every new Covid-19 policy.
- **Are mask mandates a problem for civil liberties?**
Two writers from the A.C.L.U. argue that actually, it's quite the opposite.
- **What do you say to a friend who doesn't want the vaccine?**
Our chatbot, developed with experts, tackles this thorny conversation.
- **Will masking in schools have negative effects on learning?**
Judith Danovitch, a research psychologist, explains why there's little reason to worry, and why face coverings may even offer unexpected benefits.

How do we know that masking helps prevent spread among unvaccinated people in schools? In July 2020, we and our colleagues developed the ABC Science Collaborative to pair scientists with school and community leaders to make sure that school leaders had the most up-to-date, scientific information pertaining to Covid-19 and K-12 schools. In conjunction with North Carolina, the ABC Science Collaborative collected data from more than one million students and staff members in the state's schools from March to June 2021. Certain school districts in North Carolina were required, by bipartisan legislation, to submit infection data to the ABC Science Collaborative as a trusted third party.

During that time, more than 7,000 children and adults acquired the coronavirus and attended school while infectious. Because of close contact with those cases, more than 40,000 people required quarantine. Through contact tracing and testing, however, we found only 363 additional children and adults acquired the coronavirus. We believe this low rate of transmission occurred because of

the mask-on-mask school environment: Both the infected person and the close contact wore masks. Schools provided this protection without expensive screening tests for the coronavirus or massive overhauls in ventilation systems.

Because North Carolina had a mask mandate for all K-12 schools, we could not compare masked schools to unmasked schools. To understand the preventive impact masks can have, we looked outside North Carolina for comparisons. Data from our research and from studies conducted in Utah, Missouri and Wisconsin shows that school transmission rates of coronavirus were low when schools enforced mask mandates. By contrast, one school in Israel without a mask mandate or proper social distancing protocols reported an outbreak of Covid-19 involving 153 students and 25 staff members.

Recent outbreaks at youth camps in Texas, Illinois and Florida show how quickly Covid-19 can spread among adolescents and adults who are largely unmasked and mostly unvaccinated, with the possibility of spreading into surrounding communities. The potential for this kind of community spread was the reason schools closed their doors in March 2020.

With the evidence now clear that universal masking is linked to lower spread, why not require universal masking? Why seek to gather hundreds of unvaccinated, unmasked individuals in an enclosed space for several hours a day, five days a week?

Schools that do not require masks will have more coronavirus transmission. And while mortality from Covid was only two per 100,000 school-age children as of April, with more than 50 million public school children in the United States, that could still mean many avoidable deaths of children in a year.

Once vaccination is available for all children, districts can serve their students best by creating incentives to encourage masking and vaccination. For example, if universal masking is enforced or a student is vaccinated, it's reasonable for schools to decide not to require quarantining or testing after exposure for asymptomatic children and adults. Similarly, schools may consider allowing vaccinated students who participate in extracurricular activities to continue even if they've been exposed to someone who tested positive. School districts that do not have universal masking should keep using strategies like ventilation and social distancing and continue to perform routine testing for unvaccinated students.

In schools that choose to open without mask mandates and with limited vaccine uptakes, increased Covid is likely. Until all children can get vaccinated, masks remain a well-researched solution for lowering the risk of getting Covid. Children should be in school, and we should embrace the

measures that can keep them safe.

Kanecia Zimmerman is an associate professor of pediatrics at the Duke University School of Medicine. Danny Benjamin Jr. is a pediatric-infectious-disease specialist at Duke Health and the Kiser-Arena distinguished professor of pediatrics at the Duke University School of Medicine.

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The New York Times | <https://www.nytimes.com/2021/08/18/opinion/masks-schools-covid.html>

GUEST ESSAY

Actually, Wearing a Mask Can Help Your Child Learn

Aug. 18, 2021

By Judith Danovitch

Dr. Danovitch is a research psychologist who studies the cognitive and social development of children.

Opponents of mask mandates for preschool and elementary-school children have expressed concern that wearing masks will impair children’s ability to learn language and socialize — or worse, that (in the words of one anxious parent in Utah) it will “rewire their brains.” Even parents who support mask mandates often worry about how a school year without smiles and frowns might negatively affect their children.

These concerns are understandable but unwarranted. Although scientists don’t have much data yet on how wearing masks during a pandemic affects children’s development, there is plenty of reason to believe that it won’t cause any harm. Children in cultures where caregivers and educators wear head coverings that obscure their mouths and noses develop skills just as children in other cultures do. Even congenitally blind children — who cannot see faces at all — still learn to speak, read and get along with other people.

Indeed, there is good reason to believe that wearing a mask at school could actually improve certain social and cognitive skills, helping to strengthen abilities like self-control and attention. This is not to say that masks are preferable to no masks, all things being

equal. Masks are inconvenient, uncomfortable and bothersome. But as long as they are needed, we should take advantage of the fact that they offer distinctive opportunities for learning and growth.

Take language learning. It's true that masks cover our mouths and that seeing mouth shape and movement contributes to language development in infants. But learning how to communicate involves a lot more than mouths — a reality that masks accentuate. It turns out that looking at eyes is at least as important as looking at mouths to understand whom you are looking at and what they are trying to convey. Eye-tracking research shows that by age 2, typically developing children spend more than twice as much of their time looking at adult speakers' eyes as at their mouths. In fact, children with a stronger capacity to discern people's thoughts and emotions based on their eyes alone exhibit greater social-emotional intelligence.

Children also rely on other cues, such as prosody, gesture and context, to figure out what new words mean and what other people are thinking. Sometimes these cues are subtle. A classroom full of people wearing masks is a great opportunity for children to practice paying attention to those cues, such as a peer's tone of voice or a teacher's body language.

Wearing a mask can also help teach children to pay more attention to their own bodies and physical behaviors. Keeping a mask on over the course of a school day involves the kind of self-control and self-regulation that many children find challenging. Younger children must inhibit the urge to pull off their mask, and older children must be mindful of when their mask is slipping down or when it's OK to take it off.

Needless to say, children will not always be perfect at keeping their masks on. But the research on self-control and self-regulation suggests that children who master the skills needed to keep their masks on will grow up to be better at achieving their long-term goals, solving problems and handling stressful situations. (For children who habitually bite their nails or pick their nose, a mask could also be precisely what they need to kick the habit.)

Perhaps most important, wearing masks during a pandemic is an opportunity for even young children to practice caring for their community. By preschool, children can understand that invisible “germs” can cause illness and that behaviors such as hand-washing can keep germs from spreading. A recent study shows that children living through the Covid-19 pandemic understand illness transmission better than ever. During a time of anxiety and uncertainty, wearing a mask gives young children the ability to do something to help protect other people.

For older children, mask wearing is a way to teach more sophisticated ethical concepts like duty and sacrifice. By age 7, for example, children believe that it feels good to make sacrifices on behalf of others in need. Stressing that the discomfort and inconvenience of mask wearing are forms of generosity and public service might motivate children to address other social problems in their lives, like bullying.

Ultimately, how children feel about wearing masks at school, and how much they psychologically benefit from wearing them, is going to depend on how the parents, teachers and caregivers around them present the issue. Masks are hopefully not here to stay, but while they are still necessary, we should make the most of them.

Judith Danovitch (@JudithDanovitch) is an associate professor of psychological and brain sciences at the University of Louisville and a Learning Sciences Exchange fellow at New America.

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The New York Times | <https://www.nytimes.com/2021/08/02/us/covid-schools-delta-variant.html>

The Delta Variant in Schools: What to Know

Classrooms are opening their doors to a different pandemic. Here is how to think about risk.

By Emily Anthes

Published Aug. 2, 2021 Updated Aug. 27, 2021

Last week, in what was intended to be an internal document, the Centers for Disease Control and Prevention made a stark admission: The highly contagious Delta variant had redrawn the battle lines of the coronavirus pandemic, necessitating new public health measures like universal mask mandates. Or, as the agency put it in the document, which was obtained by The New York Times, “the war has changed.”

The news came just as the first school districts were preparing to reopen; children in Atlanta and some of its suburbs head back to the classroom this week.

Over the past year, there has been contentious debate over how much schools contribute to the spread of the virus and whether, and when, they should close. For some parents, teachers and officials, keeping schools open when a new, poorly understood virus was circulating seemed like an unacceptable risk. For others, however, it was school closures that posed the bigger danger — of learning loss, widening educational disparities and worsening mental health, not to mention the hardships for parents.

As the new school year begins, however, the C.D.C., the American Academy of Pediatrics and many other experts agree that reopening schools should be a priority.

“We are in a very different place than we were a year ago,” said Elizabeth Stuart, an epidemiologist at Johns Hopkins Bloomberg School of Public Health. “We have very effective vaccines, we know a lot more about how to open schools safely, and we, I think, have a heightened awareness of some of the challenges that kids face when they’re not in in-person school.”

Signs encouraging social distancing are commonplace at schools across the country. James Estrin/The New York Times

Just a few months ago, with vaccinations for those 12 and older proceeding at a steady clip and new cases declining, the stage seemed set for at least a partial return to normal.

Delta has thrown that into question. Much remains unknown about the variant, including whether it affects children more seriously than earlier forms of the virus. And with vaccination rates highly uneven, and most decision-making left up to local officials, the variant adds new uncertainty to the coming school year — and makes it even more critical for schools to take safety precautions as they reopen, scientists said.

“Delta, because it’s so contagious, has raised the ante,” said Dr. William Schaffner, medical director of the National Foundation for Infectious Diseases and a vaccine expert at Vanderbilt University. “It makes all these details all the more important.”

Here are answers to some common questions.

What have we learned about the risk of transmission in schools?

Overall, studies suggest that — last year at least — in-school transmission was generally low when schools took basic precautions.

“When you have masks and even three-foot distancing, you are not going to see major outbreaks in schools,” said Dr. Yvonne Maldonado, a pediatric infectious-disease specialist at Stanford Medicine and chair of the American Academy of Pediatrics Committee on Infectious Diseases. “There may be some transmissions, but they’re going to be pretty relatively infrequent.”

Understand the Delta Variant

- **What We Know:** The variant is spreading rapidly worldwide and fueling new outbreaks in the U.S., mainly among the unvaccinated. Here’s what scientists understand about it so far.
- **Guidance for the Vaccinated:** The rise of the Delta variant of the coronavirus has raised new questions about how the vaccinated can stay safe and avoid breakthrough infections. We asked the experts for advice.
- **Who Is Being Hospitalized:** People with compromised immune systems and the unvaccinated make up a high percentage of patients who end up in the hospital in N.Y.C.
- **Delta Variant Map:** The patchwork nature of the coronavirus vaccination

campaign in the United States has left people in many parts of the country still vulnerable to the virus and the fast-spreading Delta

- **Delta and Schools:** Classrooms are opening their doors to a different pandemic. Here is how to think about risk.

Studies in North Carolina, Utah, Missouri and elsewhere revealed that when schools layered several kinds of safety measures — some combination of masking, symptom screening, distancing, improved ventilation, virus testing, handwashing and dividing students into smaller groups — transmission rates in schools were even lower than they were in the surrounding community.

“It’s actually safer for the kids in school than it is for them to be home,” said Dr. Daniel Benjamin Jr., a specialist in pediatric infectious diseases at Duke University.

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Join Dr. Anthony Fauci and Times journalists (who are parents themselves) for a vital Q&A session for parents, educators and students everywhere.

Susan Elsamna taught her students in Edison, N.J., how to socially distance last fall. Victor J. Blue for The New York Times

These low rates may stem, in part, from the fact that children under 10 seem to be less likely to transmit the virus than older children and adults are. But another contributing factor is that schools are — or can be — controlled environments and may have stricter safety measures than the surrounding community, Dr. Benjamin said.

Outbreaks, however, have occurred in schools that reopened without good mitigation measures. Israel's first big school-based outbreak, which ultimately infected 260 people, came during a heat wave, when officials temporarily lifted a mask mandate and students were crowded into air-conditioned classrooms.

How does Delta complicate the equation?

Roughly twice as transmissible as the original version of the virus, Delta has fueled a rise in infections and hospitalizations, especially in areas of the country where vaccination rates are low. Recent data suggests that people who are infected with Delta may carry a thousand times as much virus — which could make them more contagious and for longer — as those who catch the original version of the virus.

But many questions about the variant remain unanswered, including the precise risk it poses in a school setting. What is clear, however, is that Delta is already driving outbreaks in many American communities, which raises the risks for local schools.

“Schools are not islands and so if there’s a lot of community spread some of that spread is going to spill over into schools,” said Dr. Westyn Branch-Elliman, an infectious-disease specialist at Harvard Medical School.

In a study conducted before Delta was widespread, British researchers found that for every five additional cases per 100,000 people in a community at large, the risk of a school outbreak increased 72 percent.

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The good news is that since the last school year started, the United States has authorized three highly effective vaccines for emergency use, and they are widely available to those 12 and older.

The vaccines are not flawless. Some fully vaccinated people will get breakthrough infections, which are generally mild and rare. And those vaccinated people who are infected with Delta can carry high levels of the virus in their noses and throats, which means they may be able to readily transmit it.

But vaccines provide strong protection against the Delta variant. They reduce the odds of being infected with the virus and guard against the worst outcomes, including hospitalization and death.

Loida Hill, 13, receiving a dose of the Pfizer-BioNTech vaccine in New York in May. James Estrin/The New York Times

Schools with high vaccination rates are likely to have far fewer people who are infected with the virus and carry or spread it in the classroom.

“It’s our best tool for controlling the virus,” said Justin Lessler, an epidemiologist at the University of North Carolina. “Even when it’s imperfect, it has huge impacts on reducing transmission and protecting people’s health.”

What does the C.D.C. recommend?

Initially, the C.D.C.’s guidelines recommended that unvaccinated people who were 2 or older wear masks in schools. And they strongly implied that vaccinated students did not need to be masked in the classroom.

But last week, because of concerns about Delta, the C.D.C. revised its guidelines, recommending that everyone, regardless of vaccination status, wear masks in schools this fall.

A face mask in a school parking lot in Odessa, Texas. Tamir Kalifa for The New York Times

The agency recommends a layered approach to Covid precautions, suggesting that schools combine several mitigation measures and encourage everyone who is eligible for vaccination to get vaccinated.

But the guidelines also leave many decisions up to local officials, who are told to make decisions about when to tighten or loosen restrictions based on data about local case and vaccination rates.

What about states that ban mask mandates?

Some states, including some currently experiencing major surges — including Florida, South Carolina and Texas — are making it harder for schools to put protective measures into place. Those three states, as well as a handful of others, have either banned or sharply curtailed universal mask mandates.

That does not necessarily mean that schools in these states will all have huge outbreaks, and even schools that do may see mostly mild or asymptomatic cases. But districts that open without safety measures in place are taking a real risk, Dr. Benjamin said.

“Here’s another way to put it,” he said. “When I grew up, I got away with riding in the back of a pickup truck all the time. But that does not make children riding in the back of pickup trucks good national policy.”

Families protesting potential mask mandates ahead of a Hillsborough County School Board meeting in Tampa, Fla., last month. Octavio Jones/Getty Images

Given the patchwork of policies and uneven vaccination rates across the country, experts said they would not be surprised if school safety varies widely this fall. “I do think that there will be risks of infections when school districts decide to not follow any recommendations,” Dr. Maldonado said.

As the pandemic continues to evolve, schools and officials will need to make complicated decisions based on local conditions, including when to insist on certain precautions and when it is safe to lift them.

“We need to be making nuanced decisions about what to do in schools,” Dr. Branch-Elliman said. “But that’s a much harder public health message than the polarized ‘Schools are safe’ or ‘Schools are unsafe.’”

What about unvaccinated elementary school students?

Although the exact timeline is unclear, vaccines for some children under 12 could be authorized before the end of the year. Until then, however, elementary schools will open with essentially none of their students vaccinated. (Children who are participating in the trials may have received the shots.)

Research shows, however, that the virus is much less likely to cause severe illness in children. They are not entirely protected; a small number of children may develop a rare but serious inflammatory condition, and some children with mild infections may experience long-term symptoms.

Masking requirements outside of an elementary school in Austin, Texas, in December. Sergio Flores for The New York Times

There is not yet good, solid data on how Delta affects young children, but there is no evidence that Delta is specifically targeting them.

Still, because a large number of adults have been vaccinated, children may make up an increasing share of Delta cases. The variant’s infectiousness may also mean that more children contract the virus. There is also some emerging evidence that the variant is causing more severe disease in adults.

Given these observations, and out of an abundance of caution, it is particularly important for schools with young, unvaccinated students to take other precautions, including universal masking, experts said.

In schools or districts that do not have mask mandates, parents can provide some degree of protection by ensuring that their children, at least, wear masks to school, Dr. Maldonado said.

And adults can help protect younger children by getting vaccinated themselves. “The single most important thing any community can do in order to reduce the risk in schools is for the entire community to be vaccinated,” Dr. Schaffner said.

GUEST ESSAY

We Studied One Million Students. This Is What We Learned About Masking.

Aug. 10, 2021

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Recent outbreaks at youth camps in Texas, Illinois and Florida show how quickly Covid-19 can spread among adolescents and adults who are largely unmasked and mostly unvaccinated, with the possibility of spreading into surrounding communities. The potential for this kind of community spread was the reason schools closed their doors in March 2020.

With the evidence now clear that universal masking is linked to lower spread, why not require universal masking? Why seek to gather hundreds of unvaccinated, unmasked individuals in an enclosed space for several hours a day, five days a week?

Schools that do not require masks will have more coronavirus transmission. And while mortality from Covid was only two per 100,000 school-age children as of April, with more than 50 million public school children in the United States, that could still mean many avoidable deaths of children in a year.

Once vaccination is available for all children, districts can serve their students best by creating incentives to encourage masking and vaccination. For example, if universal masking is enforced or a student is vaccinated, it's reasonable for schools to decide not to require quarantining or testing after exposure for asymptomatic children and adults. Similarly, schools may consider allowing vaccinated students who participate in extracurricular activities to continue even if they've been exposed to someone who tested positive. School districts that do not have universal masking should keep using strategies like ventilation and social distancing and continue to perform routine testing for unvaccinated students.

In schools that choose to open without mask mandates and with limited vaccine uptakes, increased Covid is likely. Until all children can get vaccinated, masks remain a well-researched solution for lowering the risk of getting Covid. Children should be in school, and we should embrace the

measures that can keep them safe.

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