

Message

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Sent: 7/27/2020 7:46:19 PM
To: Caputo, Michael (HHS/ASPA) [REDACTED]; Witkofsky, Nina (CDC/OD/OCS) [REDACTED]; Traverse, Brad (HHS/ASPA) [REDACTED]
Subject: Final rebuttal to the MMWR CDC piece on the 50% spread of COVID in Georgia camps

Hi Michael, as requested, here is the piece to rebut that poor CDC MMWR...I am not sure where it can be published but this has very re-assuring information and even for the White House. You can now tweak this how you wish.

Title: Safe re-opening of schools across America - case in point: YMCA of America, New York City's Department of Education, and Brown University

In the era of COVID-19, parents across the USA, and globally, are quite rightly concerned about their children's safe return to school. Government leaders, policy makers, school administrators, parents, and even children are spending vast amounts of time considering how a safe re-opening of schools could take place in September 2020 (or thereabouts). This on the heels of accumulating evidence that it is imperative that schools re-open for children given the negative impact of school closure on the social, psychological, emotional, and safety components of a child's life. When a child attends in-person full-day school (or part-day as the case may be), many needs, including nutrition, are met. There has to be an in-person component to accrue the benefits of schooling. In this regard, some have made their case for only in-person schooling for children and have highlighted the potential limitations of remote type learning, arguing that the child's brain grows more rapidly when there is in-person relationships with active, hands-on exploration. No doubt, the preferred format of the re-open for particular schools and settings will be dictated by the nature of the COVID-19 spread at that time. There will be variation in the epidemiology of COVID-19 by location/setting across the USA and this must be considered by relevant decision-makers. As the USA, at all levels of society, works to reduce transmission of COVID-19 and thus the risk to high-risk persons, any re-open decisions must consider the local circumstances for the extent of transmission. In moving to get schools re-opened safely, this has been the clarion call by the administration and President Trump's Coronavirus Task Force experts, who have been in line with recent Centers for Disease Control and Prevention (CDC) guidance on the re-opening of schools.

There will no doubt be areas where the guardrails that indicate greater spread such as positivity rate will be more elevated and as indicated, these would need decisions on a case-by-case basis. For example, if a location in the USA is experiencing a positivity rate of 5% or more (using 5% as a threshold for increased spread) and indications are of ongoing spread, then such a location would need to consider other school re-opening options other than the in-person full-day model e.g. remote learning, a hybrid model etc. Thus they would only re-open safely when the spread is brought under control. It makes sense that a carte blanche 'uniform' approach to re-opening of schools is not the way to go. This is justifiable when the safety of children remains paramount and particularly to the US government's administration experts tasked with this.

We do have evidence from global nations, especially across Europe that have re-opened schools, that have shown that it can be done safely with little, if any, impact on children, especially in terms of the risk of COVID-19 transmission to them. There are indications that there is almost zero evidence of spread of infection from child to child or child to adult. Children seem to not be the key drivers of COVID in schools or **Error! Hyperlink reference not valid.** larger communities seasonal influenza whereby children are the drivers of influenza. It is also being reported that not one nation in the entire world has thus far reported child care centers or elementary/primary schools as significant sources of COVID-19 transmission.

In this regard, we draw your attention to the very promising results that emerged in the USA in many YMCA centers that remained open during the last months. We think this will help shed light onto the prospect of school re-opening safely once risk reducing guidance such as CDC's guidance for safe school re-opening is followed. This adherence to the safety guidance must be maintained by all involved parties within the system e.g. teachers/guidance counsellors/administrators/kids etc.

Specifically, very informative and encouraging data has emerged from the YMCA of the USA and New York City's Department of Education whereby the two organizations reportedly followed safety guidance that closely mirrors guidance recently put out by the CDC. Similarly, Brown University's survey analysis of child care centers have also yielded very important data on the risk of COVID-19 spread among children in the USA. For example, The YMCA indicated that during the lockdowns from March, it has provided care for as many as 40,000 children aged 1 to 14 at 1,100 separate USA sites, and doing this typically in partnership with local and state governments. Similarly, New York city's Department of Education reported that it has cared for greater than 10,000 children at approximately 170 sites in New York City. Both organizations have reported that during this coverage, they adhered to safety guidance that very closely mirrored what the CDC had put out. The further indicated that while a very small number of staff and parents at various sites around the country went on to test positive for COVID-19, there were no records in their systems of having more than one case at any particular site. Moreover, findings from a survey conducted by Brown University's economist Emily Oster revealed that among the over 900 centers that are serving greater than 20,000 children, approximately 1% of staff and 0.16% of children were declared as COVID-19 positive. When all 983 centers are examined that served 27,497 students, there were only 42 cases in students for a confirmed case-rate of 0.15%. Among the 9,691 staff, the confirmed case-rate was 1.10%. In addition, for the 693 centers that were opened on a full-time basis serving 20,979 students, there were 42 positive students for a confirmed case-rate of 0.14%. Of the 7,494 staff working full-time, 67 were positive for COVID-19 with a confirmed case-rate of 0.89%.

Elliot Haspel, who is an education policy expert and child care advocate wrote that child care and schools must be opened very, very soon and that as far as he knows, there are virtually no recorded instances of child-to-adult transmission of COVID-19. It is not zero risk as one would be foolish to intimate this, but the reality is that global governments, policy makers, school administrators, teachers and all involved with education, as well as the medical communities, now have a far better grasp of COVID-19 in terms of who is the greatest at-risk sub-groups and why, and where children fit into the analysis of risk. In short, the risk to children of severe illness or worse is basically non-existent, with CDC's own estimates to June 2020 for COVID-19 death being under 1 year of age, 0.008%, 1-4 years of age being 0.005%, and 5-14 years of age being 0.013%. The real issue is many are running around extolling a March 2020 understanding of COVID-19 when in fact we are now entering August 2020 and know much more about the little risk children have. Moreover, this is potentially eliminated when all related school re-open activities are done safely in line with CDC's school re-open guidance. Taken together, these positive results suggest that we may extrapolate further by collating the very strong global evidence and the child care evidence described here. It reveals that children can school once again and school together, as long as we be sensible about it and engage in the CDC type steps that could significantly reduce the risks of spread. The evidence seems stable that the coronavirus does not readily spread among children alike how it is done for the flu each year. This is very good news for parents and all involved, especially for our educators.

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