



testimony

Marissa Johnson <mjohnson@waialae.edu>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 1:31 PM

Aloha,

I am submitting testimony in regards to Discussion Item VI(A): **July 30 BOE meeting regarding schools reopening at a later date (8/17/20)**

My name is Marissa Johnson, and I am a preschool special education teacher at Waialae Elementary School. I am relieved for many educators that the BOE is considering approval for kids returning to school on 8/17/20.

I am still concerned for vulnerable populations of students and teachers, specifically:

- prek teachers
- prek special education teachers
- kindergarten teachers
- FSC teachers
- some special education teachers
- sped, kindergarten, and preschool EAs
- paraprofessionals
- RBTs
- Skills trainers
- students with whom each of the above individuals works
- the families of these students and staff

While I am appreciative of the DOE's, HSTA's, and BOE's willingness to make adjustments to the start date, I would like to ask that these staff and students be prioritized for home learning.

As we know based on clear data, Covid19 spreads through bodily fluids and aerosols. These students tend to need significant support with essential daily living skills, such as toileting, wearing a mask, feeding self, moving around, managing own hygiene and wellness, communicating, building relationships, and managing emotions. It is heartbreaking to picture a day in school with these children and not be able to give them the interventions, attention, assurance, dignity, and affection they deserve without risking spreading illness.

I am a passionate educator, and have no interest in having less time with students. I am an advocate for public access to quality early education and best practices in special education. I think that in this unusual circumstance of a pandemic, the potentially fatal risks involved in traditional in-person schooling outweigh the potential benefits for these unique populations.

Thank you for reading. I hope this testimony will be seriously considered in decisions regarding safe school opening to come.

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Marissa Johnson, M. Ed | Early Childhood Special Education
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Opening of schools testimony

Jackie Belding <jackiebeldingbcba@gmail.com>

Wed, Jul 29, 2020 at 1:32 PM

To: Testimony.BOE@boe.hawaii.gov

Aloha Board of Education Members,

Thank you for sharing your time, expertise, and aloha for our schools, administrators, teachers, keiki, and families. I am a board certified behavior analyst, former special education teacher, and former special education district resource teacher. I currently provide behavior analytic services to individuals with autism and related disabilities in school, clinical, home, and community settings. For the past 15 years, I have worked in schools on Big Island, Maui, and Kauai.

I am writing in strong support of delaying the in person start to the 2020/2021 school year. Based on my direct observations, schools are currently unprepared and need additional time to ensure protocols and procedures are in place and all staff receive proper training. I completed multiple assessments over the extended school year and personally observed lack of PPE, incorrect use of PPE, and inconsistent application of recommended safety practices.

As an educator and advocate for teachers and children, I am in favor of students going back to school as soon as safely possible. However, our schools need time to ensure proper safety procedures, protocols, and training is in place.

Please feel free to contact me directly with any additional questions.

Mahalo for your consideration,

Jackie Belding

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Jackie Baker Belding
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Testimony of Sylvia M. Hussey, Ed.D.
Ka Pouhana, Chief Executive Officer

Hawai'i State Board of Education
General Business Meeting

AGENDA ITEM III.A: BOARD ACTION ON REVISIONS TO THE DEPARTMENT OF EDUCATION'S
2020-2021 SCHOOL CALENDAR: ADDITIONAL TRAINING AND PROFESSIONAL DEVELOPMENT
DAYS FOR TEACHERS AND STAFF AT THE BEGINNING OF THE SCHOOL YEAR AND DELAYING
STUDENTS' FIRST DAY TO ENSURE HEALTH AND SAFETY PREPAREDNESS FOR SCHOOLS

July 30, 2020

1:00 p.m.

Virtual Meeting

The Administration of the Office of Hawaiian Affairs (OHA) offers the following **COMMENTS** regarding the proposed reopening of the 2020-2021 school year. **OHA appreciates the work of the Department of Education (DOE) and the Hawai'i State Teachers Association (HSTA) in coming to an agreement to delay students' first day of school to August 17, and further urges the Board of Education (BOE) to make any student start date subject to a prior assessment of conditions and criteria, to ensure that our schools will in fact be prepared to reopen safely and in the best interests of students and all stakeholders.**

As detailed in the attached previous testimony, **the COVID-19 pandemic and the potential spread of the SARS-CoV-2 virus in our schools and in the community is a matter of significant concern to Native Hawaiians.**ⁱ Native Hawaiian students comprise a significant portion of our public school student body, and Native Hawaiians generally have higher risk factors with regards to impacts from the pandemic: for example, Native Hawaiians are more likely to live in crowded, multigenerational householdsⁱⁱ where isolation of exposed or COVID-19 positive students from elderly or vulnerable family members can be extremely difficult; Native Hawaiians are also more likely to suffer from co-morbidities known to increase the risk of serious illness resulting from COVID-19.ⁱⁱⁱ **Recent testing results further indicate that cases of COVID-19 are increasing in the Native Hawaiian and Pacific Islanders communities at a greater rate than the rest of the state: between June 26 to July 24, Native Hawaiian positive COVID-19 cases increased by 101% (from 85 to 171) and Pacific Islander cases increased by 81% (from 164 to 297), compared to a total state increase of 58% over the same time period.**^{iv} For these and other reasons, OHA supported the concerns voiced by the HSTA regarding the proposed August 4, 2020 reopening date for public schools, and urged the BOE to delay the reopening of our public schools until safety protocols, guidance, and alternatives have been more clearly developed and communicated to the educators, families, and students of our public school system.

OHA accordingly appreciates the agreement reached between the HSTA and the DOE, regarding a delayed reopening date for students' return to school. OHA does believe that an August 17 date for students' first day of school will provide more time for safety protocols, guidance, and alternatives to be developed and communicated to all school stakeholders, and allow for more teacher training to enhance both school safety, as well as students' educational experience. However, OHA does note that changing conditions and the actual timeliness of the evaluation and implementation of school safety plans may counsel a different reopening date for public school students. **Accordingly, OHA urges the BOE to subject any planned reopening date on a prior assessment of certain conditions and criteria, and allow for this August 17 date to be further delayed should it be in the interest of school safety and educational capacity.** Such an assessment should take place in the days or week leading up to the planned reopening date, and minimally include:

- A consideration of the effectiveness and success of county, state, national, and international strategies to control the spread of COVID-19 overall, and whether there may be an increased risk of danger based on testing data trends and anticipated events (such as the resumption of tourism and the commencement of large-scale multinational military training exercises), as evaluated by public health experts;
- Whether there has been sufficient time to fully explore, develop, and implement reopening plan protocols, guidelines, and alternatives, including through the sharing of ideas, experiences, and resources between public and charter schools;
- Whether plans that will adequately inform teachers, staff, students, and families of all protocols and guidelines intended to keep all school stakeholders safe have been fully developed and implemented, including through direct or proactive outreach to families with language or cultural barriers or economic or other challenges;
- Whether remote learning training for educators and support and other resources for families has been sufficient to meet the educational needs of students and their families following distance and hybrid learning models, to ensure they are not disadvantaged when school reopens;^v
- Whether plans have been specifically and sufficiently tailored to ensure the health and safety of schools' special education students and teachers in face-to-face instruction settings; and
- Whether there has been adequate consultation regarding the above and other matters with education and health stakeholders representing those communities most vulnerable to the impacts of COVID-19, including Native Hawaiian and other Pacific Islander groups such as the Native Hawaiian Pacific Islander COVID-19 Response, Recovery, and Resilience Team.^{vi}

As reflected in OHA's previous testimony on this matter, it may be critical to assess the above considerations in the week leading up to the proposed date for students' first day of school, and determine whether more time may be needed to ensure the health and safety of teachers, students, and their families; to optimize the educational experiences of all

students; and to minimize the potential for unintended educational and economic disruptions resulting from the spread of COVID-19 in our schools.

Finally, OHA notes and appreciates the concerns expressed by BOE members and Superintendent Kishimoto, regarding the importance of keeping the needs of special education students in mind when determining a school reopening date. DOE data from 2018 do indicate that Native Hawaiians students are overrepresented in special education, with 35.9% of students in special education being Native Hawaiian compared to 24.9% of the total student body.^{vii} Accordingly, OHA has an interest in the education and development of our special education students, and recognizes the concerns voiced by many regarding their unique developmental needs for face-to-face interaction, and the difficulties they may experience during any school closure.^{viii} However, while OHA again does not oppose the reopening of schools or the resumption of face-to-face instruction, OHA also notes that some special education students may be at a potentially higher risk of being exposed to or infected by COVID-19,^{ix} and that additional time may be needed to ensure that schools can address the needs of their special education students, including on a case-by-case basis as may be necessary. Therefore, as reflected in the assessment criteria above, OHA believes it critical to assess, prior to August 17, schools' ability to specifically provide a safe learning experience for their respective special education students on that date.

Accordingly, OHA respectfully urges the Board to ensure that any planned reopening date be made subject to a prior assessment of conditions and criteria, including but not limited to those posed above, to determine whether further time is needed to minimize any avoidable risks or unintended consequences for the Native Hawaiian and broader communities, and ensure the best educational and developmental experiences for our keiki and haumāna.

Mahalo nui for your consideration of this matter.

ⁱ See Sylvia M. Hussey, Ed.D., Testimony to the Hawai'i State Board of Education, Agenda Item VI.H: BOARD ACTION ON MEMORANDUM OF UNDERSTANDING BETWEEN STATE OF HAWAII BOARD OF EDUCATION AND HAWAII STATE TEACHERS ASSOCIATION (SY 2020-2021 COVID-19 RESPONSE): 2017-2021 CONTRACTUAL MODIFICATIONS AND CONDITIONS OF WORK RELATED TO COVID-19 RESPONSE FOR BARGAINING UNIT 5 EMPLOYEES (July 23, 2020), attached.

ⁱⁱ 24.8% of Native Hawaiian households, compared to 9.6% of state households include more than two generations or an unrelated individual. SMS, HAWAII HOUSING PLANNING STUDY 34 (2016), *available at* https://dbedt.hawaii.gov/hhfdc/files/2017/03/State_HHPS2016_Report_031317_final.pdf.

ⁱⁱⁱ Office of Hawaiian Affairs, Issue Brief: COVID-19 and Native Hawaiian Communities: Native Hawaiians Over-Represented in COVID-19 At-Risk Populations (2019), *available at* https://19of32x2yl33s8o4xza0gf14-wpengine.netdna-ssl.com/wp-content/uploads/Issue-Brief-Covid-19_corrected.pdf.

^{iv} Data gathered from Department of Health Disease Outbreak and Control Division, What you should know, <https://health.hawaii.gov/coronavirusdisease2019/what-you-should-know/current-situation-in-hawaii/> (last accessed July 28, 2020).

^v OHA notes that Native Hawaiian students may need additional support for the implementation of proposed distance and hybrid learning plans, as 9.5% of Native Hawaiian households do not have a computer in their homes and 18.4% do not have internet access, compared to 8.4% and 14.3% of the total State population, respectively. U.S. Census Bureau, Selected Population Profile in the United States, 2017 American Community Survey 1-Year Estimates (2018), retrieved March 19, 2020.

^{vi} NHPI Hawai'i COVID-19, <http://papaolalokahi.org/nhpi-hawaii-covid19-3r.html>, last accessed July 28, 2020.

^{vii} Hawai'i State Department of Education Office of Strategy, Innovation and Performance, Assessment and Accountability Branch, OHA_RequestOEC15-16_16-17_17-18rpt (2019) (unpublished data).

^{viii} Megan Moseley, *Hawaii mothers say distance learning is failing their special needs children*, HONOLULU STAR ADVERTISER, May 10, 2020, available at <https://www.staradvertiser.com/2020/05/10/hawaii-news/hawaii-mothers-say-distance-learning-is-failing-their-special-needs-children/>.

^{ix} See, e.g., Margaret A. Turk, MD, et al., *Intellectual and developmental disability and COVID-19 case-fatality trends: TriNetX analysis*, Disability and Health Journal, Vol. 12, Issue 3, July 2020, available at <https://www.sciencedirect.com/science/article/pii/S1936657420300674> ("COVID-19 appears to present a greater risk to people with IDD [intellectual and developmental disabilities], especially at younger ages."); see also National Public Radio, *People With Intellectual Disabilities and Autism Die of COVID-19 at a Higher Rate*, June 9, 2020, available at <https://www.npr.org/2020/06/09/872401607/covid-19-infections-and-deaths-are-higher-among-those-with-intellectual-disabili>.



Testimony of Sylvia M. Hussey, Ed.D.
Ka Pouhana, Chief Executive Officer

Hawai'i State Board of Education
General Business Meeting

AGENDA ITEM VI.H: BOARD ACTION ON MEMORANDUM OF UNDERSTANDING
BETWEEN STATE OF HAWAII BOARD OF EDUCATION AND HAWAII STATE
TEACHERS ASSOCIATION (SY 2020-2021 COVID-19 RESPONSE): 2017-2021
CONTRACTUAL MODIFICATIONS AND CONDITIONS OF WORK RELATED TO
COVID-19 RESPONSE FOR BARGAINING UNIT 5 EMPLOYEES

July 23, 2020

1:30 p.m.

Virtual Meeting

The Administration of the Office of Hawaiian Affairs (OHA) respectfully urges your careful consideration of the requests by the Hawai'i State Teachers Association (HSTA) and many others, to **delay the reopening of our public schools until safety protocols, guidance, and alternatives have been more clearly developed and communicated to the educators, families, and students of our Department of Education (DOE) school system.**

As an initial matter, OHA notes that the COVID-19 pandemic and the potential spread of the SARS-CoV-2 virus in our schools and in the community is a matter of significant concern to Native Hawaiians. 2018 school year data indicate that Native Hawaiian students make up 24% of the student body in our DOE school system, and 25% of the total students in our overall public school system;ⁱ accordingly, any COVID-19 outbreak in our public schools is likely to expose a significant proportion of Native Hawaiian students to the disease. Native Hawaiians are also more likely to live in crowded, multigenerational households,ⁱⁱ and any exposed or infected students may be less able to be isolated from other family members, including kūpuna or other vulnerable individuals; exposed or infected family members may likewise have difficulties isolating themselves from students.ⁱⁱⁱ Notably, Native Hawaiians in general are more likely to suffer from co-morbidities known to increase the risk of serious illness resulting from COVID-19,^{iv} and family members with such pre-existing medical conditions may also be particularly vulnerable, should members of their household be exposed or infected at school. More widespread outbreaks in the community, resulting in whole or in part from school reopenings, may also impact our islands' overall healthcare capacity, and the ability of many such Native Hawaiians and others to access needed medical services. **Accordingly, the Native Hawaiian community has a heightened interest in ensuring that our DOE schools are able to prevent or mitigate the spread of COVID-19 to the greatest extent possible.**

OHA does appreciate that many DOE schools have in fact adopted school reopening plans that reflect, to varying degrees, guidelines from the Center for Disease Control and Prevention (CDC) and other guidance;^v nonetheless, concerns raised by the HSTA and others indicate that there may still be a lack of sufficiently clear safety protocols, guidance, and

alternatives to mitigate the potential for outbreaks and the impacts of COVID-19 exposure or spread in our DOE schools. Of note are concerns regarding an **apparent lack of clarity or consistency on facemask protocols, including for younger grades and during recess; lack of clarity regarding military family members exempt from the 14 day quarantine; lack of clarity regarding procedures after exposure or a positive COVID-19 test result, such as notification of families and requirements for the testing or isolation of siblings and other household members; the need for more trainings and resources to accommodate distance learning for vulnerable students, or students living with vulnerable individuals; and the need for more time to explore and assess experiences from other jurisdictions as well as alternative approaches, such as outdoor instruction areas, that may further mitigate the risk of COVID-19 infection.**^{vi} There may also be a need to assess the degree to which schools have been able to meaningfully inform families, including those with linguistic barriers and economic challenges, regarding the importance of fulfilling their roles in preventing the potential exposure, introduction, or spread of students and faculty to COVID-19, such as with regards to ensuring that students are able to practice appropriate face mask usage, hand washing, and social distancing,^{vii} and that students are kept home when they present with any indication of illness, even and especially mild symptoms that could indicate a high risk of virus transmission.^{viii} **Accordingly, in light of the continuing concerns and questions raised by the HSTA and others, OHA does believe it prudent for the Board to consider delaying the August 4, 2020 school reopening date so that these concerns can be more fully addressed, and that safety protocols, guidelines, and alternative approaches to minimize the potential for a COVID-19 outbreak can be more fully developed and communicated to all employees, families, and students in our public school system.**

As an entity deeply invested in the well-being of Native Hawaiian children, OHA does recognize the education of our keiki as among our highest priorities. Accordingly, OHA does not necessarily oppose school reopenings as an important and necessary action to further the educational and developmental needs of public school students. **However, delaying the planned reopening to provide further time to ensure that safety protocols, guidelines, and alternatives are more fully developed and communicated may be critical to ensuring that students are able to maximize their educational experience, and avoid the significant negative repercussions of unnecessary exposure to or infection by SARS-CoV-2 – which in itself could be significantly disruptive to the educational and developmental experiences of students.** More time to train teachers and identify or develop resources to ensure greater access to distance learning will also ensure a better educational experience for students who learn from home. Additional time may also allow for the incorporation of “lessons learned” from other jurisdictions, and other epidemics, for public school reopenings, in furtherance of educational goals. Therefore, OHA does believe that allowing for additional time before schools reopen may only serve to further the educational and development interests of Native Hawaiian and other keiki in our public school system.

As a Native Hawaiian-serving organization, OHA further appreciates that reopening schools is intended to allow more parents to return to work, which may in turn reduce the significant and particular impacts economic the pandemic has had and will have on the Native Hawaiian community.^{ix} Accordingly, OHA again does not oppose school reopenings. **However, providing schools with additional time to develop clearer and more fully**

developed safety protocols, guidelines, and alternatives can help reduce employment disruptions from the avoidable exposure or infection of students returning to school, who must then be isolated and presumably kept at home with their parents for the requisite quarantine period. Allowing more time for protocols and guidelines to be communicated to parents and the broader community will also let parents, employers, and policymakers know what to expect in terms of such potential employment disruptions, and to plan accordingly. **Moreover, any increase in COVID-19 infection rates due to avoidable outbreaks in our school system may have an overall dampening effect on local consumer activity and the local economy, quelling any benefit that may arise from the ability of parents to return to work.** Therefore, OHA also believes that allowing for additional time before schools reopen may only increase the economic benefits of such reopening, and minimize the risk of negative economic impacts that may reduce or negate any such benefits.

Accordingly, OHA respectfully urges the Board to carefully consider the requests from the HSTA and others to delay reopening schools until safety protocols, guidance, and alternatives are more clearly developed and communicated, to minimize any avoidable risks posed to the Native Hawaiian community, to ensure the best educational and developmental experiences for our keiki and haumana, and to minimize the potential for unintended economic disruption.

Mahalo nui for your consideration of this request.

ⁱ Hawai'i State Department of Education Office of Strategy, Innovation and Performance, Assessment and Accountability Branch, OHA_RequestOEC15-16_16-17_17-18rpt (2019) (unpublished data).

ⁱⁱ 24.8% of Native Hawaiian households, compared to 9.6% of state households include more than two generations or an unrelated individual. SMS, HAWAII HOUSING PLANNING STUDY 34 (2016), available at https://dbedt.hawaii.gov/hhfdc/files/2017/03/State_HHPS2016_Report_031317_final.pdf.

ⁱⁱⁱ See, e.g., Chelsea Davis, *Concern grows over school reopening after infection at summer program*, HAWAII NEWS NOW, July 14, 2020 available at (2019)

^{iv} Office of Hawaiian Affairs, Issue Brief: COVID-19 and Native Hawaiian Communities: Native Hawaiians Over-Represented in COVID-19 At-Risk Populations (2019). available at https://19of32x2yl33s8o4xza0gfl4-wpengine.netdna-ssl.com/wp-content/uploads/Issue-Brief.-Covid-19_corrected.pdf.

^v See Centers for Disease Control and Prevention, Interim Guidance for Administrators of US K-12 Schools and Child Care Programs (updated April 20, 2020), available at <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html>.

^{vi} Jennifer Couzin-Frankel, et. al, *School openings across globe suggest ways to keep coronavirus at bay, despite outbreaks*, SCIENCE, July 7, 2020 available at <https://www.sciencemag.org/news/2020/07/school-openings-across-globe-suggest-ways-keep-coronavirus-bay-despite-outbreaks>; Alexandra M. Stern, et. al., *Closing of schools – lessons from 1918-19 US Flu Pandemic*, 28 HEALTH AFFAIRS w1066 (Sept. 2009), available at <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.28.6.w1066> (“positive outcomes shared by these cities appear to be the result of good coordination among local, state, and, when applicable, federal levels of government; effective local leadership; robust volunteerism especially from teachers and nurses; and other social, economic, and cultural factors”).

^{vii} This may include additional measures such as refraining from shouting or sneezing at or near others, or similar higher-risk activities, especially where schools allow for face masks to be removed during recess sessions. See, e.g. Mayor Kirk Caldwell (@MayorKirkHNL), Twitter (July 17, 2020, 2:38 p.m.), <https://twitter.com/mayorkirkhnl/status/1284286430282256385?s=10>.

^{viii} See Amanda Capritto, *Can people who are asymptomatic spread coronavirus? What we know now: People can have COVID-19 without knowing it – and that’s a huge threat to public health*, CNET, July 22, 2020 available at <https://www.cnet.com/health/can-asymptomatic-people-spread-coronavirus/>

(“Studies have shown that people can be contagious in the first several days of having the virus, before they show symptoms. One study actually estimated that more than 40% of novel coronavirus cases were transmitted in the presymptomatic phase. And, in a study that analyzed samples from sailors on the USS Theodore Roosevelt, about 20% of infected people reported that they never developed symptoms.”).

^{ix} Office of Hawaiian Affairs, *supra* note iv (“Native Hawaiians are at greater risk of suffering financial hardship from the negative economic conditions that are likely to result from the spread of COVID.”).

Native Hawaiian & Pacific Islander



**HAWAI'I
COVID-19**

Response Recovery Resilience

TEAM

**Hawai'i State Board of Education
Special Meeting
July 30, 2020, 1:00PM**

AGENDA ITEM III.C Board expectations regarding: (1) focusing additional training and professional development days included in the revisions to the Department of Education's 2020-2021 school calendar on health, safety, and distance learning; (2) starting student instruction for the 2020-2021 school year in distance learning mode; (3) mandating masks on public school campuses; and (4) detailed, written, publicly posted guidance from the Department of Health.

**IN SUPPORT OF
A DELAY TO REOPEN PUBLIC SCHOOLS UNTIL SAFETY PROTOCOLS ARE DEVELOPED AND
COMMUNICATED**

Aloha * Talofa * Yokwe * Kaselehlie * Alii * Hafa adai * Mālō e lelei * greetings,

The Native Hawaiian and Pacific Islander COVID-19 Response, Recovery, and Resilience Team submits this letter in strong support of a delay to reopen of our public schools until safety protocols, guidance, and alternatives are clearly developed and communicated to educators, families, and students of the Department of Education (DOE) school system.

The Native Hawaiian & Pacific Islander Hawai'i COVID-19 Response Recovery Resilience Team (NHPI 3R) was established in April 2020, in alignment with the national NHPI Response Team, to improve the collection and reporting of accurate data, identify and lend support to initiatives across the Hawaiian islands working to address COVID-19 among Native Hawaiians and Pacific Islanders, and unify to establish a presence in the decision-making processes and policies that impact our communities.

Specifically, we urge the Board of Education (BOE) to recognize and act on the disparities among NHPI communities that have been exacerbated by COVID-19, such as:

- The technology and digital learning gaps among our NHPI students,
- The needs of our teachers and staff who are parents and caregivers to return to work safely, and
- The long-standing state of underfunded schools in NHPI areas/communities.

Given the increase in positive cases from June 26 to July 24 of 101% for NH and 81% for PI compared to overall State increase of 58%, we urge the Hawai'i State Board of Education to

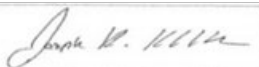
engage our communities to generate a thoughtful and robust plan that is then communicated to all Hawai'i communities, especially the most vulnerable. We envision proactive and effective outreach to maintain health and safety that includes the integration of cultural norms and traditions of our communities, and messaging and educational materials in languages other than English.

COVID-19 and other pandemics throughout human history have taught us many lessons, but most importantly, have shown us that equity and inclusion are at the core of comprehensive responses and effective solutions. As Native Hawaiians and Pacific Islanders (NHPI) have seen growing numbers of positive cases in the State, we must be equitably represented and engaged in generating solutions to ensure cultural and linguistic relevance.

This pandemic has highlighted the decades of health disparities experienced by NHPI communities throughout Hawai'i. It has impacted NHPI communities, from our keiki to our kūpuna, with devastating impacts to the physical, psychological, emotional, spiritual, and socio-economic aspects of our lives. Our keiki are disproportionately represented in the public school system, perhaps due to accessibility and affordability. Our families tend to live in multi-generational homes, richly blessed by the love of 'ohana, but face high co-morbidities and social and economic disparities. These factors and more appear to indicate that an outbreak in the public school system could lead to NHPI communities experiencing greater burden from COVID-19.

The DOE is uniquely positioned to help prevent and mitigate the spread of COVID-19 by strategically engaging the NHPI communities in generating safety protocols and guidance for prevention and intervention, as well as trainings and resources on multiple modalities of learning. Based on the emerging science and data, the testimonies of the Hawai'i State Teachers Association (HSTA) and many others, and a careful analysis by our Policy Committee, the NHPI 3R Team strongly urges the BOE to delay the reopening of our public schools until a clear and comprehensive plan is developed and communicated to all constituents of the Department of Education (DOE) school system.

Respectfully yours,



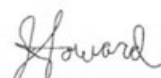
Joseph Keawe'aimoku Kaholokula
Native Hawaiian Co-Lead



Felea'i Tau
Pacific Islander Co-Lead



Sheri Daniels
Native Hawaiian Co-Lead



Josie Howard
Pacific Islander Co-Lead



August 17 or just go Full Online

Jason Agsalda <jason.agsalda@k12.hi.us>

Wed, Jul 29, 2020 at 1:49 PM

To: testimony.boe@boe.hawaii.gov

To whom it may concern,

Today was the first administration day of this school year and I'm still concerned that we will not be safe within the guidelines set forth. I'm all for meeting students establishing rapport and relationships but still feel that going to a full online learning environment is best for time being.

I teach PE and this past summer school we created what I thought was a great curriculum that was challenging and fit the online model. How are my students going to stay 6' apart in sport activities? I don't even think the DOE has any recommendations on that leaving the decision from school to school. See that's the thing if you are leaving it each school to make a decision then nothing will be consistent. Maybe if the leaders took a stand on something like this maybe we would have the guidance we need to effectively teach in this unknown environment.

Of course this is all new, but with cases going up everyday even delaying till August 17th is still iffy in my mind. Yes we probably can come up with protocols that will ensure safety but are we really going to be safe? Personally I stayed home today because I wasn't feeling well the past couple days... I erred on the cautious side but do you think students will be doing the same. You think they will stay home if they are maybe just a little sick???

Also, it's hard enough for them to socially distance outside of school just think what will happen in the classroom?

I'm worried, my own kids are worried and I believe the general consensus is that we are not ready to go to any type of face to face learning at least at the moment.

My suggestion is to start online and see how the cases pan out. I would rather be safe than sorry. So many lives will be affected due to the school opening. I just hope that we put health and safety first before anything else.

Mahalo,

Jason Agsalda
Mililani High School
Physical Education Teacher
Sent from my iPhone

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Testimony Discussion Item VI(A): BOE meeting

Kira Swearingen <kswearingen@waialae.edu>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 1:53 PM

Aloha,

I am submitting testimony in regards to Discussion Item VI(A): **July 30 BOE meeting regarding schools reopening at a later date (8/17/20)**

My name is Kira Swearingen, and I am a special education teacher at Waialae Elementary School. I am relieved for many educators that the BOE is considering approval for kids returning to school on 8/17/20.

I am still concerned for vulnerable populations of students and teachers, specifically:

- prek teachers
- prek special education teachers
- kindergarten teachers
- FSC teachers
- some special education teachers
- sped, kindergarten, and preschool EAs
- paraprofessionals
- RBTs
- Skills trainers
- students with whom each of the above individuals works
- the families of these students and staff

While I am appreciative of the DOE's, HSTA's, and BOE's willingness to make adjustments to the start date, I would like to ask that these staff and students be prioritized for home learning.

I am a passionate educator, and have no interest in having less time with students. I am an advocate for public access to quality early education and best practices in special education. I think that in this unusual circumstance of a pandemic, the potentially fatal risks involved in traditional in-person schooling outweigh the potential benefits for these unique populations. We are just not simply prepared to have students come into school August 4th. We need more clarity, guidance and decision making time as we maneuver this rare occasion.

Thank you for reading. I hope this testimony will be seriously considered in decisions regarding safe school opening to come.

Kira Swearingen

Student Support Teacher

Wai'alae Elementary Public Charter School

1045 19th Avenue, Honolulu, Hawai'i, 96816

(808) 733-4880 ext. 274

<http://www.waialae.edu>



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Testimony

Arlene Fox <arlene.fox@k12.hi.us>
To: Testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 2:36 PM

Dear Friends,

I am writing on behalf of the students, teachers and parents of Haiku school.
We are all very concerned about the health and welfare of our ohana community during this serious time of Covid-9.

We need more time to prepare for the opening of school and the training and preparation it will take to make the school year effective and successful for students, teachers and families.

Thank you very much.
Arlene Fox

--

Arlene Fox
Special Education Teacher
Haiku Elementary School
(808) 727-3746

Haiku School does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. The following person has been designated to handle inquiries regarding the nondiscrimination policies:

Karen Walker - Haiku School Principal
[105 Pauwela Rd. Haiku, HI](#)
karen.walker@k12.hi.us
Ph# 808-575-3000

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Testimony

John Shim <johnshim13@gmail.com>

Wed, Jul 29, 2020 at 2:41 PM

To: Testimony BOE <Testimony.BOE@boe.hawaii.gov>

Aloha,

I am an educator, and I wanted to express my concern for students or parents who knowingly arrive on campus with COVID-19. Due to the recent event at McCully shopping center of a teenager and father who broke quarantine to socialize with friends, I would like to suggest the BOE provide guidance on consequences for intendently spreading infections on campus, and for school staff to screen any individual coming onto campus for possible infections such as temperature checks. Mahalo.



Delay reopening but don't reduce school year

Kiele Akana-Gooch <kiele.aloha@gmail.com>

Wed, Jul 29, 2020 at 5:49 AM

To: Testimony.BOE@boe.hawaii.gov

Aloha,

I am a parent of two DOE students. I support teachers' calls to delay the reopening of school to better prepare for the school year amidst the onslaught of changes brought on by COVID (and hopefully we can get our case count down by the time school opens).

But I do not support fewer days and hours of this school year. Students are already behind from having to distance learn on a dime at the end of last school year. If school starts later in the year, it can end later in the year. Kids would simply have a longer summer now but a shorter one next year.

Distance learning should be an option for all keiki whose families choose to keep them home.

And to prevent the further spread of the virus, as much as I want our keiki to be comfortable in school and learn important facial cues and body language, I would support face masks being required in the classroom, even for my own kindergarten child.

Mahalo for your dedication, hard work, and good thinking for the health and wellness of our keiki and our community.

Me ke aloha,
Keiko Gonzalez



Do not delay the return to school in-person education on 4 August

ben3scott@gmail.com <ben3scott@gmail.com>

Tue, Jul 28, 2020 at 4:30 PM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Sir or Ma'am,

I'm writing as a parent of a second-grade student to advocate for return to in-person instruction on a standard schedule on 4 August. While I believe the reluctance of teachers' and educators' unions to embrace the planned return to school on 4 August is founded in good faith and genuine concern, I similarly believe their resistance is misguided and contrary to the best interests of students and families. A delay in return to in-person classes trades potential and poorly-evaluated risks for known negative impacts on education that will certainly befall children with further delays to in-person instruction. Put bluntly, there is uninformed and unscientific fear that is outweighing known and measurable negative impacts of kids not going to school. Saying "we aren't prepared or trained" begs the question, "what have we been doing since spring break when we ended in-person instruction and how much have we spent to achieve these preparations?"

Distance learning is not an acceptable substitute for in-person classroom education. Half-measures, ill-conceived and poorly integrated to meet educational goals and requirements, cannot be continued. My son attends a terrific school, but the model for in-person instruction and benefits of the same didn't transfer to his fourth-quarter. A patchwork of online education applications and a handful of disjointed virtual classroom experiences did not provide the level of education required to educate elementary students; distance learning merely shifted the burden to parents and provided resources that could be found with a quick internet search with predictable results. Continuation of such education is unacceptable if children are to progress in their educations and meet required milestones. We cannot waive the requirements for days of education and academic achievement; if we do, we do so at the peril of children's educations and futures. We send kids to school for numerous known and measurable benefits including educational achievement, social interaction, and personal development.

Resumption of in-person classes must be a priority. Schools should certainly be prioritized over reopening of bars, gyms, and restaurants along with interstate or international travel. Educators have repeatedly stated that "no one wants kids to get back to school as much as us," in the various press releases bemoaning a lack of readiness and training as they protest timelines to get back to teaching. Now is the time for innovation and solutions to get kids and teachers back in the classroom where they belong. If no such in-person education can be arranged, we should extend the school year into next summer to provide the planned number of instructional days. If return to in-person education does not return to its standard level, educators should receive compensation only for the portion of education that they provide to children as measured against academic achievement standards expected of in-person instruction.

Very respectfully,

Ben Scott

Parent of rising second-grade student

Mililani, Oahu



Testimony

Taryn Imai <taryn.imai@k12.hi.us>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 3:06 PM

Please advocate for teachers to be able telework at home. With the constant rise in cases and today's count significantly high, teachers should be given the option to telework at home or if they feel comfortable, at school.

Thank you from an educator at an middle school in Honolulu.

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On NOT delaying students' return to school

Erinn Kawamura <erinn808@yahoo.com>

Wed, Jul 29, 2020 at 3:07 PM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

To Whom It May Concern:

I work at a great middle school on Oahu and we are ready for our students to start blended learning as scheduled on Aug 4. We met via WebEx as a faculty group (led by our HSTA faculty reps) as well as a faculty led by our Principal during our time away from school during the pandemic. We made plans, massaged school procedures, and prepared for reopening as scheduled. We have the blended learning schedule set as well as a new curriculum that we purchased for those families who opt for 100% distance learning. Our EL kids have their schedules and we even have after school tutorial set up for them. Same with many of our students with disabilities. We are a Title 1 school serving 49% of families who qualify for free/reduced meals and we want our students to come back to campus and engage with us. Distance learning from March - May was difficult for many of our families and we need to prevent their learning gaps from growing.

Secondly, I support the idea that schools should have a month before the State is reopened to tourism. We know that positive cases will continue to increase. Let's open schools as scheduled so we can work out the kinks and look at the covid data before introducing tourists to our mix. I don't want tourism to be pushed back even further than Sept 1 for the sake of my many friends whose livelihoods depend on working in the tourism industry so in order to give those two significant reopenings enough space from each other, let's reopen schools as scheduled.

It will never be perfect but we need to get started so we can make adjustments.

Sincerely,
Erinn Kawamura



Testimony

Erin Medeiros <erinleahmedeiros@gmail.com>

Wed, Jul 29, 2020 at 3:13 PM

To: Testimony.BOE@boe.hawaii.gov

My name is Erin Medeiros. This is my 15th year as a public high school teacher in Hawaii. I served 12 years at Kaua'i High and now teach at Kanuikapono PCS.

Special Board Meeting on July 30.

Agenda items:

1. The Board expects any additional training and professional development days adopted as part of any changes to the school calendar to focus on health, safety, and distance learning to ensure schools can safely open and teachers and administrators are ready to provide instruction to students in distance learning mode;

SUPPORT and COMMENT: Our schools are not aligned with one another nor internally aligned with protocols to ensure the health and safety of our kids if on campus or to provide best practices in distance learning. We need at least until August 17 to prepare to welcome students back, whether in-person or online. The time we invest now will pay tremendous dividends later. Teachers, students, and parents can all feel safer and more prepared for the multiple new realities of this school year.

2. The Board expects schools to begin the school year for students in distance learning instructional mode for at least two weeks or until the Superintendent believes all schools are prepared, whichever is longer. Schools may determine that students who do not benefit from distance learning can be provided more intensive supports, including in-person supports, during this distance learning mode period;

SUPPORT and COMMENT: As a mother I helped both of my elementary-aged children engage in their classes everyday of quarter 4 while simultaneously serving as a teacher to my teenage students. Even a month ago, I was in favor of students starting this year in hybrid mode, but the significant rise in cases of COVID-19 in the past three weeks has me very concerned about our readiness as educational institutions to prepare a brand new hybrid model at every campus, introduce new health and safety protocols, enforce new rules around masks and social distancing, and successfully do our core job to teach skills and content. I believe we should delay opening until August 17, at which date we should begin in distance learning mode until cases in Hawaii are under control. On Kauai, we have just 8 ICU beds. How can we roll the dice and simply hope that zero people who come on campus have COVID-19? As soon as one infected person arrives on campus, we will have more cases than our island can manage. If we simply look at pros and cons, the advantages to starting in hybrid mode versus fully distance learning simply are not substantial enough to warrant this risk.

3. The Board expects everyone on public school campuses to wear a face mask (or a face shield if a medical condition prevents the extended use of a face mask); and

SUPPORT and COMMENT: Leaving this up to teacher discretion is terribly unfair to students, teachers, and parents. I do not want my own children to feel exposed and vulnerable in classes where this is optional, nor should I have to fight with my students about the use of masks (rules that vary from one class to another will inevitably lead to problems enforcing the rule and getting backup from already overwhelmed administrators). If it is truly important to us to have students on campus, then this is a sacrifice we have to make. The BOE and DOE need to stand up and make and enforce this rule across the board.

4. The Board expects the DOE to rely on detailed, written, publicly available guidance from the DOH when formulating its own guidance to schools and the Board urges the DOH to issue such guidance."

SUPPORT

Thank you very much for your thoughtful attention to these issues. The safety and well-being of our kids must be the priority. As long as they are alive, they are learning. We will help them in all the ways possible and safe during the pandemic.

Mahalo,
Erin Medeiros, NBCT



more time needed

RAB <robertallenbeckvall@gmail.com>
To: testimony.boe@boe.hawaii.gov

Wed, Jul 29, 2020 at 3:35 PM

PCS teacher and we need more time to figure all out before having them return

what do they learn? how to mourn?

no, teachers and children not expendable

TIME means not rushing to substandard education and exposure to life-threatening situations

--

Thank you, Robert Beckvall



Love sees what is invisible. Simone Weil



Delaying the school year

Nora Schubert <noraschubert@hotmail.com>

Wed, Jul 29, 2020 at 3:37 PM

To: "testimony.BOE@boe.hawaii.gov" <testimony.BOE@boe.hawaii.gov>

Once again we are here before you, the decision makers, regarding the safety and well-being of our keiki, school faculty and staff, and communities. Please be guided by credible medical and science data and research, not by politics or economics.

Your agenda shows progress in recognizing the need to think outside of the norms by waiving the 180 day instructional time and changing the school calendar. A pandemic deviates far from the norm and charts its own course, just as water does. This life threatening pandemic is controlling the narrative here as it should.

It is clearly evident by the spiraling numbers of positive Covid19 tests, the increased community transmissions, the numbers of ICU hospitalizations here in our islands that we are not ready to resume in person school learning.

Adults in our communities have failed to follow rules, laws, guidelines. Why are we believing children can do better?

Government offices, public officials, businesses and yes, even the BOE, continue to operate virtually or restrict in person contacts due to the high risk of contagion. So why is there even a belief that our schools should fully open right now?

This week, the Governor, island mayors, and DOH are discussing reimposing restrictions to lower Covid19 transmissions. So again, why are we still considering opening up our school campuses to in person learning now?

We have hotspots of contagion in our communities. Right now. Here. Now. And we are still deciding whether or not our schools can safely fully open now? Really?

Community transmission spread has a higher incidence of occurrence in crowded conditions. "In fact, Hawai'i [ranks first in the nation in having the highest proportions of both multigenerational and crowded households](https://hiappleseed.org/2020/07/hawaii-has-the-highest-portion-of-multigenerational-and-crowded-households-in-the-nation-what-does-that-mean-for-reopening-our-schools/), according to the U.S. Census Bureau. We also rank second in the nation for largest average household size, just behind Utah" and "...Census data show that students in Hawai'i are much more likely than those in other states to be living in households with grandparents and where it is difficult to socially distance themselves." (Hawai'i Appleseed Center: <https://hiappleseed.org/2020/07/hawaii-has-the-highest-portion-of-multigenerational-and-crowded-households-in-the-nation-what-does-that-mean-for-reopening-our-schools/>)

We here in Hawai'i are largely populated by persons of color and others in high risk categories. Our islands are limited in land mass with many living in multigenerational households and crowded communities. Given that the science and medicine evidence show the elderly, persons of color, and those with preexisting conditions to be at greater risk at contracting and being severely comprised or dying from Covid19, again, why are we having this discussion on reopening our schools to in person learning?

Right now, today, all the data shows we are not ready for in person learning. It is not safe to open our schools now. Rather, we should implement distance, virtual learning to keep our keiki supported and educated while keeping them, their teachers, school staff, families, and our communities safe.

In Florida, high numbers of children have recently tested positive for Covid19. Research and studies of onset of resulting long term medical conditions from this virus are now appearing to be glaringly disastrous and have led to increasing numbers of deaths of children nationwide.

Major League Baseball, with their vast and unlimited access to numerous, rapid testing together with their high level of restrictive safety protocols, have shown an inability to control and stop the spread. How can we expect our schools to survive this when the resource rich MLB cannot?

Reopening our campuses for in person learning until this pandemic is under control is an invitation for our schools to become superspreaders, infecting our islands at an exponential rate of transmission. Which school will have the distinction of being the first superspreader? Which school will be the first to mourn the hospitalization and death of a student, teacher, school staff? Which schools will rapidly follow?

The answer is right in front of us. Choose distance, virtual learning for the entirety of the fall semester. Revisit how the spring semester will function based on the critical science and medical data over time.

Do not reopen our campuses now. Do not allow our campuses to become superspreader sites. Do not put our keiki, school faculty and staff, and our communities in danger. Choose safety and life.

We're counting on all of you to do what is right during this life threatening pandemic.

Nora Schubert, BSW, MSCJA
Member, HGEA Retirees Unit



S E A C
Special Education Advisory Council
1010 Richards Street Honolulu, HI 96813
Phone: 586-8126 Fax: 586-8129
email: spin@doh.hawaii.gov

July 30, 2020

**Special Education
Advisory Council**

Ms. Martha Guinan, *Chair*
Ms. Dale Matsuura, *Vice Chair*
Ms. Ivalee Sinclair, *Vice Chair*

Ms. Andrea Alexander
Ms. Brendelyn Ancheta
Ms. Virginia Beringer
Ms. Mary Brogan
Ms. Deborah Cheeseman
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Mr. Mark Disher
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Ms. Bernadette Lane
Ms. Cheryl Matthews
Ms. Kaili Murbach
Ms. Carrie Pisciotto
Ms. Kau'i Rezendes
Ms. Rosie Rowe
Dr. David Royer
Mr. James Street
Mr. Francis Taele
Mr. Steven Vannatta
Ms. Lisa Vegas
Ms. Jasmine Williams
Ms. Susan Wood

Ms. Annie Kalama, *liaison to
the Superintendent*
Dr. Bob Campbell, *liaison to
the military community*

Amanda Kaahanui, Staff
Susan Rocco, Staff

Catherine Payne, Chairperson
Hawaii State Board of Education
P. O. Box 2360
Honolulu, HI 96814

RE: III. A Board Action revisions to the 2020-2021 school calendar:
additional training and professional development days for teachers
and staff, delaying Students' First Day to ensure health and safety
preparedness for schools; and

III. C. Board Action on Board expectations regarding: (1) focusing
additional training and professional development days on health,
safety, and distance learning; (2) starting student instruction for the
2020-2021 school year in distance learning mode; (3) mandating
masks on public school campuses; and (4) detailed, written, publicly
posted guidance from the Department of Health

Dear Chair Payne and Members of the Board,

The Special Education Advisory Council (SEAC) would like to express
our appreciation to the Board for its swift action in responding to the
urgent concerns from a broad spectrum of education stakeholders
over the re-opening of schools for the SY 2020-21. We trust that your
decisions today are made in what you believe to be the best interests
of students and educators. We ask that you not lose sight of your
commitment to prioritize services and resources for our most vulnerable
students, many of who have IEPs.

Delay of student instruction in order to allow for additional preparation
and training of school staff

SEAC understands the immediate need to push back the re-opening
of schools in order to ensure adequate preparation for the health and
safety for students and staff and to enable HDOE personnel to receive
vital training. Most educators require additional knowledge, tools and
skills to respond to new demands for distance learning options, social
distancing requirements, provision of compensatory services, and
addressing the social-emotional and academic competencies of students
that are likely to have regressed since the closure of schools in March.

SEAC is particularly concerned over feedback from administrators,



teachers and parents that detailed and specific guidance has not yet been publicly shared regarding 1) the provision of special education with accommodations and modifications under the various instructional models, 2) the provision of related services, including contracted services, and 3) the determination of the need for compensatory services and the forms these services may take.

Many of the private service providers who have worked alongside HDOE for years to ensure the array of services needed to meet the unique needs of special education students are losing personnel due to school closures and uncertainty over contract commitments. If we do not address this potential loss of an essential work force, we may seriously hamper the ability of schools to help students recoup lost skills and maintain newly acquired skills. Support for private service providers may need to include consideration of cost sharing of salaries of contracted personnel who must be quarantined due to exposure to COVID-19 in an academic setting.

Families must also be supported to be informed decision-makers and partners in the education of their children. SEAC believes that prior to the re-opening of schools, many families of children with disabilities have not received adequate information about the learning modes offered by their child's school to make an informed choice. In this information vacuum, they may choose to keep their children at home and not engage with the school.

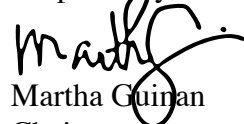
Starting student instruction in distance learning mode

SEAC and families of children with disabilities would appreciate a clear and Hawaii-centric definition of *distance learning* vs. *on-line learning* vs. *virtual learning*. At times they seem to be used interchangeably, and yet they may mean different things to different people. SEAC can broadly state that distance learning (versus in-person learning) does not provide an equitable learning opportunity for many students with disabilities. For others, it may prove beneficial if provided and monitored by a teacher with the skills to deliver specially designed instruction.

Schools should not be left on their own to try to determine whether a student can benefit from distance learning or receive more intensive supports in order to meet the goals and objectives in his or her IEP. Specific metrics must be provided by state leadership to ensure that services are provided equitably from school to school and classroom to classroom, and that a student's right to a free and *appropriate* education is guaranteed.

Mahalo for this opportunity to express our views. SEAC stands ready to work collaboratively with the Department and the Board to find creative solutions to the delivery of quality educational services to students with disabilities.

Respectfully,


Martha Guinan
Chair


Ivalee Sinclair
Legislative Committee Chair

July 29, 2020

To Superintendent Kishimoto and the Hawaii Board of Education,

My name is Brenda Chase. I am an 8th grade middle school teacher with the Hawaii Department of Education in the Campbell Kapolei Complex. The main concern I have is relating to proper training on procedures for safe interaction, handling of documents and scenarios that may occur that may put students, educators and school staff at risk, as well as the extended contact exposure once we leave campus.

In addition while following Dr. Green's broadcast as in the following quote. "We had 800 cases in the first five months of COVID-19, and then we've had 800 cases in the last thirty days," says Lieutenant Governor Dr. Josh Green on KHON2 News¹.

Dr. Green's medical opinions are as such as keeping groups to "no groups greater than ten" should be in a particular setting. I am fully aware that class sizes will pass that guideline. From there guidelines for working with non-compliant students or students with medical or social emotional exemptions or needs.

Quoting this information "I think we have to start thinking about pushing back the school date a little bit to make sure we're extra prepared," says the Lieutenant Governor.

I feel being fully informed in light of this unprecedented situation, that the more prepared stakeholders are the preventative and proactive to avoid further transmission of Covid19 to all involved. I look forward to being this new school with full access to guidelines that will be proactive to ease the mind of all stakeholders with complete information as DOE has always had start of year procedures ingrained in the staff. As mentioned earlier this is unprecedented time and information has kept being updated. In my research with information now being given to the public, bringing this to adapt school processes to accommodate past school practices with new Health organization guidelines with Covid19 in forefront to keep all as safe as possible.

Mahalo for considering my concerns on delaying the reopening date of August 4, 2020 to allow adequate time for sharing new procedures with stakeholders.

Sincerely,
Brenda Chase

1

https://www.khon2.com/coronavirus/lt-gov-wants-restrictions-implemented-to-flatten-covid-19-curve/?fbclid=IwAR3eLD_9XpG5o2-Whlh3ETUxAXftSDtIPEYmX7w80m_bBjufzXOta0wXhtM



2020-2021 school year

Susana Choy <alohamade808@gmail.com>

Wed, Jul 29, 2020 at 4:08 PM

To: Testimony.BOE@boe.hawaii.gov

To the BOE,

I have no idea what these teachers need to be trained in that would require an extra 32-40 hours resulting in a delay in opening schools. Most schools are already cutting face to face time and thus students are going to receive very little instruction as is compared to a normal school year.

At this point I don't anticipate very much learning to go on. During the end of the previous school year, teachers sometimes took 24 hours to reply to a student email. I can't say that my daughter learned anything. With only 2 days of in-class instruction anticipated, it will be much the same except she will be left home alone and she's not old enough to have a good grasp on her impulses or have the will power to complete her homework on her own much less attend online classes in a timely manner.

In addition to this travesty, the teachers want to cut education time? I don't think so. If anything, it should be extended. I'm almost to the point of deciding not to send my daughter at all. I would much prefer a refund of a portion of my tax dollars so I can fund our own EFFECTIVE learning regimen.

Our education system is fast becoming a complete sham.

Sincerely,
Susana Choy



Testimony

Melissa Montoya <miss.melissa.montoya@gmail.com>

Wed, Jul 29, 2020 at 5:06 PM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Aloha,

I've been going to work since July 20th. We are not ready to have anyone on campus. It is filthy. Practices are inadequate for 10 minutes, let alone 8 hours. We've had little support. Truly it shows how deep inequities are. Now is the time to help those inequities; instead, you are asking for the most vulnerable communities to be on the brink of survival. We are willing to work with you for our keiki. Please push the start back until after Labor Day, please provide top safety guidance that will help everyone, and please stagger face to face instruction with implementing remote learning first.

Mahalo nui,
Melissa Montoya

--

Melissa Montoya

Waipahu High School

Science Teacher

(808)859-3218

missmelissamontoya@gmail.com



Support for 4 August Opening

Luke McKenney <mckenne9@hotmail.com>

Wed, Jul 29, 2020 at 10:41 AM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Luke McKenney, Parent

General Business Meeting

School Reopening

Support for 4 August Opening

Board of Education,

I have looked over some of the proposed reopening plans and largely support them. Our keiki have suffered enough and have been shouldered with at least \$3 trillion in federal debt and growing.

However, I recommend offering partial face-to-face services on Saturdays to those students who would be only offered two days a week services under the current plan. If the primary argument for limited services is the need to keep social distancing to six feet or more, expand the amount of time the limited space is available. Currently schools are empty two days a week. What a waste of limited resources given the crisis.

Sincerely,

Luke McKenney



Testimony

Lisa Iino <lisavaivaoino@gmail.com>

Wed, Jul 29, 2020 at 5:48 PM

To: testimony.boe@boe.hawaii.gov

I have been a teacher for almost 20 years. Throughout those years, I've committed myself to ensuring that I provide my students a safe place and the best education I can possibly offer them. That includes purchasing things out of pocket such as materials to help them be successful. We teachers do this willingly year after year without hesitation. With all the uncertainties going on, we are still purchasing items for our students like online games, activities, resources and whatever we feel they might need. We're reading more and more on how we can reach our most vulnerable students and how we can better adapt to meet their individual needs. We, are doing the best that we can to prepare ourselves for whatever happens.

We're not asking for much. All we are asking for, just this once, is that you keep us, and everyone around us, safe. Your decision will affect us, our families, our students and their families and everyone else around us.

We love humanity, we love our families and we most definitely love our students. We will go in with open arms and big smiling faces on whatever day you may agree on-But please, please consider the best safety measure before allowing us, our children and our students back on campus.

Respectfully,
Sent from my iPhone



Opening of Classrooms

Susan Buckley <ikai97@hawaiiantel.net>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 5:56 PM

Please see below a copy of my letter to Dr. Kishimoto regarding the opening of classrooms.
I would appreciate it if you would seriously consider my points when meeting tomorrow regarding this subject..
Thank you for your attention.

Susan Buckley

Dear Dr. Kishimoto:

How dare you play God with people's lives with your insistence school classrooms be opened now - come hell or high water! It does not take much to figure out this is an extremely dangerous thing to do, especially with the alarming surge in COVID cases in Hawaii. How does it not set off any bells and whistles with you? The spread of the disease increases the chance of death and no death should be tolerated. Dr. Anderson said very recently when schools open we will see a rise in COVID case and it will happen fast. He also said whenever there is a group of people working closely together. . . . it is a dangerous situation. I believe Dr. Green has verbalized similar concerns? We have already seen spikes with the Hawaiian Airlines attendant training, at a pre-school and recently cases related to a public summer school. Also within public housing where a lot of school children live. These and other incidents are all indicators of the potential danger in opening schools. Additionally we are seeing the rampant spread of the disease on the mainland, taking numerous lives in its path. Make no mistake, it will also happen in Hawaii if we do not use our brains and dial everything back until things are under control. If we do not, it will just make everything worse, both medically, economically and educationally. We are able to fix the situation here on an island if we act quickly and now. So, lets suck it up and do so.

There is no child in the world who is so badly in need of being in the classroom right now that it should trump anyone's life, either. Especially if there are alternatives available. To begin with, this situation will not be forever if we do act now and do the right things. Postponement is definitely an option. Moving the school year forward a bit more won't unduly harm anyone. Total distance learning for the time being is, contrary to popular opinion, also a viability. If there were incentives for children to participate (like grades) it would improve things. If parents monitored their children's attendance and work, they would do just fine. Almost all teachers learned quickly last quarter and put in a lot of effort to make sure the children were getting what they needed. They will continue to improve with the full support of the school district. Computers and connection can be given to students in need while it is necessary. Special situations and adaptations can be created for the children with true extreme needs. There is a solution to probably each and every roadblock you have put up - should you just put some real attention to it. Teachers are good, dedicated and adaptable. They would act to make it happen. So, given the availability of alternatives to opening classrooms right now, they MUST be chosen over risking the life of even one person.

Lastly, if you insist on pursuing this illogical trajectory of opening classrooms right now, the State better start formulating sound plans, procedures and protocols backed by the direction and expertise of the medical profession. Also it must see to the procurement all safety equipment and supplies to adequately protect everyone. It must develop thorough and consistent trainings for all teachers, staff, parents. This must be a unified and dedicated State directed effort, put thoroughly in place in each and every school before any one of them can be open. This kind of program has so far not been in evidence and once it is developed, it will take more than the additional 2 weeks allowed to adequately implement. So far the schools and teachers have largely been left flapping in the breeze and to their own devices. Even today, on their first day back, there are many unanswered questions and the schools are still pretty much working on their own to do the best they can. There is no real support or directed effort being made on their behalf. There is no real assurance of their safety. You may think there's plans and procedures in place but you might want to take a reality check and see how they're actually working out. (Bet parents might be surprised, too.) Besides that, most all the efforts that are currently being made are for the students as opposed to the teachers, So, to be blunt, stop jacking them around. It is abhorrent to expect them to "take one for the team".

Bottom line, you do not have the right to endanger anyone's life; teachers, staff, students and families. Protecting human life absolutely comes first - and anything otherwise will be on you.

Thank you for your attention,
Susan Buckley

P.S. What makes more than 10 people in a classroom or teacher meeting safer than today's social gathering restriction? Dr. Green just said outdoors is better than being inside as a group. And what about those classrooms that never got air-conditioning? All day in one room with stale hot air wearing a mask presents a whole array of problems. Hmm, hazardous working conditions?

Cc: Governor Ige
Lt. Governor Green
Mayor Kirk Caldwell
Dr. Bruce Anderson
Hawaii Board of Education



Testimony

Michael Press <press.michaeld@gmail.com>

Wed, Jul 29, 2020 at 6:24 PM

To: testimony.BOE@boe.hawaii.gov

Greetings,

My name is Michael Press and I am a 7/8 Social Studies teacher and Department Head at Ilima Intermediate School in Campbell/Kapolei complex on Oahu. I am testifying to support a **phased approach** to the reopening of Hawaii Public Schools.

The community group "Hawaii for a Safe Return to Schools" propose instead a Phased Reopening Plan for Hawaii Schools (PRP-HS) that more closely adheres to recommended public health protocols for school reopenings, and will mitigate health risks much more effectively. They also call for a mandatory mask requirement at the state level (not leaving it to teacher discretion), social distancing requirements as currently envisioned, and for each school to carry out an assessment of how to improve classroom ventilation to mitigate airborne spread of COVID-19. The phased approach I am calling for will allow us to carefully determine the impact of each change and avoid any potential outbreak in a school. Hawaii needs to get a handle on Covid-19 before we can safely meet students face to face.

Thank you,
Michael Press



Testimony

Shay Zykova <s.zykova@seariders.k12.hi.us>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 6:28 PM

To Whom It May Concern,

My name is Shay Zykova and I am currently a teacher at Waianae High School. I am writing this testimony because I would like to urge the Board to consider delaying the reopening of schools until cases of COVID-19 are showing a downward rather than upward trend. Or or simply starting the year off with distance learning and transitioning when things become safer.

If schools are to open on August 17th, as planned, COVID will spread. Period. This is not just about the safety of teachers but our students and their families, too. Especially in Waianae, multi-generational families are common that I fear for the safety of my kids' parents and grandparents. The rate of diseases like hypertension, diabetes, etc. is also prevalent in this community and is known to make COVID far more dangerous.

I want to make it clear that I want to return to face-to-face schooling. And if the numbers were down, I'd fully embrace reopening school. But I don't understand how now, with cases the highest they have ever been, we are going full speed ahead to open schools in August.

Moreover, many schools are physically not prepared to reopen. I know that I personally have not received any cleaning supplies, masks, or other promised sanitary protections. With the school year upon us, I've ended up spending my own money, more than \$100 so far, to purchase these things - but due to limited stock, do not yet have everything including necessities like disinfecting spray or wipes. Recently, we were even told to simply store the unused furniture in our rooms because the school cannot store them for us. As a result my classroom "social distancing" ends up being cramped and dangerously close to other students. You are asking teacher to reopen without giving us the supplies, trainings, or health assurances that we would need to keep ourselves and our kids safe.

I ask that the Board provide clearer guidelines on how to safely reopen schools, plus the means to do so. Guidelines mean nothing without the funds, time, and guidance needed to put them in place. Secondly, I urge the Board to consider virtual learning at least for the start of school to reduce the risk of COVID spreading among our kids and their families.

Please think about the danger of opening large campuses with COVID numbers on the rise. We also want to return to school - just not at the expense of ourselves and our kids.

Sincerely,
Shay Zykova



Testimony

cwethall92181 <claudiawethall@gmail.com>

Wed, Jul 29, 2020 at 7:35 PM

To: testimony.BOE@boe.hawaii.gov

To the members of BOE,

A couple of days ago a friend of mine from Colorado posted an article about how teachers are refusing to return to school until there are 14 days of no new cases. Another friend who is an RN in Boston responded:

"They shouldn't go back. The schools are unprepared. They have no real preventative measures in place rather reactive measures when COVID surges again. I know I know kids don't get "as sick" well wait some do, and the problem is the ones that don't are a perfect host to carry the virus back home and into the community. Also the teachers are not refusing to teach they are refusing to return to an unsafe environment. They promised to educate not to risks their lives in the middle of a pandemic. Remote learning is awful..... I agree but it's a sacrifice I am willing to take to keep others safe."

"So we had 256 new cases yesterday. The issue I have with schools reopening is that particular population has no adequate training in PPE or protective equipment. How to put it on, how to take it off, how to prevent cross contamination.... let's just have that be the starting point.... then on top of that the student population also has no perspective or training in infectious disease. You are also relying on each and every student and family to be cautious and follow recommended guidelines. Basically that is a variable that can not be controlled by the teacher and faculty. It is a lot of unknown factors. Also what happens when you do get cases..... because you will get cases. What kind of alerting system will be activated. Will the whole class be quarantined? Will the teacher be quarantined? Will the teacher have the sick leave covered? If a teacher is to pass away from COVID they acquired at school....is there compensation or life insurance in place to support the teachers family or children??!! What if the teacher or someone in their family has a weak immune system ect ect ect I can go on forever. There is no reason to risk lives just to get kids back in a building 6 months earlier. It will happen but we should do it when it is safe"

As our numbers continue to go up I now wonder if full distance learning would best suit our islands. A family can recover with educational setbacks much easier than putting a child in the ground.

Thank you for your time and doing what is right for the keiki and kupuna of our community,

Claudia Wethall
Waihe'e Elementary



July 30 Special Meeting Please delay school opening

Samantha Funes <obe1s@aol.com>

Wed, Jul 29, 2020 at 7:48 PM

To: testimony.boe@boe.hawaii.gov

Thank you for hearing my testimony. I have been an educator for over 30 years. I am born and raised here in our islands. I love our keiki and their families dearly. Everything happening here is happening around the world. We should not be making hasty decisions because we want normalcy to return. Nothing is status quo right now. It is all changing and we are trying to find the balance within it. Physically if you took a walk through our schools you'd see that physically we are not ready...there is furniture, boxes, trash everywhere. Space is an issue. It has always been an issue and now it is a roadblock. Procedure wise we are not ready...do you have any idea of the mass numbers of employees and visitors we receive at school daily? What about substitute teachers? You can't just give them a handbook and send them off to the classroom to protect our keiki. There would be mass consequences. Teacher wise...we need to have discussions as a whole group and in smaller groups to solve problems for our individual environments. The list goes on and on. These are CHILDREN, they do not easily conform because we say it should be so. Are we ready? Are they ready? No. It is time to truly look for solutions while asking the right questions. Please protect our children. Let's find a safe PREPARED way to open schools. Everyone needs to honestly see the big picture. There is no selfishness involved, but only love. Thank you for considering the delay and please look at maybe doing a more phased opening as the Governor has been doing with the state. We implore your help now. As a parent, teacher, and community member I humbly ask for your deep thought and investigation of the matter. This is not an easy task, but you are charged with it and we are depending on your clear judgment based wisdom of our current situation. All will not be lost. We will rise from this and all be better for it. Mahalo nui loa. Me ke aloha pumehana

Samantha Funes
Hawaii DOE teacher

Sent from my iPhone



Open Schools Now!

Sharie Ono <sharieso@gmail.com>

Wed, Jul 29, 2020 at 8:09 PM

To: testimony.boe@boe.hawaii.gov

How can Dr. Kishimoto say the schools were ready and then say they are not less than 2 weeks before school starts? This is horrible and an embarrassment! I called Manana Elementary and Pearl City High School spoke to the principals and they both said they are ready, so why the delay!?

Our kids are going to loose out on 2 weeks of school. It's so clear educating the children, the most needy and vulnerable children of Hawaii, are not the priority! This virus is so over hyped everyone is ignoring other more dangerous illness like strep and flu. When my son caught strep throat at the summer hub at pchs the teacher didn't even give him one day off to rest. Mr. Souza and Nikki Takai, summer school director, was more concerned with going on vacation right after the class ended! So I know this is not about covid. This is about teachers getting a free ride off of the hard working, tax paying, essential workers!

Essential workers have been working thru the whole pandemic. Nobody gave us 2 weeks off to "prepare". Nobody gave us a handbook of instructions. Maybe we should demand that too. Let's shut down everything if you are that scared. No grocery stores, no police stations, no hospitals, no military, no federal assistance. Oh and definitely no air conditioning! Shut it all down because we are all cowards. What are we teaching our children then? We are the children? Everyone needs step by step instructions because they're too dumb or lazy to figure things out for themselves? Oh and that teacher's lives matter more than everyone else?

When my sisters, who are nurses, had to start doing covid testing all they were given were gloves and a mask. They didn't say let's stop for 2 weeks because we need to be told how to do things. There was no time for that! People needed their results now! So they got together on the job and figured things out. What worked what didn't work. This is the ingenuity and initiative that we need to be teaching our children.

My mom was a teacher, her sister in law was a teacher. My aunty was a teacher and her husband was a teacher. I was there with my mom every summer helping set up her classroom. I know what hard working teachers who care about their students are like. They not only cared about the physical health of the children but the mental health. My mom used to say when kids are growing up kids need attention and love, perhaps even more than food. How on earth do you expect a 5 year old to get the best education thru a computer screen? How are they going to learn social skills and develop friendships?

The ridiculous teachers' union has already made the school so short. Now they want to shorten it even more. If you delay school you will be depriving our children even more. I would propose that if they do this the teachers should not get paid. No work no pay!

Sharie and Kelley Ono
8089893827



Reopen schools!!!

melissa gomez <missy808@gmail.com>
To: testimony.boe@boe.hawaii.gov

Wed, Jul 29, 2020 at 8:09 PM

Aloha Board of Education,

My name is Melissa patacchia. I am a parent of 3 keiki, 2 of which attend Sunset Beach Elementary School on the North Shore of Oahu.. As a concerned parent for my children's education I support the reopening of schools this August with the proper protocol for sanitization and social distancing. Classroom instruction is the best modality for learning. We cannot expect all kids will be able to complete or engage in online learning.

Issues with distant learning:

- Internet reliability, worse what about the children that are homeless and have no equipment at all?
- Not enough devices – there were times we had to choose which child was able to call into the classroom and who got to engage due to lack of equipment and classes being scheduled at the same time in the same home. There are also the issues of worksheets. Not all kids have printers.
- Children's questions – sometimes kids had to wait hours/day for a response. This would never happen in an in person environment. Questions keep kids engaged and on task.
- Miscommunication – Many mixed messages occur with online learning. Lessons were misinterpreted and we felt ill equipped in the last quarter of 2019-20. There was wiggle room last year due to the newness of the pandemic, but I feel that our children will be at a major disadvantage if we

continue to only offer DL. Not to mention their grades when they are trying to move into college and need to apply. Online instruction cannot engage the mood and involvement children need to thrive.

- Child Care – For those of us who are still essential workers how are we going to have elementary kids follow a schedule and log in from home alone? Will BOE or the government be providing funds to cover childcare for those of us who are still reporting to our jobs daily? Who will be responsible for getting them to get their work done while we work? Is my 8-year-old going to be held responsible for not being able to sign in on his own, on time and not being tardy? There are too many unanswered issues with having children stay at home.

- Safety at home – some kids homes are unsafe. We have seen a rise of domestic and child abuse among the Covid Stay at Home Orders. We can not assume all children's homes are safe. Many of them rely on the safety and reassurance of going to school.

- Student Meals – many children and parents rely on not only school lunch but school breakfast to keep them healthy and their brains working. How are they going to eat? Is someone going to be able to feed them and drop off meals or pick them up? I am especially concerned for children in poorer areas who I see daily living in Hawaii's parks and on the beaches.

Ideal Solution from and Essential Working Parent:

Open up the schools 100% Monday – Friday and try to make the best social distancing practices.

At summer camp my children wore face masks 845-445 no problem also they temperature scanned the parents heads and all kids in the car everyday for drop off. As well as scanning after lunch everyday. This can be an added precaution as everyone enters SSBE at the same location.

The reality is we need to learn to live and adapt to the virus and not avoid it. Online learning is entirely up in the air and an unreliable slew of problems that I feel both the schools and parents are not prepared to deal with. Please do not mess with the education of our children who are trying their best to succeed in life and let our kids safely return to school.

Aloha,

Melissa patacchia

Sent from my iPhone

Aloha, my name is David Mason.

I have two children attending Kapaa Elementary School.

I believe our schools should start as scheduled during the first week of August, 2020. There should be no further interruptions or delays to our children's education.

I would like to submit a paper published by the CDC, last updated on July 23, 2020 entitled **"The Importance of Reopening America's Schools this Fall"**

The URL link here: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/reopening-schools.html>

I will attach a PDF of the full paper with this email also.

I appreciate your consideration in this matter.

David Mason

Coronavirus Disease 2019 (COVID-19)

The Importance of Reopening America's Schools this Fall

Importance of Reopening Schools

Updated July 23, 2020

[Print](#)

As families and policymakers make decisions about their children returning to school, it is important to consider the full spectrum of benefits and risks of both in-person and virtual learning options. Parents are understandably concerned about the safety of their children at school in the wake of COVID-19. The best available evidence indicates if children become infected, they are far less likely to suffer severe symptoms.^{[1],[2],[3]} Death rates among school-aged children are much lower than among adults. At the same time, the harms attributed to closed schools on the social, emotional, and behavioral health, economic well-being, and academic achievement of children, in both the short- and long-term, are well-known and significant. Further, the lack of in-person educational options disproportionately harms low-income and minority children and those living with disabilities. These students are far less likely to have access to private instruction and care and far more likely to rely on key school-supported resources like food programs, special education services, counseling, and after-school programs to meet basic developmental needs.^[4]

Aside from a child's home, no other setting has more influence on a child's health and well-being than their school. The in-person school environment does the following:

- provides educational instruction;
- supports the development of social and emotional skills;
- creates a safe environment for learning;
- addresses nutritional needs; and
- facilitates physical activity.

This paper discusses each of these critical functions, following a brief summary of current studies regarding COVID-19 and children.

COVID-19 and Children

The best available evidence indicates that COVID-19 poses relatively low risks to school-aged children. Children appear to be at lower risk for contracting COVID-19 compared to adults. To put this in perspective, according to the Centers for Disease Control and Prevention (CDC), as of July 17, 2020, the United States reported that children and adolescents under 18 years old account for under 7 percent of COVID-19 cases and less than 0.1 percent of COVID-19-related deaths.^[5] Although relatively rare, flu-related deaths in children occur every year. From 2004-2005 to 2018-2019, flu-related deaths in children reported to CDC during regular flu seasons ranged from 37 to 187 deaths. During the H1N1 pandemic (April 15, 2009 to October 2, 2010), 358 pediatric deaths were reported to CDC. So far in this pandemic, deaths of children are less than in each of the last five flu seasons, with only 64.[†] Additionally, some children with certain underlying medical conditions, however, are at increased risk of severe illness from COVID-19.^{*}

Scientific studies suggest that COVID-19 transmission among children in schools may be low. International studies that have assessed how readily COVID-19 spreads in schools also reveal low rates of transmission when community transmission is low. Based on current data, the rate of infection among younger school children, and from students to teachers, has been low, especially if proper precautions are followed. There have also been few reports of children being the primary source of COVID-19 transmission among family members.^{[6],[7],[8]} This is consistent with data from both virus and antibody testing, suggesting that children are not the primary drivers of COVID-19 spread in schools or in the community.^{[9],[10],[11]} No studies are conclusive, but the available evidence provides reason to believe that in-person schooling is in the best interest of students, particularly in the context of appropriate mitigation measures similar to those implemented at essential workplaces.

Educational Instruction

Extended school closure is harmful to children. It can lead to severe learning loss, and the need for in-person instruction is particularly important for students with heightened behavioral needs.^{[12],[13]} Following the wave of school closures in March 2020 due to COVID-19, academic learning slowed for most children and stopped for some. A survey of 477 school districts by the University of Washington's

Center on Reinventing Public Education found that, “far too many schools are leaving learning to chance.”^[13] Just one in three school districts expected teachers to provide instruction, track student engagement, or monitor academic progress for all students, and wealthy school districts were twice as likely to have such expectations compared to low-income districts.^[13]

We also know that, for many students, long breaks from in-person education are harmful to student learning. For example, the effects of summer breaks from in-person schooling on academic progress, known as “summer slide,” are also well-documented in the literature. According to the Northwest Evaluation Association, in the summer following third grade, students lose nearly 20 percent of their school-year gains in reading and 27 percent of their school-year gains in math.^[14] By the summer after seventh grade, students lose on average 39 percent of their school-year gains in reading and 50 percent of their school-year gains in math.^[14] This indicates that learning losses are large and become even more severe as a student progresses through school. The prospect of losing several months of schooling, compared to the few weeks of summer vacation, due to school closure likely only makes the learning loss even more severe.

Disparities in educational outcomes caused by school closures are a particular concern for low-income and minority students and students with disabilities. Many low-income families do not have the capacity to facilitate distance learning (e.g. limited or no computer access, limited or no internet access), and may have to rely on school-based services that support their child’s academic success. A study by researchers at Brown and Harvard Universities assessed how 800,000 students used Zearn, an online math program, both before and after schools closed in March 2020.^[15] Data showed that through late April, student progress in math decreased by about half, with the negative impact more pronounced in low-income zip codes.^[15] Persistent achievement gaps that already existed before COVID-19, such as disparities across income levels and races, can worsen and cause serious, hard-to-repair damage to children’s education outcomes.^[15]^[16] Finally, remote learning makes absorbing information more difficult for students with disabilities, developmental delays, or other cognitive disabilities. In particular, students who are deaf, hard of hearing, have low vision, are blind, or have other learning disorders (e.g., attention deficit hyperactivity disorder (ADHD)) and other physical and mental disabilities have had significant difficulties with remote learning.^[17]

Social and Emotional Skill Development

Schools play a critical role in supporting the whole child, not just their academic achievement. In addition to a structure for learning, schools provide a stable and secure environment for developing social skills and peer relationships. Social interaction at school among children in grades PK-12 is particularly important for the development of language, communication, social, emotional, and interpersonal skills.^[18]

Extended school closures are harmful to children’s development of social and emotional skills. Important social interactions that facilitate the development of critical social and emotional skills are greatly curtailed or limited when students are not physically in school. In an in-person school environment, children more easily learn how to develop and maintain friendships, how to behave in groups, and how to interact and form relationships with people outside of their family. In school, students are also able to access support systems needed to recognize and manage emotions, set and achieve positive goals, appreciate others’ perspectives, and make responsible decisions. This helps reinforce children’s feelings of school connectedness, or their belief that teachers and other adults at school care about them and their well-being. Such routine in-person contacts provide opportunities to facilitate social-emotional development that are difficult, if not impossible, to replicate through distance learning.^{[18],[19],[20]}

Additionally, extended closures can be harmful to children’s mental health and can increase the likelihood that children engage in unhealthy behaviors. An environment where students feel safe and connected, such as a school, is associated with lower levels of depression, thoughts about suicide, social anxiety, and sexual activity, as well as higher levels of self-esteem and more adaptive use of free time^{[19],[20]} A longitudinal study of 476 adolescents over 3 years starting in the 6th grade found school connectedness to be especially protective for those who had lower connectedness in other areas of their lives, such as home, and to reduce their likelihood of substance use.^[20]

Further, a review of studies conducted on pandemics found a strong association between length of quarantine and Post Traumatic Stress Disorder symptoms, avoidance behavior, and anger. Another review published this year found that post-traumatic stress scores of children and parents in quarantine were four times higher than those not quarantined.^{[21],[22]}

In-person schooling provides children with access to a variety of mental health and social services, including speech language therapy, and physical or occupational therapy to help the physical, psychological, and academic well-being of the child.^[23]^{[24],[25],[26]} Further, school counselors are trained in the mental health needs of children and youth and can recognize signs of trauma that primary caregivers are less able to see because they themselves are experiencing the same family stresses. School counselors can then coordinate with teachers to implement interventions to offer children a reassuring environment for regaining the sense of order, security, and normalcy.

Without in-person schooling, many children can lose access to these important services. For example, we know that, even outside the context of school closures, children often do not receive the mental health treatment they need. Among children ages 9-17, it is estimated that 21 percent, or more than 14 million children, experience some type of mental health condition.^[27] Yet only 16 percent of those with a condition receive any treatment^[23] Of those 70-80 percent received such care in a school setting^[23] School closures can be

those with a condition receive any treatment.^[27] Of those, 75–85 percent received such care in a school setting.^[28] School closures can be particularly damaging for the 7.4 million American children suffering from a serious emotional disturbance. For those individuals who have a diagnosable mental, behavioral or emotional condition that substantially interferes with or limits their social functioning, schools play an integral role in linking them to care and necessary support services.

For children with intellectual or physical disabilities, nearly all therapies and services are received through schools. These vital services are difficult to provide through distance learning models. As a result, more children with disabilities have received few to no services while schools have been closed.

Safety

Extended school closures deprive children who live in unsafe homes and neighborhoods of an important layer of protection from neglect as well as physical, sexual, and emotional maltreatment and abuse. A 2018 Department of Health and Human Services report found that teachers and other educational staff were responsible for more than one-fifth of all reported child abuse cases—more than any other category of reporter.^[28] During the COVID-19 school closures, however, there has been a sharp decline in reports of suspected maltreatment, but tragically a notable increase in evidence of abuse when children are seen for services. For example, the Washington, D.C. Child and Family Services Agency recorded a 62 percent decrease in child abuse reporting calls between mid-March and April 2020 compared to the same time period in 2019, but saw more severe presentation of child abuse cases in emergency rooms.^[29] Children who live in a home or neighborhood where neglect, violence, or abuse occur, but who are not physically in school, are deprived of access to trained school professionals who can readily identify the signs of trauma and provide needed support and guidance.^{[30],[31],[32],[33],[34]}

Nutrition

Extended school closures can be harmful to the nutritional health of children. Schools are essential to meeting the nutritional needs of children with many consuming up to half their daily calories at school. Nationwide more than 30 million children participate in the National School Lunch Program and nearly 15 million participate in the School Breakfast Program.^{[35],[36]} For children from low-income families, school meals are an especially critical source of affordable, healthy foods. While schools have implemented strategies to continue meal services throughout periods of school closures, it is difficult to maintain this type of school nutrition program over the long-term. This is a particularly severe problem for the estimated 11 million food-insecure children, living in the United States.

Physical Activity

When schools are closed, children lose access to important opportunities for physical activity. Many children may not be sufficiently physically active outside of the context of in-school physical education (PE) and other school-based activities. Beyond PE, with schools closed, children may not have sufficient opportunities to participate in organized and safe physical activity. They also lose access to other school-based physical activities, including recess, classroom engagements, and after school programs.





The loss of opportunities for physical activity from school closures, especially when coupled with potentially diminished nutrition, can be particularly harmful to children. Physical inactivity and poor nutrition among children are major risk factors for childhood obesity and other chronic health conditions. Over 75 percent of children and adolescents in the United States do not meet the daily physical activity level recommendations (60 minutes or more), and nearly half exceed 2 hours per day in sedentary behavior. Current models estimate that childhood obesity rate may increase by 2.4 percent if school closures continue to December 2020.^{[37],[38],[39]}












Conclusion

Schools are an important part of the infrastructure of our communities, as they provide safe, supportive learning environments for students, employ teachers and other staff, and enable parents, guardians, and caregivers to work. Schools also provide critical services that help meet the needs of children and families, especially those who are disadvantaged, through supporting the development of social and emotional skills, creating a safe environment for learning, identifying and addressing neglect and abuse, fulfilling nutritional needs, and facilitating physical activity. School closure disrupts the delivery of in-person instruction and critical services to children and families, which has negative individual and societal ramifications. The best available evidence from countries that have opened schools indicates that COVID-19 poses low risks to school-aged children, at least in areas with low community transmission, and suggests that children are unlikely to be major drivers of the spread of the virus. Reopening schools creates opportunity to invest in the education, well-being, and future of one of America’s greatest assets—our children—while taking every precaution to protect students, teachers, staff and all their families.

*Some children have developed multisystem inflammatory syndrome (MIS-C) after exposure to SARS-CoV-2 (the virus that causes COVID-19). (<https://www.cdc.gov/mis-c/cases/index.html>) In one targeted surveillance study for MIS-C associated with SARS-CoV-2, however, the majority of children who were hospitalized with COVID-related MIS-C (70 percent) had recovered by the end date of the study period. (Feldstein LR et al.. Multisystem Inflammatory Syndrome in US Children and Adolescents. N Engl J Med. 2020;10.1056/NEJMoa2021680)

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Last Updated July 23, 2020



Testimony for Students to return to some sort of schooling

Melissa Wilson <melissa@kauaithera.com>

Wed, Jul 29, 2020 at 9:00 PM

To: testimony.boe@boe.hawaii.gov

My name is Melissa Wilson, I am a Licensed Marriage and Family Therapist in the county of Kauai. A majority of my client population is adolescents. I am also a parent of a child entering the 6th grade. I am in favor of children returning to school as soon as possible. If it is deemed unsafe for children and teachers to go back to school in person I am in favor of online learning. I feel the DOE has had all summer to plan and prepare for distance learning. I was surprised parents were given only one week's notice to scramble to find child care and reschedule with work. I am curious as to why children cannot start with virtual learning. I need you to figure out how to make this work. I myself do not have kapuna child care, nor the ability to stay at home and teach my child. I am the sole income earner in my small family. I have seen both my daughter and my adolescent clients struggle with lack of social engagement (social engagement can be online!). Many are struggling with loneliness and symptoms of depression. I am in favor of starting school ASAP whether virtual/blended/ or for some families and situations in class. I would feel comfortable sending my child to school with a face mask and face shield for face to face learning.

Thank You,
Melissa Wilson, LMFT
Hanamaulu, Kauai

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Thank you for your time



Testimony

David Wright <carldavidwrightjr@gmail.com>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 9:15 PM

Chairwoman Payne and Board Members,

Thank you for your time and deliberation on the matter of school reopening plans. I have 6 YES or NO questions about COVID 19 in regard to the school setting.

1. Can the DOE prevent one case of COVID 19 from being spread to anyone at school?
2. Can a child die from COVID 19?
3. Can the DOE prevent a teacher from catching Covid-19 at school and dying?
4. Can parents die if their child gives them the COVID 19 Virus?
5. Is it possible for a small child to lose both parents and become an ORPHAN?
6. Has the DOE confirmed 8 campus related coronavirus cases reported during summer school?

If you answered YES to any of the above, please strongly consider VIRTUAL ONLINE learning for all students until there is a cure for this virus.

I know this isn't an easy time for anyone and I sincerely appreciate your time and consideration.

Sincerely,

David Wright
Kapolei High School
10th Grade US History / AP Psychology

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David Wright



School reopening on 7/17/2020

kanewawilkinson <kanewawilkinson@yahoo.com>

Wed, Jul 29, 2020 at 9:25 PM

To: Testimony.BOE@boe.hawaii.gov

I am giving my testimony because as a grandma with custody of my 2 grandchildren I don't feel it would be safe at this time. I love the staff at blanche pope elementary school where they attend however I don't feel they have enough supervision for the children. Children will be children no matter how much you try to teach them about how they need to behave in school they are going slip up and someone will definitely get covid-19. No matter if the child is in elementary or high school. I work in the cafe at a high school and a lot of students already do not follow rules and directions so what makes u think they will follow rules now. Like I said kids will be kids. A lot of teachers and staff have also voiced their concerns for themselves as well as their families well beings which I feel is very important as well, especially with the spike of cases on Oahu at this time. I think the children should continue with 100% distant learning until the virus goes down and teachers, staff, children and parents feel safe. I understand people need child care and need to go back to work however things could be much worse if they caught the virus.

Sent from my T-Mobile 4G LTE Device



Teacher differentials

Lauryn Hirano <laurynj44@yahoo.com>
To: testimony.boe@boe.hawaii.gov

Wed, Jul 29, 2020 at 9:43 PM

Dear Board of Education,

My name is Lauryn Castro and I am an educator at Kea'au Elementary School. I am writing in regards to Action Item G: Board Action on temporary discontinuance of extra compensation for classroom teachers in special education, hard-to-staff geographical locations, and Hawaiian language immersion programs for the 2020-2021 school year. Kea'au is a hard-to-staff geographical location, and even a temporary discontinuance of extra compensation will make it more difficult for teachers at our school to service our students during this unprecedented time. Many of us spend our own money to help supply and support our students with their academic and emotional needs. Removing this differential will potentially drop our 90% complex area teacher retention rate, when we are already facing a teacher shortage this upcoming school year. Please reject this proposal so 4,000 teachers will not see a drop in pay.

These differentials are so important for teacher's in schools such as mine. We put so much money into our student's basic needs and our classrooms to make them feel welcomed and comfortable. Many of these students come from broken homes and can't afford things such as toothbrushes, slippers, snacks, school supplies, etc. Teachers use their own personal monies to pay for items such as these. To keep students engaged in learning we also supply our own classrooms with prizes that encourage them to try their best and to meet goals. Plus, we just like to spoil and love them. Again, please do not take away the much needed extra compensation.

Sincerely,

Lauryn Castro



Testimony Discussion Item VI(A): July 30 BOE meeting regarding schools reopening at a later date (8/17/20)

Mandakini Goode <mgoode@waialae.edu>

Wed, Jul 29, 2020 at 10:04 PM

To: testimony.boe@boe.hawaii.gov

Hi,

My name is Mandakini Goode and I am a PK teacher at Wai'alae Elementary Public Charter School. I am submitting testimony regarding Discussion Item VI(A): **July 30 BOE meeting regarding schools reopening at a later date (8/17/20)**.

I strongly encourage the Board delay the opening of schools until school staff have had enough time to adequately prepare to safely reopen. This includes preparation and training in:

- Social distancing expectations and guidance on how to implement social distancing in teachers unique classroom and population situation.
- Safe use of PPE for adults and children.
- Distance, hybrid and blended instructional models, best practices and supports. Face-to-face instruction is the best, but we have to accept the reality of what we are facing right now. There are so many issues of engagement, equity, access with distance learning. Let's give everybody the opportunity to learn some best practices, get trained in technology, and start to work on their curriculum so we can overcome that divide.
- Updated school guidelines and logistics. Schools are like enormous jigsaw puzzles. Change one thing, it impacts something unexpected elsewhere. Schools need time to collaborate with teachers and staff as we change what feels like almost everything (bell schedules, office access, cafeteria, special subjects, articulation schedules, custodial cleaning schedules, etc.) We then need time to appropriately communicate that with parents, and even provide training if needed.
- Support for teachers and staff with unique populations, including staff working with children with special needs (teachers, EAs, paraprofessionals, therapists, etc.), early childhood educators, MLL populations etc.

Schools also need to train and adequately equip not just teachers, but all the staff at the schools.

- Custodial staff: Thus far, the custodial staff at our school have not received any training in how to protect themselves as they do the hard work of protecting all of us. The state has not communicated with custodial staff and schools updated guidelines regarding sanitizing or personal protective measures in these unusual times. Moreover, the state has to support ALL schools (DOE and Charter) in overcoming critical supply chain challenges and ensure that schools have the cleaning supplies they need. This especially includes custodial staff. At our school, they will be going into the cafeteria after groups of 70+ students, 3 times a day, to sanitize. While students will wear masks in the classrooms, they obviously will not while they eat. Do the custodial and cafeteria staff have medical-grade PPE (not just home-made masks) so that they are safe in this large gathering? No. Knowing what we now know about aerosols and coronavirus, it is vital that they have appropriate PPE and training for their health and safety. As custodial staff go into all areas of campus, this is also significant for the safety of the school and wider community.
- EAs and support staff that work closely with children with special needs and early childhood populations. At my school, none of them have received training yet.
- Families: I am at risk and I have been very careful about my social distancing. I've been staying home, not gathering, significantly limiting my social interactions or including virtual activities, social distancing when I go out to the grocery store, getting delivery as much as possible, etc. Now, the state is asking me to accept a significant health risk into my life. I've been asked to become part of a classroom pod or Ohana bubble with myself, my EA, my co-teacher and my very young PK students. I am significantly increasing my contact chains and hence my chance of contracting Covid-19. I am depending on my coworkers' diligence in their social distancing habits, and that of my students and their families. The state needs to be providing information, resources and trainings to families on simple strategies and resources to minimize their exposure. We must also reach out to families of a variety of socioeconomic backgrounds and languages because we are all in this together!
- New teachers and new staff: This year, we have had significant movement in positions in the school. People have left who have not wanted to put their lives at risk or as a response to changing work conditions due to the pandemic. Faculty and staff members have had to change positions, move into new lines, or even unexpectedly

change rooms/ offices or give up storage space. Schools need time to work those things out, train people in new positions, or even hire personnel.

Right now, I know that school staff, teachers and administrators are working very hard to safely reopen. But, I also know that administration is struggling to get all of the information and resources needed to support safety and distance learning. I know teachers are struggling with setting up their socially distanced classroom. I know teachers still need guidance and training. I know that support staff have not yet received training and support, or what they have received is only the start of what is needed.

Honestly, I am at risk and am very concerned about going back to work. I live in a multigenerational household with multiple at-risk individuals. I'm scared to go back as I know how hard it will be for preschool-aged children to social distance. I know how hard it will be for our school community to stay safe when we are talking about gathering 600+ people onto a school campus. I'm scared, but I love my job and I love working with my students. I'm passionate about early childhood and what I do. I want to go back, but it has to be done safely. It really is important that we are going back to a safe space.

At the best of times, that first week of school before students start is BUSY!! There is never enough time to get it set up right, but we try. Teachers start coming in before the actual start date, they stay late, they work at home on making things for the new school year, or they come in on their weekend. Setting up a space with clear visuals, procedures and guidelines, and implementing a supportive first few weeks curriculum with clear expectations for students, makes such a difference in the long run. It sets our students up for a successful year! It is never perfect and I do not expect it to be, but we are far from where we need to be to safely reopen. We need extra time. Right now with so much riding on what we do, we absolutely owe it to our keiki, their ohanas, our school staff and the wider community to do it right.

Thank you,



My Testimony - Allow Schools to Open On Time (Aug.4)

Leka Anitema <lupe.anitema@mauihigh.org>

Wed, Jul 29, 2020 at 10:08 PM

To: testimony.BOE@boe.hawaii.gov

School is not just for education... whether we like it or not it also serves a function of childcare and along with that it's a safe space, a community for friendship, a source of nutrition, a place to access technology safely, a place for disability services. Thus I think many would agree that there is a solid argument that school is an essential service and that teachers are frontline workers.

Frontline workers need to be provided with training, PPE, and assurances of help and security if they get ill. They also need to be paid well and have good options for childcare while they work.

Not all kids need to be in a school building to learn but some do.. and many of these in the "some" group need to return sooner rather than later.. Some kids could stay home with a parent to teach them to free up space for others to be in the classroom. But then this might have the side effect of segregation....

Some teachers have very valid concerns for their own and their families health, some are maybe overly Anxious...

There are real concerns with the virus but also some effective treatment as well as most recovering without medical treatments. Healthy Kids are also shown in study after study to be very rarely seriously effected. But then kids who are high risk should have other options then in person school.

School needs to be open for in person learning ON TIME for at least some of the population. If it is a delayed start parent need to know with enough time to get childcare in order and community social organizations need to have resources to offer interim childcare.

Teachers need to have rights to be protected from illness and looked after if illness should arise. Teachers should be allowed to be part of unions as long as there are checks and balances.

Schools need to be fully funded based on the children registered not the number of children in the classroom.

Full lockdown measures could be necessary for a more serious disease or it could have even been justifiable for a short period to eradicate the spread of covid but we tried that and it didn't work and probably just wouldn't work for the USA because of our population, travel, state laws, unpreparedness etc. at this point we just have to live with it and take limited closer and safety measures (limit capacity, masks, close or delay very high risk locations or events).

Parents need support and we need to look after each other in our communities. Small pods of people who take precautions and can easily contact trace should be formed to support families with young children. Also older children and teens need each other too and could safely socialize in small groups to better support families.

I could go on and on about how we need to have stronger communities (affordable housing, continue unemployment support, food security, healthcare etc) and I don't know everything for sure and I'm open to discussion....but we don't need to politicize everything or bite at each other.

We have had more than enough time to prepare. VULnerable teachers and students should not return to the schools - but the rest of us should - we are part of the large puzzle that runs our community and there is an obligation to follow through our commitment to the community of Hawaii.

Lupe Anitema



Testimony

Yuancheng Cao <cao916245578@gmail.com>

Wed, Jul 29, 2020 at 10:14 PM

To: Testimony.BOE@boe.hawaii.gov

Meet: Thursday, July 30, 2020 Virtual Board of Education Meeting

Position: comment

DOE has said equality, but I think those students who choose 100% Distance Learning are not fair at all. Students use the *Acellus Program* and then no language, AP, honor, art, and some CTE courses are provided? In other words, parents do not want their children to go to school, but the *Acellus Program* does not provide students wanting, which eventually leads students to school or students have to give up language, AP, honors, and some CTE courses. Does BOE predict that if school starts, there may be 200 cases a day, and then BOE will become the culprit? Parents will blame BOE if their children got infected. Students taking public buses are also a problem.

Students who take public buses are also a problem. Have BOE and DOE ever thought about students' use of transpiration from home to school or school to home? It seems like that they only think about School Buses.

Not letting teachers teach students personally because this behavior violates the agreement between the union and the school???? Finally, I want to ask you whether the lives of students are more important OR the agreement union made are more important.

Thank you



Sped mtgs during the 1st quarter

marileiko@hotmail.com <marileiko@hotmail.com>
To: testimony.BOE@boe.hawaii.gov

Wed, Jul 29, 2020 at 10:38 PM

Hi,
I'm hoping this goes through since it's after the deadline, but I thought of question if the BOE approves pushing back the start of the school year. Will special education teachers be given more time to hold meetings that needed to be held for each student in the 1st quarter? Would this date be pushed into the second quarter? First of all, please allow a reasonable amount of time to test students. Keep in mind that they may only attend school in person a couple times a week, so testing will take time. IEP teams will need that data to make informed decisions on each child's plan. Also, consider the amount of IEP's that schools will need to coordinate with 1 administrator, with service providers that are shared with other schools, and with counselors scheduling 504 meetings in the 1st quarter too.

Aloha,
Mari



Delaying start of school for students

David and Elaine Estess <deestess@hawaii.rr.com>

Wed, Jul 29, 2020 at 11:00 PM

To: testimony.boe@boe.hawaii.gov

Dear BOE,

My name is Elaine Estess and I am a teacher at Kealakehe Intermediate School. I hope BOE makes the right decision to delay the start of school for students. Our schools are not ready to bring students back to school safely. Faculty need to be a part of the discussion in providing specific guidelines and procedures to keep staff and students safe and to mitigate the spread of Covid-19 in our schools. Four days is not enough time to have these discussions to come up with specific safety plans. I and many of my colleagues do not feel safe returning to school without specific plans in place to safely operate our schools. So please make the right decision to delay students returning to school.

Sincerely,
Elaine Estess

Sent from my iPad



Testimony Ka'elepulu

Sarah Pfeiffer <skfg76@gmail.com>
To: testimony.boe@boe.hawaii.gov

Wed, Jul 29, 2020 at 11:19 PM

Good evening,

As the parent of two children at Kaelepulu with one fifth grader who needs extra assistance with his IEP I plead with you to make education a priority. My children cannot afford to lose any more time without professional guided education and structure.

Please consider the affects of your choices on our keiki.

Regards

Sarah and Steve Pfeiffer
Sent from my iPhone



Reopening of schools

CindyLou Moura <cindyloumoura@gmail.com>

Wed, Jul 29, 2020 at 11:22 PM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Hello, I'm a mother of a soon to be Freshman. I also do recess duty at a elementary school. I am writing this in hopes that you will all give our teachers the time that is needed to prepare for this new way of teaching. I see first hand what teachers do on a daily basis and that is hard. Now with COVID-19 it's not just teaching that needs to be done. You need to think about the BIGGER picture. No one knows what else this virus can do so are you really willing to put Hawaii's children, school staff and teachers at risk? If any of you have children would you send them to school? At first our daughter planned to go to school but during the weekend we decided to do online. So like I asked would you send your child to school? Thank You for your time. Sincerely, Cindy Moura (from Kauai)



Delay opening our schools and provide additional support for safety.

Hilary Yaeger <teach2bpeaceful@yahoo.com>

Wed, Jul 29, 2020 at 11:25 PM

Reply-To: Hilary Yaeger <teach2bpeaceful@yahoo.com>

To: "testimony.BOE@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Aloha Board of Education (testimony.BOE@boe.hawaii.gov),

I am a middle school science teacher at Hana High & Elementary and a veteran teacher of 12+ years. My children (8 and 10) also attend Hana School. We are scared. This is real, and I know you know it is real. When the BOE meets, it is a virtual meeting because Covid-19 spreads quickly, and has a high mortality and morbidity rate.

I live in a multi-generational home with my parents who are in their 70s. My mom has already had a heart attack and they won't survive a Covid-19 infection. I really don't want my children or I to bring it home. Emotionally, having children feeling guilt for being responsible for killing their grandparent, a teacher, a classmate, or a friend would be very hard for them. Covid-19 will spread through our schools quickly. We don't have a plan for testing and won't even know.

Do you know what a normal school looks like once school starts? We are a snotty, sneezing, sniffy, coughing mess and that's without spike proteins invading our beings. Due to budget shortfalls, we have to rely on families to donate tissues and wipes to our school.

Our state has worked hard at keeping our Covid-19 numbers low by requiring masks to be worn and keeping 6 feet away at all businesses in the state. Unfortunately Covid-19 is spreading through our community at an increasing rate. Covid-19 is more contagious than the flu and researchers now know that it can be transmitted as an aerosol as well as in droplet form. People have become infected at a distance of more than 20 feet. Students (children) are expected to wear a mask and prevent the spread of a deadly pandemic better than the adults currently are able to? When it is time to eat, the students are to bring their lunches back to the classrooms to eat. They need to take off their masks and sit at their desks 6 feet apart and then do they hope the Covid virus also takes a break from spreading during this time?

I have a lot of pride in being a teacher and teaching the next generation of Hawaiian citizens, but I feel like I am not cared about. Is it OK for me to die because it is easier? My parents are in their 70s and have heart conditions. If I bring Covid-19 home, my parents will die. Will wash my hands as much as I can, but I am not given to tools to protect myself, my students, or our families. We need more training, supplies, small groups or on-line.

I live and teach in a community that is 80% Hawaiian. We only have a very small day clinic. Our school is working hard at reviving the Hawaiian culture and language. The worst thing we could do is to infect our community killing our kupuna and our sources of knowledge in our community. We need to protect our people from Covid-19 so that it doesn't spread through our community like it has in the Navajo nation and other native people.

Out of an abundance of caution please let's maintain the very serious recommendations of our national health services the CDC and the epidemiologist Anthony S. Fauci, M.D., NIAID Director who leads the national efforts to devise effective a comprehensive strategy for combating Covid-19. Now is NOT the time to stray from the reasoned prevention and safety measures recommend which can easily be adjusted after gathering actual data within the school setting after a period of time once schools have reopened.

Thank You for Your Consideration

Hilary Lang



Children and their impact on Covid 19

George Passmore <outlook_F07D2AED727C70E6@outlook.com>
To: "testimony.BOE@boe.hawaii.gov" <testimony.BOE@boe.hawaii.gov>

Thu, Jul 30, 2020 at 1:44 AM

It is in the best interest of everyone involved if the children can safely return to their classrooms.

In order to be safe, these children really need to limit other vectors that will contribute to them carrying infections into the school.

These same children have been participating in youth sports leagues such as Flag Football, Little League Baseball, Pop Warner, T-ball, Soccer, etc. around the state for the past month. While many of the leagues themselves have preventative measures in place for the games, very few of them have any measures in place for the practice sessions. Just a trip to the neighborhood parks in the afternoon will show hundreds of children, parents, and coaches hardly practicing any preventative measures. It's as though they don't believe they are the least bit vulnerable to Covid.

These events should be put on ice until school has successfully been started back. There should not be layers of possible vectors for the spread among the same population. School is the one and only activity that should be competing with Covid.

Please urge the DOH, HIDOE, Mayor's, and Governor to seriously consider banning these events so that they do not add to the mayhem of an already tense situation with school openings. They can all wait a year.

Thank You
George Passmore



Youth Sports Leagues Negative Impact on School Opening

gpassmore@hawaii.rr.com <gpassmore@hawaii.rr.com>

Thu, Jul 30, 2020 at 1:47 AM

To: "testimony.BOE@boe.hawaii.gov" <testimony.BOE@boe.hawaii.gov>

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Please urge the DOH, HDOE, Mayor's, and Governor to seriously consider banning these events so that they do not add to the mayhem of an already tense situation with school openings. They can all wait a year.

Thank You

George Passmore



Moving School reopening date

Marvie Rellanos <rellanosmarvie@gmail.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 1:54 AM

Aloha,

I have a brother who goes to McKinley High School. He is receiving special education because of his autism. I believe that moving school reopening is necessary to give school and faculty time to prepare to keep everyone around safe. With the growing number of cases across the state, it is not safe for student to go to school, where social distancing will be hard to impose. My brother is in special education in which virtual school is hard to implement because he needs face to face assistant to achieve his IEP goal. My brother also has Epilepsy. Being sick such as cough and fever can triggers seizure. Therefore, we are not confident on sending him to school with a fear that he might caught the virus. Therefore, you guys should reconsider the reopening of schools for students who are vulnerable in health.

Thank you and make it a great day.

Marvie R.

Sent from my iPhone



Hawaii Public School year 2020-2021

Poli'ahu Dulay <wpoliahu76@gmail.com>

Thu, Jul 30, 2020 at 5:17 AM

To: Testimony.BOE@boe.hawaii.gov

Good Morning,

I am writing to you as a parent to 3 elementary aged keiki and 1 middle school keiki all of which attend Hawaii public schools.

Your consideration to postpone the start of hawaii Public school Year 2020-2021.

At the moment, Hawaiis Department of Education has irresponsibly allowed the economy take priority over the well-being our Hawaiis keiki.

The false justification that opening the schools allows parents to return to work is not true. The schools proposed Rotating and hybrid school schedules with staggered pickup and dropoff times makes it nearly impossible for many parents like myself to work.

As an essential work in the eyes of the Department of defense (because building weapons for the navy is apparently essential in a time of a world pandemic) my employer continues to neglect my request for support and flexibility as a single parent. I may need to consider quitting or may even get terminated because my employers refusal to deny my requests.

As a parent, and with my family members who are longtime teachers at Hawaii public schools, Charter school teachers and UH professors, I am more than willing to quit working because I take my children and their academic journey as a priority.

I request the board to consider postponing the start of the year and to keep a 100% virtual program for all students until January. This is necessary because we remain in a tough fight against a world pandemic.

Thank you

Whitney Dulay

Wpoliahu76@gmail.com



Testimony Distance Learning

Sienna Makarewicz <ohanamaka@gmail.com>

Thu, Jul 30, 2020 at 6:21 AM

To: testimony.boe@boe.hawaii.gov

I have sent testimony already but after going to school yesterday I feel compelled to write again. We are NOT ready. My room is filthy! Our custodians are not even done with their regular summer cleaning. I tried to rearrange my room. I have to stack many items. I put away center items, rolled up carpets and tried to hide away any manipulative. I pushed aside small group tables. All of this to keep us 6 feet away from each other. I tried to think of anything that would be touched by someone else and eliminated it. This is not what a second grade classroom should look like. The classroom pictures of social distancing are staged empty classrooms! We cannot take our however temporary extra furniture and supplies out of our rooms. There is no where to store it. It makes the room look cluttered and junk with stacks of stuff pushed to the side. This is stuff that we should feel safe to use if we are in school. We are not ready. We should start with a true distance learning plan. We have a staff meeting today all day. It is supposed to be able to be attended virtually. There is no set up for that. I have heard maybe there will be a computer in the room pointed towards the speaker. We might receive an invite to the meeting a few minutes before the meeting starts. Does this sound well planned or thought out? I saw Tyler Perry on a TV show as I was waiting for my car to be fixed. He has created a camp Quarantine for his movie where he has spent hundreds of thousands of dollars to keep his people safe. They are all tested every 4 days. The site is kept meticulously clean by professionals. They all stay there. They are quarantined 14 days before they mingle. How many children and adults are asymptomatic? We do not know because no one has been tested. We still do not have a clear plan if someone is positive. Children have been isolated too. Have you ever seen how fast a virus spreads in a classroom? I have. We won't all survive. It is obvious that the DOE is not going to try and protect us. Will you? Please?

Thank you,

Sienna Makarewicz

Second Grade Teacher

Kapaa Elementary School

Sent from my iPad



testimony for delay of opening schools , testimony for delay of opening schools when SAFE

Valerie Simmons <waifongsimmons@gmail.com>

Thu, Jul 30, 2020 at 6:52 AM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Cc: Gmail <waifongsimmons@gmail.com>

Please consider the delay of opening schools. Now that we have had our opening meeting, teachers still see that there are so many unanswered questions. For us to be able to do the best job possible, we need to have answers rather than unknowns.

Cleaning is a big problem. That still has not been completely addressed at the meeting. We still don't know what this will look like.

Finally, with the up tick in numbers of cases and with children also being infected. I believe to keep all safe, we should delay the opening of schools until we can re-open with safety. How would this help if schools would have to quarantine, then if teachers are not able to return, we will be in a more dire crisis than we are now.

Thank you for your consideration.

Sent from [Mail](#) for Windows 10

Late Testimony

To: State of Hawaii Board of Education
General Board Meeting

28 JULY 2020

From: Kaohu D.

RE: Opening of Hawaii Public Schools

Dear Board,

My name is Kaohu, a life-long resident of this wonderful state of Hawaii. My wife and I both grew up and graduated in the Hawaii State Public School System. With the recent pandemic that has come upon us, our children's education is a great risk. It has concerned us so much that we've decided to write to the board.

When the schools suddenly shut down during spring break, like most families we struggled to find adequate childcare for our children. Since then we have continued and still have our daily struggles with this issue. My wife and I both work a Monday thru Friday schedule. We are both considered essential workers. We weren't able to stay home with our children and assist them with their distant learning.

The schools took over a month to even give us as parents guidance on what to do. One of our children didn't even get work to do from home. Our children are now suffering from the shut down of schools. One of the best memories I had as a child was being able to socialize with my friends. It is proven that socialization between students and friends is vital to a child's mental health. Everyday my children become restless because they want to see their friends. A computer and technology can only do so much. Face-to-Face interaction is needed for a healthy mental state.

As a First Responder, I wasn't given the option to stay home and be with my family unless I burned my vacation days. See, my salary is paid for by the taxpayers of the State of Hawaii. If I don't show up to work because I "don't feel safe", I could lose my job. Also, the taxpayers will not receive the response needed from first responders. I have a sense of responsibility that I must do whatever it takes to serve our communities.

It is a "Slap in the Face" for all first responders and front-line personnel who did not stop working, who had no choice but to go to work, who didn't have time to prepare for the pandemic, and who had to learn as it went on. We are out there every single day dealing with the general public, many of whom we don't know where they came from. We don't know if they have the virus, yet we are still expected to serve them. We don't get to choose "Who to Serve" or "When to Serve". So why do the teachers have a say of when they go back to work. They are fighting their return to the classrooms. To me, their excuse is poor one to me and it simply doesn't make sense.

Since schools shut down in March, the DOE, schools, and teachers had all this time to "prepare" for the reopening of the schools. Why wasn't that time used wisely? Now since school is supposed to start on August 4th, they want to push back the date yet again to "Prepare". Like I

have stated before, first responders and front-line personnel weren't given time to "prepare", we weren't even given adequate Personal Protective Equipment, yet we still had to do our jobs. Schools and teachers should be treated the same way as first responders.

If you don't already know the public school teachers are paid via the taxpayer dollar. Shouldn't they feel a sense of responsibility to return to the classroom instead of fighting the return? I, as a first responder are more likely to contract COVID-19 than a teacher is. Do I fear bringing the virus home to my family? The answer is simply yes. But again, I don't have choice to choose "When to Serve" or "Who to Serve". Teachers are still getting paid during this time, but they are not teaching my children anything. I serve the public both on and off-duty. Teacher are only asked to serve our children in school. Make them accountable and take ownership of their jobs that they signed up for.

In conclusion, schools should and need to reopen on August 4, 2020. Our children education is at great risk here. Families are struggling every single day because working parents cannot be there all the time to monitor their children. Families with children in multiple schools who don't have the same schedule are having an even harder time. The children's mental health is also at risk with not having that social bond between friends. A computer and technology can only do so much. Please reopen our public schools on August 4, 2020. Our children and families need this to happen.

Thank you for your time.
Sincerely,
Kaohu D



Testimony for BOE Special Meeting 7/30/2020

Cuong Do <cuongd@gmail.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 7:13 AM

Hi,

I believe it's inevitable school opening will be delayed for 2 weeks. But I do hope it does not get delayed any further. I'd like the BOE to consider allowing each school's staff and parents decide on any further delay as I feel my child's school was more than ready to open on time. We were also willing to donate and volunteer to help facilitate the opening of school on time. We shouldn't make blanket decision and force all schools to delay opening when some schools are ready. Let each individual school decide on this matter.

Things will never be perfect so we just need to move forward and give parents and teachers options. Continued delays does not give parents any options at all.

Aloha,
Cuong Do



Agenda items A B C

Melissa Turner <melissa.hsta@gmail.com>

Thu, Jul 30, 2020 at 7:31 AM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Dear Board of Education,

Thank you for hearing our concerns. I am speaking in support for agenda items A, B, and C on the agenda. This pandemic as you all know has rapidly changed our everyday life. With these changes has come the risk of death from a virus that has killed over 140,000 people nationwide. Thousands of people are dying each day. Hawaii is one of the states with the least amount of cases, however, we have had a raise in our cases recently with 109 new cases on Wednesday. We have had 170 children get infected; now imagine what that will do to a school population. Hawaii has managed to have low numbers in comparison to the rest of the nation most likely due to the tough protocols that were put into place state wide. Such as wearing a mask when in public. It may not be comfortable but at least you are not dying. I feel strongly that the school classrooms should be considered public. Let's get real here. There are no "bubbles". It is nice to imagine that such a thing could exist, however, we have no control over where and what students and their families do when they leave our classrooms. There are some people who feel masks are not important. Therefore, they do not wear them as they should hence putting themselves at risk of exposure. That exposure would then lead to their family being exposed then the class that their child is in. This is not acceptable! I feel that it is of great importance that the Board take this situation very seriously. We wear masks to go to the store or get gas. Let's protect our children and teachers with the same policy. It may not be comfortable but at least we will survive. My daughter is teaching kindergarten in South Korea and the students and staff at her school wear masks and sit six feet apart all day. So yes, even our youngest students can wear masks. This is our new normal and who knows how long it will last. I urge the Board to make masks mandatory while on a school campus, in the classroom, on the playground or on the bus. After all these are people's lives we are talking about. I would rather be uncomfortable than dead.

This rapid change brought on by the Coronavirus has left us all scrambling to adapt. I feel that the best thing for us to do is to slow down and take time to do things right. This means that we as teachers need time to be trained on the new programs that we will be implementing this school year. We want our students to have the best education possible while living under these conditions. I ask the board to allow the teachers time for training on the new programs so that they can be implemented correctly. This would ultimately mean that the school calendar for this year would have to be altered to reflect these additional training days. I urge the Board to allow the school calendar to be changed from the 180 days of instruction to give teachers time to prepare. Thank you for your time.

Sincerely,

Melissa Turner

Special Education Teacher



(no subject)

Greg Rush <kauwildman@gmail.com>

Thu, Jul 30, 2020 at 7:37 AM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Sent from [Mail](#) for Windows 10

It is difficult to follow the logic in the closing and reopening of the schools. There were very few cases in Hawaii when the schools were abruptly shut down but now that we have seen over a hundred cases in a single day the state wants to reopen. We don't appear to be any better prepared to handle the situation. Can you explain why the apparent change in approach?

Why isn't a stronger effort to improve distance learning options the focus? Do we really need to be exposing the community to such risk through our children?



Support for delayed physical opening of schools

chris hale <chrishale108@gmail.com>

Thu, Jul 30, 2020 at 8:12 AM

To: "testimony.BOE@boe.hawaii.gov" <testimony.BOE@boe.hawaii.gov>

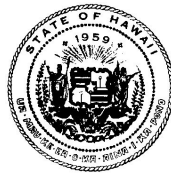
Dear Sirs and Madams,

My name is Christopher Hale. I live in Kona, Hawai'i. I strongly urge you to consider delaying the opening of physical campuses. The lives of my child and wife are at stake. My daughter is a junior in high school and my wife teaches at Holualoa Elementary school. Additionally, we provide care for my elderly mother and father.

I would also ask you to consider providing the option for teachers to provide instruction via distance learning where students and teachers can be interacting from a safe and protected environment. Do not use our keiki and school staff as test subjects for opening the economy. Protect them. Please do what is right for the safety and well-being of the citizenry of Hawai'i.

Mahalo,

Chris Hale
P O Box 390859
Keauhou, HI 96739



STATE OF HAWAII

DEPARTMENT OF EDUCATION

Hilo / Waiakea Complex Educational Officers

July 30, 2020

Late Testimony

Aloha Mr. Bacarse,

Thank you for taking the time to speak with Hilo/Waiakea Principals last evening. We have taken our concerns that we shared with you and summarized them to submit as testimony.

We are very concerned about the possibility of starting the school year virtually with only 3 working days to prepare for such a dramatic change in course. Schools will not be able to pivot that quickly to deploy devices in time to start distance learning on August 4th. Starting distance learning before we are given time to train our teachers and staff will only amplify the level of anxiety for everyone. Schools will not be able to train their teachers if they have to begin virtual learning on August 4th and as stated before, there is a clear need for training. Instruction should begin on August 17 to allow 9 days of training for all staff and give teachers time to set up their rooms to allow for social distancing.

The lack of guidance regarding Special Education remains a huge concern. At this point even if we received guidance tomorrow it would be difficult to train staff and implement the recommendations by August 4th. With any "new" guidance it takes time to implement. We will not have enough time to properly prepare for implementation of student's IEP. Special Education parents are asking questions we don't have answers to.

Currently, there are no contingency plans in cases where there are not enough support staff to maintain our programs, like subs for teachers, custodians and cafeteria. Principals do not have the authority to close school so what do we do if there are not enough teachers to maintain social distancing or custodians for sanitizing/disinfecting. These shortages in staff is a very likely scenario given the circumstances our community finds itself in. Again, guidance and assistance is needed in this area.

Following is a list of concerns that were brought to your attention during our discussion.

1. Bus - Online site shut down (not working properly). No one has been able to apply for bus service.
2. Online Meal Application - shut down today
3. Lack of guidance on School Food Services issues
4. Bandwidth issues
5. Communication not clear, contradictory to previous communication or not given in a timely manner.
6. Lack of PPE supplies and disinfecting/sanitizing supplies. Purchase orders were placed months ago and supplies are just starting to trickle in.

Along with these concerns we would like to continue to advocate for Principals to take a bigger role in preparation, planning and communication. Having leadership and front line staff working together to problem solve would go a long way in addressing many of our concerns. We understand the difficult position everyone finds themselves in their different roles and appreciate the opportunity to submit testimony in our roles as principals.

Mahalo,
Hilo/Waiakea Complex Educational Officers

Hilo Complex Principals:

DeSilva Elementary - Dennis O'Brien
Ha'aheo Elementary - Jennifer Sueoka
Hilo Union - Bryan Arbles
Kapiolani Elementary - Gregg Yonemori
Kaumana Elementary - Ray Mizuba
Keaukaha Elementary - Stacey Bello
Hilo Intermediate - Heather Dansdill
Hilo High - Jasmine Urasaki

Waiakea Complex Principals:

Waiakea Elementary- Ken Watanabe
Waiakeawaena Elementary - Kasie Kaleohano
Waiakea Intermediate - Lisa Souza
Waiakea High - Kelcy Koga

Hilo/Waiakea Complex Educational Officers:

Bert Bibilone - District Educational Specialist
Tierney Barcarse - District Educational Specialist
Robin Valencia - Complex Academic Officer
Darrell Nekoba - School Renewal Specialist
Patricia Champagne - Complex Area Personnel Specialist
Keoni Inciong - District Educational Specialist



Please delay opening schools

Heidi Saufferer <hudsauferer@icloud.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 8:40 AM

As a parent, I ask the department to delay the opening of schools. One of the schools my children attend just sent a single page letter explaining how they plan to reopen schools. In the letter, there were no details on how the masking and social distancing rules will be enforced. Virtual instruction was offered as full time option for the year and will be required for all students part time, but no details were given on what the virtual instruction is. I checked my school's website for details but it looks like the domain expired and the site was taken down. (www.lokelani.k12.hi.us)

This is a Hawaii public school.

You are not ready to open.

You have no right to force our children into schools like this.

You have no right to present parents with opening plans and options like this - with so little information, so little time to respond.

We are paying your salaries, this is outrageous.

Do not open the schools, and this time, spend the delay getting your shit together.

Respectfully,

Heidi Saufferer



Public Schools

Margaret Barnett <maggiebarnett58@icloud.com>

Thu, Jul 30, 2020 at 8:49 AM

To: Testimony.BOE@boe.hawaii.gov

While I am not a resident of Hawaii, I do have grandchildren that attend school on The Big Island.

Hawaii has done a great job protecting its residents by shutting down its borders and non-essential jobs. But as we know, it only takes "one" case to create a chaotic nightmare with this virus. It seems that "One" has arrived also now in Hawaii.

This virus is still in its infancy. Very much to still be learned on its behavior. With a virus ability to mutate, it has the potential to become much worse. The demographics of its victims has already changed and likely will continue to do so.

Mask wearing or not wearing has become a political statement. If you open schools up and parents who refuse to wear masks or allow their children to wear them, a whole different set of problems will arise and it will not only endanger the children and educators but the loved ones they go home to. You will find yourself in a political battle that will waste your time and resources.

Think of single parents who have to arrange child care during shut downs. Single parents often have employment that will not offer them the luxury of suddenly having to stay home at a moments notice when a school has to shut down. Or the essential worker who must choose between working in an ICU or staying home because of school closures. This will also decrease the number of healthcare workers available if the system is flip-flopping between being open and closed for sanitizing.

Parents should be allowed to make the decision whether to send their kids back to school based upon what works best for their family, maybe allowed to continue to collect unemployment benefits or have job protection under FMLA. But regardless of how and which schools reopen, mask wearing should be mandatory without exception.

One additional point I'd like for you to consider. With all the money and resources that our major league sports organizations have at their disposal, they aren't able to keep the members safe. So how can a school system expect to do better.

Thank you for your time.

Maggie Barnett



meeting kids' expectations

Gale McNish <gale.mcnish@gmail.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 8:55 AM

8:27 AM (14 minutes ago)

Children and families have been eagerly awaiting the start of the new school year! This is always the case! But the excitement and anticipation is even greater this school year because of the many months children have been away from their schools.

Now they will have to wait an additional two weeks! Many children (and their families) will be very disappointed.

While schools will be using these two weeks to physically prepare the classrooms and campuses, could each child's new classroom teacher also reach out to his/her new students to welcome and introduce the upcoming school year?

That way children, while disappointed in the delay of their school opening, can at least begin to get reconnected to school life by meeting their new teacher and beginning to feel connected to their new grade level. They need an assignment or two that they can accomplish during these two weeks. They need to believe that school is starting soon!

Aloha,
Gale McNish



Testimony for 7/30/20 meeting

Jeanette W. <jeanettew1@yahoo.com>

Thu, Jul 30, 2020 at 9:14 AM

Reply-To: "Jeanette W." <jeanettew1@yahoo.com>

To: "Testimony.BOE@boe.hawaii.gov" <Testimony.BOE@boe.hawaii.gov>

Greetings Board of Education members,

I am writing to you as the mother of a special education student and one of our most vulnerable keiki. My child needs to get back into the classroom, but not at the expense of his health or anyone at the school. I fully support the training days needed to get our educators prepared to reopen the schools. I appreciate and understand that his services can be made up or provided more consistently when it is safe.

Please prioritize on-campus instruction for our special needs students and provide clear guidance on what IEP teams should consider when determining compensatory services when we return to in-person instruction.

Thank you so much,
Jeanette White



Moving the Start and End of School Year

Judina Carangihan <carangihanjudina@yahoo.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 9:15 AM

To Whom It May Concern:

If the situation is so bad that the children can't start to go to school on August 4th then we should delay. But we should not forget our children who are the most to suffer on this situation, we should also move the end of school year to cover on those lost days of learning.

Thank you,
Judina

Sent from my iPhone



School Must open

Chuck Tindle <hawaiianbeatle@gmail.com>

Thu, Jul 30, 2020 at 9:28 AM

To: Testimony.BOE@boe.hawaii.gov

I believe that we must open the Public Schools August 4th. Some schools do indeed have plans voted on and accepted by the teachers and staff. We must remember that the first two weeks of school the kids will only be in school half days. The Principals and teachers can course correct in the second half of those days.

I realize that returning to school is a very personal choice for Teachers and Families. Distance learning is already an option, and if a Teacher is not comfortable teaching, they may have to sit out this school year. With an estimated 30% of parents electing distance learning, that will give some relief for schools for teachers that elect to take the year off.

Last year's 4th quarter was a complete disaster. We can't do that to the kids again this year.

We need to have purposeful learning on how to live with this virus.

Chuck Tindle

Late Testimony

- Name: Averie Kenery / Title: Vice President, Rotary Club of Honolulu Pau Hana
- Meeting: BOE SPECIAL MEETING
- Agenda item: Option for 100% Online/Distant Learning for the 2020-2021 School Year
- Position: I support 100% online/distance learning for the 2020-2021 school year. With the current pandemic, a concern of mine and a major point of worry is our living situation at home. My 87-year-old Grandmother (Natalie's Great-grandmother) lives at home with us. Not only is she at high risk for the virus due to her age, but she also has type 2 diabetes and high blood pressure. With the growing infection rate of COVID-19 within our community, I fear for her health and the health of my children if they physically return to school in the near future. Although statistically, my children are more than likely to recover (with or without lasting side-effects) from the virus, I am terrified that my Grandmother may not recover if infected by my children or myself. With that said, I fervently urge to you consider and allow 100% distance learning this school year for the families who opt for it due to the many concerns regarding COVID-19.



Opinion on school opening

Kelly Laprade <kellylaprade@yahoo.com>

Thu, Jul 30, 2020 at 9:33 AM

To: testimony.boe@boe.hawaii.gov

Aloha. My 2 daughters attend Kam 3 Elementary and Lahaina Intermediate. They are really excited to go back to school. It is important for children to have routine and some sense of normalcy. Notably, the first 2 weeks are already very limited. No matter when you open, the practices and policies will have to evolve with what is permissible and actually practical. Therefore, the teachers need to learn on the job in this instance. I don't envy them and appreciate their effort and support for our children but we all knew this was coming. We have to ask ourselves, is pushing it back is just stalling at this point?

Thank you for listening.

Sincerely,

Kelly LaPrade

Sent from my iPhone

Late Testimony

Aloha Board of Education,

I am Christine Olivera, Speech Language Pathologist for Konawaena Elementary School and Kealahou Intermediate School on the West side of Big Island.

My oral testimony today contains a list of questions concerning reopening our schools during an unprecedented global pandemic. These questions are relevant irrespective of opening date although we definitely need until Aug 17 to train and prepare for various instruction models.

How will we educate our kids and what will success look like this quarter, this semester, and this year given all the added challenges we face?

My ability to work virtually online at home was rescinded on July 28. This forces me to go to a school building to participate in virtual meetings or conduct online therapy sessions, defeating the purpose of eliminating crowding at schools. So far, many of my students are not planning to return in-person. Will I have the option to work virtually from home this year?

When entering school property, my temperature is checked with no other health screening in place. Is this acceptable screening procedure when we know asymptomatic infections exist?

What about COVID-19 testing?

Is it safe to return to school and classrooms without testing?

How will we know about the community risk each school or district faces week after week without testing?

What type and how much PPE do we have on hand and how much do we need?

How many masks are needed for each teacher per month?

If 11,600 teachers in our state need one mask per school day or 20 masks per month, then the stated supply of 250,000 masks from HI-EMA will last approx 21 days supplemented by an unspecified amount of donations. Is this correct?

Are any masks or face shields allotted for children or will parents be solely responsible for PPE for their own children?

When does Governor Ige plan to release HI-EMA funds for face masks and other PPE?

Why is the HDOE relying solely on HI-EMA to purchase masks for schools? Are other sources available?

How will HI-EMA determine who gets shipments of masks and PPE in an emergency or when supplies run low? How will a mask shortage directly affect our school operations?

Will teachers be held responsible for enhanced classroom safety mitigation efforts such as ventilation, appropriate class size, regular cleaning, necessary supplies, etc.?

How will kids access and learn a full school year of appropriate curriculum with the hybrid model?

Will parents and students get training at home to be able to learn successfully using online instruction?

Besides counting F grades at the end of each quarter, how will we support kids who are truly vulnerable? Do we have outreach protocols for kids at risk of dropping out of the school system?

Our island population is very diverse and rural which are factors that put us at higher risk of more severe outcomes from COVID-19 infections. Will the HDOE or DOH inform parents and teachers of known increased risk factors for getting infected from COVID-19?

Social bubbles are being proposed as a way to mitigate possible spread of COVID-19 infection in the school setting. How are these mythical bubbles supposed to work? Has anyone plotted home-to-school-to-home all day schedules for a few students to determine the veracity of this approach?

What happens to me if I don't feel safe at school?

I believe if the basic rules of wearing masks, social distancing at least 6ft., hand washing, and cleaning were followed all the time by everyone, we could manage this pandemic and learn how to survive together safely.

Thank you for reading or listening to my testimony.



TESTIMONY

Lore Lei <lkuheana@gmail.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 9:47 AM

To the Board of Education,

I implore you to postpone the reopening of schools on August 4th.

I implore you to mandate VIRTUAL ONLINE learning for the first semester.

I do not feel safe as a teacher in my classroom. I do not feel that I can protect my students of myself from exposure to COVID.

At my school there are no plans for morning and afternoon drop-offs and pick ups, there is no plan for student traffic in the hallways, my class size is larger than 10 students, and I cannot safely distance each table 6 feet apart.

I have given 24 years of service to the Department of Education in the state of Hawaii. I am not confident that the leadership of this state and in education have planned for a safe return. I also care for 2 elderly kupuna and a new born in my household. Please have compassion and make the right decision.

With the steep rise in cases it would be without question to start the school year virtually to protect ALL bodies on campus. We do not have to wait till someone dies of COVID while attending school when we have an opportunity to do what is right for everyone NOW.

Aloha,
Lorelei Kuheana



Testimony

Johann Hepner <jrhepner@gmail.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 10:01 AM

My wife captured the words so well, please see below.

Dear BOE, HIDEOE, HSTA,

These are my thoughts as a parent and healthcare provider:

The novel coronavirus was recognized in Dec 2019 in Wuhan, China and declared a pandemic in March 2020. It is now the end of July and there have been several months to prepare for this school year. The CDC, WHO and American Academy of Pediatrics have all published guidelines regarding re-opening of schools. While I understand the goal of delaying school opening is to allow more time for training, at this point, just days before students are to start, it is disappointing and frustrating that schools are not prepared to open as scheduled.

Schools are critical to a community's infrastructure. Not only do they provide academic advancement for students, but they are also crucial to social and mental well-being of students. They provide services and therapies, such as speech and occupational therapy that students may not be able to receive elsewhere (CDC). Sadly, the pandemic has led to economic decline, resulting in food insecurity for many families. There have also been increased rates of domestic violence and abuse. Schools play a role here too, providing nutrition, and identifying cases of abuse and neglect.

We all want to keep our children and teachers safe, and though covid-19 is at the forefront of our concerns, we must not lose sight of other potential consequences of school closures. "Currently, the evidence to support national closure of schools to combat COVID-19 is very weak and data from influenza outbreaks suggest that school closures could have relatively small effects on a virus with COVID-19's high transmissibility and apparent low clinical effect on school children. At the same time, these data also show that school closures can have profound economic and social consequences" (Viner, et. al).

If a 2-week delay in opening would give schools the extra time they need for training and implementation of safety measures that could potentially prevent spread of illness and future closures, then I am not opposed, but it is disheartening that these preparations were not completed on schedule.

Though our numbers have gone up in the past several days, Hawaii is still among the states with the lowest number of covid-19 cases, and we have the lowest mortality

rate in the US per 1 Million population. Wear a mask, wash your hands and stay well.

Teachers, thank you for your important and difficult work.

Carol Hepner

<https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>

<http://www.healthdata.org/covid>

Russell M Viner, Simon J Russell, Helen Croker, Jessica Packer, Joseph Ward, Claire Stansfield, Oliver Mytton, Chris Bonell, Robert Booy School closure and management practices during coronavirus outbreaks including COVID-19: a rapid systematic review
The Lancet Child & Adolescent Health,
Volume 4, Issue 5, 2020, Pages 397-404,

<http://www.sciencedirect.com/science/article/pii/S235246422030095X>

<file:///C:/Users/L014243/AppData/Local/Microsoft/Windows/INetCache/IE/HMZ4MM3U/who-2019-ncov-adjusting-ph-measures-schools-2020-1-eng.pdf>

<https://www.worldometers.info/coronavirus/country/us/>

Johann Hepner



from a working parent

Corinne Carson <corinne.carson@gmail.com>

Thu, Jul 30, 2020 at 10:26 AM

To: Testimony.BOE@boe.hawaii.gov

Dear Board of Education:

As a parent, I ask that if you decide to delay the school opening, please just use the first two weeks which were set to be "half days" and make them teacher training days. Those first two weeks had students only scheduled to be in class for 3 hours with no A+ after school care provided. It is absolutely impossible for a parent who works a day job to accommodate a 3-hour school day. Nothing significant can be taught in that time anyhow. This plan of holding 3-hours of class for the first 2 weeks would've required single parents to take off a full 2 weeks of work, since there is no after school childcare available. At least if there is no school at all that day, parents can drop their kids at one of the many daycare centers that have had no problems safely operating during this pandemic. Kama Aina Kids said they would continue to operate if there is an actual delay to the school year, but obviously they cannot pick up kids from a 3-hour school day.

If the teachers are demanding more training, let them have the **full two weeks** to complete their training and bring students back for the FULL DAY as originally planned to begin August 17th.

Also, please ask DOE to do a better job of coordinating with A+. My child's A+ provider still does not know how many kids they will be able to accommodate in the program because they are waiting on answers from DOE. A+ programs aren't announcing whether they will provide care for A group students on group B days, and vice versa. I have heard similar complaints from other parents at other schools. Parents need to know whether they will have childcare so alternative arrangements can be made if necessary. Childcare providers need answers from DOE. We cannot wait until the first day of school (whenever that will be) to know whether we have childcare.

Finally, I would ask that if you decide to delay reopening on the basis of high case counts on Oahu, please delay reopening only on Oahu as there is no good reason to make students on the neighbor islands suffer when they have so few cases. There are many places on the neighbor islands where high-speed internet access is totally unavailable. Don't punish neighbor island kids for the irresponsibility of the people of Oahu.

Sincerely,

Corinne Carson

1137 Wilder Ave. Apt. 303

Honolulu, HI 96822

(808) 797-6558

Late Testimony

Dear BOE, HIDOE, teachers:

These are my thoughts as a parent and Nurse Practitioner who has been working in this community throughout the pandemic:

The novel coronavirus was recognized in Dec 2019 in Wuhan, China and declared a pandemic in March 2020. It is now the end of July and DOE, schools and teachers had ample time to plan and prepare for this school year. The CDC and American Academy of Pediatrics have both published guidelines regarding re-opening of schools. While I understand the intention to delay school opening is to keep children safe, and allow schools/teachers more time for training and preparations, at this point in time, just days before the start of school, it is disappointing and frustrating that schools are not ready.

Schools are critical to a community's infrastructure. Not only do they provide academic advancement for students, but they are also crucial to social and mental well-being of students. They provide services and therapies, such as speech and occupational therapy that students may not be able to receive elsewhere (CDC).

I am concerned that

“Currently, the evidence to support national closure of schools to combat COVID-19 is very weak and data from influenza outbreaks suggest that school closures could have relatively small effects on a virus with COVID-19's high transmissibility and apparent low clinical effect on school children. At the same time, these data also show that school closures can have profound economic and social consequences” (Viner, et. al).

8·8% (95% CI 28·5–29·1) of health-care workers had an obligation to care for a child aged 3–12 years

Estimated that 2·3 million children of health-care workers nationally would be in need of child care, even after accounting for care provided by non-working adults or older siblings

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>

Russell M Viner, Simon J Russell, Helen Croker, Jessica Packer, Joseph Ward, Claire Stansfield, Oliver Mytton, Chris Bonell, Robert Booy,

School closure and management practices during coronavirus outbreaks including COVID-19: a rapid systematic review

The Lancet Child & Adolescent Health,

Volume 4, Issue 5, 2020, Pages 397-404,

<http://www.sciencedirect.com/science/article/pii/S235246422030095X>



Open the schools

Marti Taba <tarwarshawaii@hotmail.com>

Thu, Jul 30, 2020 at 10:40 AM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

I am writing as a family physician who thinks we need to start school on time. Summer school went very well, we know people will come down with the virus but most likely due to exposure from home or outside friends/parties, there were no reported clusters from school. With the tactics of masks and social distancing and frequent hand washing, schools should be safe and provide so many benefits for the kids in mental stimulation, social connection, meals, and a safe place to be during the day.

I am not in favor of pushing back the school year, I would not want to pay the teachers more to work longer than their current work year nor think it is fair for the kids to be provided less than a full year of education.

Please do not bend to the anxious people that are worried about their exposure, it will never be a completely safe time, it will be safer we get vaccines or more effective treatment — that could be 6-12 months. And frankly, so many other professions with people currently working are at risk at this time, often more risky, and it has been shown proper PPE works to prevent spread.

If families do not want their children to go to school, DOE has graciously provided home schooling options. Teachers can choose to go to work or not, but if not, they should not get paid the same because the quality of education my children are receiving in Virtual school is absolutely not the same.

I am already concerned the hybrid schedule is not going to be enough for my middle school student who is not responsible enough to log in at the right time and we, like so many working parents, have no child care to be home with him and remind him.

Thank you for listening, please don't use my name due to my profession and my husband is a teacher and we don't agree.

Marti Taba
Children at Stevenson Middle and Roosevelt High School

Sent from my iPhone



testimony for the BOE

Katie Drager <katiedrager@gmail.com>

Thu, Jul 30, 2020 at 10:39 AM

To: Testimony.BOE@boe.hawaii.gov

Aloha,

I fear the government has failed us. Like Aotearoa/New Zealand, we are lucky to be on an island, geographically isolated from other places. Unlike Aotearoa, the government failed to give proper guidance and make the difficult decisions, choosing the economy over the lives of the people of Hawai'i. As a result, we now have increasing numbers of Covid cases instead of zero.

Schools should not open for in-person instruction on O'ahu. I say this reluctantly, as a working parent who is struggling and as someone who wants their children to develop the social and behavioral skills that I believe can really only be attained in school.

But, in light of the government's failure to contain the virus, schools should not open for in-person instruction in August. Only once numbers of cases are down to zero should schools reopen. If the government is willing to make the difficult choice to shut down and if the people of Hawai'i are willing to make the sacrifice, it is possible for us to reduce the number of cases so that the children can have a chance to learn, play, and interact with their friends as they should be able to.

If children go back to school in person in August and businesses remain open, we endanger the health of the entire population and we especially risk losing kūpuna.

Keeping our keiki out of school is a sacrifice. But if we don't make that sacrifice, we sacrifice the health and lives of ourselves, our kumu, and people we know and love.

with aloha,
Katie Drager, PhD (she/her)
www.katiedrager.com

Late Testimony

Dear Board of Education Members,

“Education is the passport to the future, for tomorrow belongs to those who prepare for it today.”
Malcolm X

Ongoing preparations and preventions have been made for 4 months now to ensure our communities safety. Our numbers of covid cases has remained very low (the 4th lowest out of all the US territories) and the mortality rate is so low. The virus is real as is all viruses, or other sickness that humanity has dealt with in the past and will continue to do so. We have learned how to protect ourselves better and even more so who is most vulnerable- the elderly population, not children. Most daycare in our state remained open during this time. They demonstrated that continuing to care and teach for children can be done in this covid challenging times. Their being open has been such a non-issue that it just never comes up while the debates regarding reopening the rest of the country have gone on.

Furthermore, one would assume that if having children gathered together day after day were a significant driver of coronavirus - then we should be continuing to see outbreaks raging everywhere in the country, even in states where daily cases are being driven near to zero.

This has not occurred, so one can conclude that the daycares, generally, were able to take all the necessary steps to minimize the spread of coronavirus. Recent studies that are finding that children are poor spreaders of the virus could be another positive contributor. If daycares can do it right with their trained staff - then surely our highly educated teachers can do it too.

Please do not misconstrue my statements here as a suggestion that we should stop protecting the vulnerable. With regards to returning Vulnerable children to school- Dr Fauci and the American Association of Pediatrics all agree that returning All children to school is in their best interest. With regards to the elderly, precautions can be taken and perhaps legislation being debated by congress can help here.

American Academy of Pediatrics came out in favor of students returning to school. In their June 26th guidance it says “Evidence from spring 2020 school closures points to a negative impacts on learning (learning loss). Children and adolescents have been placed at a higher risk of morbidity and mortality from...abuse, substance abuse, anxiety, depression and suicidal ideation (due to increased social isolation). The AAP strongly advocates that the coming year should start with the goal of having students physically present in school...” They go on to say that schools are “fundamental to child and adolescent development and well-being.” The AAP cites “mounting evidence” that transmission of the coronavirus by children is uncommon, partly because they are less likely to contract it in the first place.

I have lived in the Ewa Beach community for 19 years in this time I am raising my own children plus caring for my neighbors after school and on the weekends as needed. I know the keiki and what they will and have been doing when not in school, or attending after school programs or involved in sports or volunteering. They will continue to gather as friends, parents will drop off at others as they must go to work. They will go to the beach or the mall. Most will enjoy the more time off from school but others will get into mischief/ trouble. More fights/scraps in the grassy areas of our community, ecig use, teen pregnancy, shoplifting.....

Let me further state I have been concerned for Hawaii's education for many years now. Statics show the students overall do not test as well as they should. I believe the 7 hours a week!!!!!! Of less classroom time compared to the mainland or private schools have a significant long lasting impact. The students will struggle as they enter out of state colleges and have to compete and keep up with their peers.

We can not keep delaying the education of our children. Asking that all the children take a sabbatical from their education isn't fair or reasonable.

"Live as if you were to die tomorrow. Learn as if you were to live forever." Mahatma Gandhi

I thank you for listening to my thoughts as well as many other parents in our community.

Liz Punzalan

808-398-3260



Testimony Offering comments on revisions to the DOE 2020-2021 school calendar

Caroline Cadirao <boulangerie1965@gmail.com>

Thu, Jul 30, 2020 at 11:08 AM

To: Testimony.BOE@boe.hawaii.gov

Thursday, July 30, 2020

Special Meeting

Dear Members of the Board of Education.

My name is Caroline Cadirao, parent of a sophomore at Mililani High School. I am providing written comments to the following action item:

Board Action on revisions to the Department of Education's 2020-2021 school calendar. If the BOE decides to revise the DOE calendar in the name of health, I strongly support that IF a plan is in place to ensure the 180 day school year. It is understandable that time needs to be taken now to ensure teachers are comfortable and protocols are in place. I would strongly encourage the BOE in revising the calendar to move collaboration days throughout the school year to the beginning of this school year. In addition, reduce a day or two during breaks to make up for the time that may be taken now. Lastly, if needed, extend the May 2021 timeframe to ensure that the students receive the 180 day school year.

Children have already lost calendar days last school year. These formative years help teenagers to develop for college and be productive members of society. Please ensure that the 180 days are maintained.

Mahalo for this opportunity to share my comments.



Reopening Schools

terukinak003@hawaii.rr.com <terukinak003@hawaii.rr.com>

Thu, Jul 30, 2020 at 11:45 AM

To: testimony.boe@boe.hawaii.gov

Dear BOE Members,

Holding a VIRTUAL meeting should influence your decision to reopening schools. You keep yourselves safe, yet open schools for students, teachers, and staff. This seems contradictory!

As far as we are concerned, there is no "safe time " (as Ms. Payne stated) or a created "bubble" in schools (as Superintendent Dr. Kishimoto and DOH continue to refer to) during a pandemic.

If students' safety is Superintendent Dr. Kishimoto's priority, why aren't masks being mandated in classrooms for older students? It shouldn't be left to teacher's discretion. Sorry, we don't see the logic!

As we see a rise in cases, a more sensible and safe approach would be to open schools for younger students who need to attend due to lack of supervision or other circumstances . Plus, MEANINGFUL distance learning for other students. Older students should be doing 100 percent MEANINGFUL distance learning with guidance (with the exception of special needs students who may require face to face classes).

Superintendent Dr. Kishimoto continues to refer to the survey given to parents in May/June to back up the decision to reopen schools for face to face classes. However, the survey is relative to the time period. We ask you this: Would parents feel comfortable with their child/children in classrooms if the case numbers rise exponentially? Will the Superintendent continue to tell the public this is what most parents want when numbers in cases rise? The survey is out dated .

We understand these are uncertain times. However, one child's life is one too many. One teacher's/staff life is one too many. We are all at risk with this careless way of thinking . Parents, siblings, grandparents will not be safe by opening for 180,000 students. Please stop making the plan sound wonderful like we should be celebrating to be one of the first state in the nation to reopen schools . Our children should not be used as guinea pigs for the test. We are hoping the two week push back will provide for teachers guidance from the DOE on a more cautious way to start the school year!

Sincerely,

Concerned Parents

Sent from my iPhone



Testimony THURSDAY, JULY 30, 2020 VIRTUAL BOARD OF EDUCATION MEETING

Darren Sana <d.sana@seariders.k12.hi.us>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 11:58 AM

To whom it may concern,

I am writing to you in hopes that the students return will be pushed back. Even though I'm a new teacher in Hawaii public schools, within my first few days at the school I've come to the understanding that we are not ready to have students at the school. There are still things to prepare for on the teachers end and other things to address on the administrative side. With conversations I had with teachers from other schools, they have the same concern. I believe that with the extra time we can decide on important procedures to combat the pandemic, and establish a new normal for this year. I am concerned about the health and safety for all of our staff and student body. We are not ready to have extra bodies on campus at this time.

Mahalo,
Darren Sana



STATE CAPITOL
HONOLULU, HAWAII 96813

Late Testimony

July, 30, 2020

TO: Chairperson Catherine Payne
Board of Education, State of Hawaii

FROM: Senator Bennette Misalucha
Senate District 16

Representative Sam Kong
House District 33

Representative Gregg Takayama
House District 34

RE: **TESTIMONY IN SUPPORT OF THE BOARD OF EDUCATION SPECIAL MEETING –
AGENDA ITEM III. A.**

Hearing: Thursday, July 30, 2020, 1:00 p.m.

Aloha!

First of all, on behalf of the areas that we serve (Pearl City, Aiea and Pearl Harbor), we would like to thank you, the Board of Education, for your dedicated volunteer service to our State. We realize it must not be easy to make difficult decisions, particularly those that have a profound impact on our school communities.

We feel obligated, however, to share with you the prevailing sentiments from some of the principals in our district.

Here are some of the highlights of our meeting, the issues of which, we hope can be addressed by the Hawaii Department of Education Superintendent in the foreseeable future, even as the Board deliberates on the most pressing issue of today, which is the re-opening of our public schools:

1. We are fortunate to have such a group of passionate, dedicated principals in our District who will do everything in their power to do what is right for the students. However, even the most committed ones expressed frustration at how guidance from the HDOE has been slow and inadequate. They opined that had there been some appropriate time allotted for planning (perhaps starting in May), they would have been ready and more in control of the situation. Despite the feelings of frustration, our principals are staunch leaders, and will push forward to ensure that the needs of our students are met no matter the Board's decision on pushing back the school opening date.

2. One significant issue raised was the need for a Distance Learning program that each school is now constrained to purchase, with monies from their own coffers. We were told that two weeks ago, when the possibility was raised that schools may need to operate fully online, principals had the foresight to start doing due diligence on the matter. As it is, each principal had to do their own research, and this obviously necessitated additional time, effort and energies. Although it was recognized that each school has its own unique needs, it would have been more efficient if the HDOE had vetted the programs beforehand and helped schools to negotiate the best rate.
3. The Title 1 schools in the district are particularly concerned about the lack of strategy on the issue of broadband connectivity for our economically disadvantaged families. There appears to be no comprehensive plan. As a result, the schools are individually exploring their options, including utilizing their own resources to secure wifi devices for students.
4. In response to the news stories about how the HDOE had purchased laptops and other devices, the principals, although grateful for the thought that some of these resources are forthcoming, expressed sincere hope that in the future, a needs assessment should first be undertaken.
5. The subject of personal protective equipment (PPE) is obviously a serious one as health and wellness is a primary concern. Mindful of protocols, the principals are protective of both their teachers and the students. However, there are disparities on how the PPE purchases at each school are being handled, and some of our principals expressed dismay about the exorbitant prices of the supplies. The prevailing sentiment was that PPE purchases should best be handled on a district or complex level. The centralized purchasing may result in cost savings as well as equitable distribution of PPE resources amongst the schools.
6. Not surprisingly, the principals were worried about their school budgets. Thus far, they have noticed drops in school enrollment which could potentially translate into further cuts into their financial resources. They noted this will not be sustainable, given the additional expenses posed by COVID-19, notably the PPEs and the Distance learning program purchases, both of which were unbudgeted. Their hope is that despite the enrollment challenges, their budgets would remain at status quo for this year.
7. There is a clamor for substitute teachers to remain on the central payroll of the HDOE. In the past, the cost of substitutes for all essential employees (teachers, educational assistants, custodians, office assistants) were paid by central salary. That burden has been shifted to the schools this year. Schools will be allocated amounts based on a formula that has not yet been released. However, once funds are depleted, principals will need to pay out of their individual school budgets. With the current challenges, it was deemed that this change be put on hold until next year.
8. The principals reported that their teachers are worried about their safety and health but will still go the distance in supporting their students. However, there are reports of morale issues, particularly because the promised COVID-related training is still a work in progress, despite the fact that school opening is less than a week away.

In conclusion, the principals are bearing the brunt of the planning challenges at the State DOE level. These challenges are understandable because few could have predicted the extent of this pandemic.

This is the time to listen to the voices of our school administrators. Their insights can provide the clarity the Board will need to make the courageous but appropriate decisions. Therefore, based on the above, we respectfully request that the Board take action to approve the Department proposed revision to the DOE's 2020-2021 School Calendar to provide additional training and professional development days for teachers and staff at the beginning of the school year and delaying students' first day to ensure health and safety preparedness for schools.

We thank you for the opportunity to provide testimony.



Distance learning and delayed start

Katie Horgan <katiehorgan@me.com>
To: testimony.boe@boe.hawaii.gov

Thu, Jul 30, 2020 at 12:32 PM

Good afternoon Board Members,

I am submitting testimony as a parent of a student with an IEP a and as a former teacher. After considering all of the concerns stated by the HSTA and other supporting unions I hope that you will delay the start of school so that teachers will have adequate training to perform distance learning for the first quarter.

There is overwhelming evidence that "Ohana bubbles" cannot be affective in isolating groups of students under the current state of the virus in Hawaii. The number of cases grows daily and we do not have a good control on the virus in the general public and cannot expect that we will not have school clusters as well.

Students will have the most continuity of learning with 100 % distance education as teachers can continues to teach in a consistent manner throughout the entire quarter and improve their distance learning experiences with ongoing training opportunities.

Mahalo,
Kathleen Horgan

Sent from my iPhone



BOE Testimony- Surge in cases

Bo Frank <radfordrams@hotmail.com>

Thu, Jul 30, 2020 at 12:34 PM

To: "testimony.BOE@boe.hawaii.gov" <testimony.BOE@boe.hawaii.gov>

Aloha,

First I'd like to say thank you for taking everyone's testimony into consideration and altering plans with the safety of students and teachers in mind. I was stern in my past emails because there seemed to be a double standard for your safety and student and teacher safety.

With the surge in cases it seems like common sense to have school fully online for the time being. Why risk the lives of students and teachers, just to shut down after someone gets sick or even dies! What a shame to treat people like their life doesn't matter. Prevent further spread that we all know will happen if we open schools. We already know students and teachers will test positive if we open schools face to face, it's going to happen, kids tested positive during summer school.

Give teachers time to train on providing quality distance education and open schools fully online on August 17! If health and safety of our students and teachers are really our first priority that is the only option! If you are willing to risk student and teacher lives, clearly state your intention and be accountable, let the public know that you are aware of the consequences(sick children and teachers and possibly even deaths) then open schools, but that is obvious educational negligence knowing students and teachers will get sick and may die. Josh Green said it himself today on the news it's gonna happen and we will have to shut schools down. Do the right thing and open fully online after providing time for teachers to get trained on effective online education protocol. Truly honor student and teachers health and safety!

Mahalo,

Bo Frank

Sent from my iPhone



delay in school year is disappointing

Daniel Rubinoff <rubinoff@hawaii.edu>

Thu, Jul 30, 2020 at 12:45 PM

To: testimony.boe@boe.hawaii.gov

Dear BOE,

If teachers are allowed to delay the school year and cut into instructional time, then please have teachers teach during Fall Break. Fall Break should become an instructional week then and without additional pay. considering how little was done for our children from March-May of the last academic year, it's disappointing that they are not better prepared to begin the semester.

Sincerely

Dan Rubinoff



Hawaii Public Schools

Lisa Hotchkiss <lhkiss@gmail.com>
To: Testimony.BOE@boe.hawaii.gov

Thu, Jul 30, 2020 at 1:38 PM

I have permanently removed my son from public education as I will NOT subject my child to face masks, social distancing and even more computer based learning than before this plandemic. None of this is necessary for a virus with less than a 1% mortality rate let alone a virus which barely affects children. The psychological and emotional traumas sustained from this kind of Nazi type propaganda will destroy this generation!! Goodbye public school.

Sincerely,
Lisa Hotchkiss
Sent from my iPhone



Opening school

Pam Zirker <pammy_z@hotmail.com>

Thu, Jul 30, 2020 at 1:55 PM

To: "testimony.boe@boe.hawaii.gov" <testimony.boe@boe.hawaii.gov>

Dear BOE members ,

Please do not open schools for in person classes on August 4! With coronavirus numbers in Hawaii being three digits for the past two days, and rising all week long, this situation warrants the suspension of in person classes, for as long as it takes to be assured it is completely safe. The time period should last at least another two weeks. On August 17 , we should reevaluate our Covid 19 situation by assessing the numbers against the risks .At that time we should collaborate with all participants, teachers, students,school staff members, and parents. This discussion should lead to a vote. We need to keep our families safe . Please only open school for in person classes at the appropriate public safety time.Thank you for listening to me , a parent, a grandparent ,a teacher , and so far, a Covid 19 free human.

Sent from my iPhone



school opening

SUMANZON@twc.com <SUMANZON@twc.com>

Thu, Jul 30, 2020 at 3:16 PM

To: "Testimony.BOE@boe.hawaii.gov" <Testimony.BOE@boe.hawaii.gov>

Aloha Board,

As a teacher , with the Department of Education since 1985, and a parent, and a grandparent in Hawaii for many years, I believe the schools need to open.

I do not believe you have an adequate representation of the communities.

Many of the local families in my area, are struggling to keep jobs. They have no childcare for their keiki.

They are leaving children with out supervision because they cannot pay for necessities unless they work.

Postponing school for 2 more weeks is not helping many local families.

I understand some parents are concerned. They can keep their children in homeschool until the point they feel comfortable.

However the majority of families that I know , in my area, are needing the help, that school provides. There are more severe problems occurring because of closures. Problems such as delinquency. Problems such as falling behind academically. These, and more, are just as critical as the virus. Children are needing better supervision.

As for teachers safety, that is important. However , please see the BIG picture. Children are priority and their education is priority.

If teachers are concerned, they may find other jobs. I, for one, feel it is more important to keep children in school. When I am in classrooms, I will use all precautions. However, there is always a slight risk in any profession.

Please OPEN the schools.

Mahalo

Suzanne Manzon

HSTA reaches school reopening agreement with state of Hawaii

Crucial details and contract modifications you must read now

The Hawaii State Teachers Association (HSTA), the State of Hawaii, and Board of Education have agreed on a memorandum of understanding (MOU) to allow continuity of education next school year with certain contract modifications while assuring the safety of educators and students. The MOU also guarantees teachers' and HSTA representatives' involvement in collaboration with the employer to improve operations during the COVID-19 pandemic. This MOU will be treated as a supplemental to the master agreement and applies to all Bargaining Unit 05 employees, including public charter school teachers.

It is very important that every educator reads the entire agreement, or at least familiarizes themselves with key points of the summary below.

The HSTA Negotiations Team worked around the clock over the last week preparing for bargaining and meeting with the employer, working out the last pieces of the agreement Saturday afternoon. Saturday evening, the Negotiations Committee unanimously voted to recommend the MOU for approval by the Board of Directors (BOD). After thorough debate by the BOD, the vote was overwhelming to approve the tentative agreement in order to ensure a number of protections as we start the 2020–21 school year.

Throughout the negotiations, HSTA focused on securing the best possible language for our members. We used the results of HSTA's recent surveys from members, guidance from the U.S. Centers for Disease Control and Prevention, the Board of Education's June 18 resolution regarding reopening of schools, as well as other resources such as National Education Association (NEA) guidance and other State of Hawaii and Department of Health guidance.

Our main priorities included looking to health expertise for the safest practices, providing educator voice in making decisions, assuring protections, and advocating for equity of treatment and resources for our members.

The Employer agreed to nearly every HSTA proposal on school and worksite health and safety. This includes a commitment to prioritize the health and safety of students and staff, and an expectation that "schools and worksites shall work to minimize the risk of COVID-19 spread ... reducing opportunity for the spread of respiratory droplets ... by maintaining six (6) feet ... of separation between and among students and staff members ... whenever possible." The agreement also includes language that says all "individuals, including employees, students, and campus visitors should wear face coverings" especially "in circumstances where sufficient physical distancing is difficult or impossible, within 6 feet of others." It should be noted that there are exceptions to the face-covering for situations such as when it is not safe or poses a medical risk. The agreement also assures proper cleaning and disinfecting, cleaning and hygiene supplies, personal protective equipment (PPE), and guaranteed reimbursement if supplies are not available and teachers have to purchase.

With that that said, the state did not agree with every one of our demands. They were unwilling to agree to any blanket guarantee of telework or to provide child care for public school teachers whose children are impacted by hybrid schedules. They were also unwilling to agree to negotiate anything mandating specific classroom configurations, health and safety processes and procedures, or a 100-percent mask rule with no exceptions.

Soon you will hear about the opportunity to participate in a virtual briefing. HSTA UniServ Directors will schedule a series of general member briefings in the next week. Members should be on the lookout for more information to be communicated from your HSTA school-level leaders. We also will schedule a private webinar to brief our HSTA school, chapter, and state leaders on Monday, June 29, at 1 p.m. SLLs will receive a separate email shortly with a link and instructions to register for that event. In addition, we will provide members with a list of frequently asked questions (FAQs) as soon as possible

Things we are not talking about

Ventilation: Again hot classrooms still haven't been considered.

School buses: Students waiting for buses in clusters/how will busing work to get them to school on time when the buses have less students on them

From last week's discussion:

- Superintendents request to have a private meeting with a few board members to discuss an agenda item from last week.
- This is against the sunshine law and is not fair to the public. The public are your constituents.

Agenda Items:

I don't know the process between the DOE and Unions. She seems to mistakenly anticipate what the Board is going to ask of her and goes into discussions with assumptions and without transparency.

A. **OPPOSE:** approving new schedule: AGAIN no contingency plan. The back and forth between DOE and unions causes confusion.

B. **OPPOSE:** Waiver request. I do not recall the BOE asking to decrease the number of student days.

- There are other ways to receive the full 180 days. This is another one of the superintendent's agendas without any public input.
- The DOE's irresponsibility and delay of a full plan for reopening has caused this dilemma and should not be taken out of the student's school year.

C. **OPPOSE:** BOARD'S RECOMMENDATION

(1) OPPOSE: ADDITIONAL TRAINING AND PROFESSIONAL DAYS SHOULD NOT TAKE AWAY FROM 180 DAYS EDUCATION

Based on the DOE's previous recommendations, additional training and professional days WERE NOT included in the revisions. **The staff training should not take away student hours.**

(2) OPPOSE: START SCHOOL WITH DISTANCE LEARNING

Until the DOE and schools come to an agreement as to **HOW distance learning is going to be provided**, I oppose.

Some schools have put the whole distance learning on a "Full Distance Educator" AKA a parent or guardian. As it currently is laid out, it is very confusion.

I can provide homeschool curriculum for \$20 per month. It will be an accredited curriculum, but student based not parent/education based.

(3) OPPOSE: MASKS

I would suggest a trial basis.

Mandating anything in Hawaii is very difficult. We can't even keep track of the tourists on 14-day quarantine. This will create a clash between teachers and families.

(4) OPPOSE: GUIDANCE FROM DEPARTMENT OF HEALTH

The department of health has been anything but transparent. It is unbelievable that they WILL NOT allow anyone to know where the cases are.

A school has an individual responsibility to make a decision based on data. They can't because the data is not available to the public. Even Mayor Caldwell has addressed this issue to no avail.

<p><u>Department of Education Recommendation</u></p> <p>The Department recommends that the Board take action to approve the Department proposed revision to the Board-approved 2020-2021 Official School Calendar (Attachment A).</p>	<p><u>OPPOSE</u></p> <p>This avoids for the 2nd time a contingency plan. Two school calendar need to be developed. One for August 17 and the other for start September 1.</p> <p>This back and forth with DOE and HSTA + other unions are wasting time.</p>
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<p><u>Department of Education Recommendation</u></p> <p>The Board grants a general waiver for the Department to waive the school days and student hours requirements of HRS §302A-251 for the 2020-2021 school year to allow the Department the ability to implement the proposed revisions to the 2020-2021 Official School Calendar which are necessary to address the impact of the COVID-19 pandemic. The proposed revisions currently result in a school year of 171 student instructional days, a reduction of nine (9) student instructional days and 54 student hours. The nine (9) days will be used for training and professional development for school staff in preparation for the reopening of schools. The unions have agreed to further negotiate restoring three (3) student instructional days within the school calendar, which may result in a school calendar of 174 days.</p>	<p><u>OPPOSE</u></p> <p>There are other ways to ensure the students receive the full 180 days.</p> <p>Do not reduce this to 171 of 174 instructional days.</p> <p>DOE had from April until June to have a plan to get staff the needed training and professional development.</p> <p>The DOEs irresponsibility and delay of a full plan for reopening has caused this dilemma and should not be taken out of the student's school year.</p> <p>This is a display of incompetence.</p>
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BOARD OF EDUCATION DISCUSSION

Board Action on Board expectations regarding:

(1) focusing additional training and professional development days included in the revisions to the Department of Education's 2020-2021 school calendar on health, safety, and distance learning;

[BOE: a revised calendar may include more professional development days.]

(2) starting student instruction for the 2020-2021 school year in distance learning mode;

[BOE: Students and teachers would start instruction on August 4, 2020 in distance learning mode, giving teachers and administrators more time to adjust and prepare for students' return to campus, and continue for at least two weeks.

Classroom teachers make decisions in their classrooms throughout the school day based on the instructional methods they are using for curriculum delivery. This many create a need for putting on or taking off masks]

(3) mandating masks on public school campuses; and

[Currently, no clear mandate exists regarding the use of masks on public school campuses, and there is varied and at times seemingly conflicting guidance from numerous sources. Current guidance from DOH and DOE do not require masks in the classroom but require masks outdoors.]

(4) detailed, written, publicly posted guidance from the Department of Health

[Without the ability to see the detailed guidance on which the DOE is relying, the public has resorted to questioning the DOE's guidance. This lack of transparency has caused problems, delayed the implementation of guidance and led to a general erosion of public trust.]

(1) OPPOSE

Based on the DOE's previous recommendations, additional training and professional days WERE NOT included in the revisions. The staff training should not take away student hours.

(2) OPPOSE

Until the DOE and schools come to an agreement as to HOW distance learning is going to be provided, I oppose.

Some schools have put the whole distance learning on a "Full Distance Educator" AKA a parent or guardian. As it currently is laid out, it is very confusion.

I can provide homeschool curriculum for \$20 per month. It will be an accredited curriculum but student based not parent/education based.

(3) OPPOSE

I would suggest a trial basis.

Mandating anything in Hawaii is very difficult. We can't even keep track of the tourists on 14-day quarantine. This will create a clash between teachers and families.

(4) OPPOSE

The department of health has been anything but transparent. It is unbelievable that they WILL NOT allow anyone to know where the cases are. A school has an individual responsibility to make a decision based on data. They can't because the data is not available to the public. Even Mayor Caldwell has addressed this issue to no avail.

	Cases by zip code does not invade personal privacy, it provides schools with information about their community.
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FROM: SUSAN A PCOLA-DAVIS
Agenda Items:

The Department, HGEA, HSTA, and UPW agreed upon the August 17, 2020 start date for students. This will allow for an additional nine (9) days without students for training and professional development for school employees. The nine (9) days will include mandatory Department-directed training as well as administrator-directed training. The Unions agree to further negotiate to restore three (3) student instructional days within the 2020-2021 school calendar. The Department understands that this will need to be ratified by the union members.

<p><u>Department of Education Recommendation</u></p> <p>The Department recommends that the Board take action to approve the Department proposed revision to the Board-approved 2020-2021 Official School Calendar (Attachment A).</p>	<p><u>OPPOSE</u></p> <p>This avoids for the 2nd time a contingency plan. Two school calendar need to be developed. One for August 17 and the other for start September 1. This back and forth with DOE and HSTA + other unions are wasting time.</p>
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[illegible]

B. **OPPOSE:** Board Action on general waiver to allow reduction of the 180-day school year and 1,080 student instructional hours pursuant to Hawaii Revised Statutes Section 302A-251, consistent with revisions to the Department of Education's 2020-2021 school calendar

<p><u>Department of Education Recommendation</u></p> <p>The Board grants a general waiver for the Department to waive the school days and student hours requirements of HRS §302A-251 for the 2020-2021 school year to allow the Department the ability to implement the proposed revisions to the 2020-2021 Official School Calendar which are necessary to address the impact of the COVID-19 pandemic. The proposed revisions currently result in a school year of 171 student instructional days, a reduction of nine (9) student instructional days and 54 student hours. The nine (9) days will be used for training and professional development for school staff in preparation for the reopening of schools. The unions have agreed to further negotiate restoring three (3) student instructional days within the school calendar, which may result in a school calendar of 174 days.</p>	<p><u>OPPOSE</u></p> <p>There are other ways to ensure the students receive the full 180 days. Do not reduce this to 171 of 174 instructional days. DOE had from April until June to have a plan to get staff the needed training and professional development. The DOEs irresponsibility and delay of a full plan for reopening has caused this dilemma and should not be taken out of the student's school year. This is a display of incompetence.</p>
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<p><u>BOARD OF EDUCATION DISCUSSION</u></p> <p>Board Action on Board expectations regarding:</p> <p>(1) focusing additional training and professional development days included in the revisions to the Department of Education's 2020-2021 school calendar on health, safety, and distance learning;</p> <p>[BOE: a revised calendar may include more professional development days.]</p> <p>(2) starting student instruction for the 2020-2021 school year in distance learning mode;</p> <p>[BOE: Students and teachers would start instruction on August 4, 2020 in distance learning mode, giving teachers and administrators more time to adjust and prepare for students' return to campus, and continue for at least two weeks. Classroom teachers make decisions</p>	<p>(1) <u>OPPOSE</u> Based on the DOEs previous recommendations, additional training and professional days WERE NOT included in the revisions. The staff training should not take away student hours.</p> <p>(2) <u>OPPOSE</u> Until the DOE and schools come to an agreement as to HOW distance learning is going to be provided, I oppose. Some schools have put the whole distance learning on a "Full Distance Educator" AKA a parent or guardian. As it currently is laid out, it is very confusion. I can provide homeschool curriculum for \$20 per month. It will be an accredited curriculum but student based not parent/education based.</p>
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in their classrooms throughout the school day based on the instructional methods they are using for curriculum delivery. This many create a need for putting on or taking off masks]

(3) mandating masks on public school campuses; and

[Currently, no clear mandate exists regarding the use of masks on public school campuses, and there is varied and at times seemingly conflicting guidance from numerous sources. Current guidance from DOH and DOE do not require masks in the classroom but require masks outdoors.]

(4) detailed, written, publicly posted guidance from the Department of Health

[Without the ability to see the detailed guidance on which the DOE is relying, the public has resorted to questioning the DOE's guidance. This lack of transparency has caused problems, delayed the implementation of guidance and led to a general erosion of public trust.]

(3) OPPOSE

I would suggest a trial basis.

Mandating anything in Hawaii is very difficult. We can't even keep track of the tourists on 14-day quarantine. This will create a clash between teachers and families.

(4) OPPOSE

The department of health has been anything but transparent. It is unbelievable that they WILL NOT allow anyone to know where the cases are. A school has an individual responsibility to make a decision based on data. They can't because the data is not available to the public. Even Mayor Caldwell has addressed this issue to no avail.

Cases by zip code does not invade personal privacy, it provides schools with information about their community.

C. **OPPOSE:** Board Action on Board expectations regarding: (1) focusing additional training and professional development days included in the revisions to the Department of Education's 2020-2021 school calendar on health, safety, and distance learning; (2) starting student instruction for the 2020-2021 school year in distance learning mode; (3) mandating masks on public school campuses; and (4) detailed, written, publicly posted guidance from the Department of Health.

This agenda item covers the other four main concerns raised by Board members, based on concerns from testifiers, at the Board's last meeting.

<p><u>BOARD OF EDUCATION DISCUSSION</u></p> <p>Board Action on Board expectations regarding:</p> <p>(1) focusing additional training and professional development days included in the revisions to the Department of Education's 2020-2021 school calendar on health, safety, and distance learning;</p> <p>[BOE: a revised calendar may include more professional development days.]</p> <p>(2) starting student instruction for the 2020-2021 school year in distance learning mode;</p> <p>[BOE: Students and teachers would start instruction on August 4, 2020 in distance learning mode, giving teachers and administrators more time to adjust and prepare for students' return to campus, and continue for at least two weeks. Classroom teachers make decisions in their classrooms throughout the school day based on the instructional methods they are using for curriculum delivery. This many create a need for putting on or taking off masks]</p> <p>(3) mandating masks on public school campuses; and</p> <p>[Currently, no clear mandate exists regarding the use of masks on public school campuses, and there is varied and at times seemingly conflicting guidance from numerous sources. Current guidance from DOH and DOE do not require masks in the classroom but require masks outdoors.]</p>	<p>(1) <u>OPPOSE</u> Based on the DOEs previous recommendations, additional training and professional days WERE NOT included in the revisions. The staff training should not take away student hours.</p> <p>(2) <u>OPPOSE</u> Until the DOE and schools come to an agreement as to HOW distance learning is going to be provided, I oppose. Some schools have put the whole distance learning on a "Full Distance Educator" AKA a parent or guardian. As it currently is laid out, it is very confusion. I can provide homeschool curriculum for \$20 per month. It will be an accredited curriculum but student based not parent/education based.</p> <p>(3) <u>OPPOSE</u> I would suggest a trial basis. Mandating anything in Hawaii is very difficult. We can't even keep track of the tourists on 14-day quarantine. This will create a clash between teachers and families.</p>
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(4) detailed, written, publicly posted guidance from the Department of Health

[Without the ability to see the detailed guidance on which the DOE is relying, the public has resorted to questioning the DOE's guidance. This lack of transparency has caused problems, delayed the implementation of guidance and led to a general erosion of public trust.]

(4) OPPOSE

The department of health has been anything but transparent. It is unbelievable that they **WILL NOT** allow anyone to know where the cases are. **A school has an individual responsibility to make a decision based on data. They can't because the data is not available to the public. Even Mayor Caldwell has addressed this issue to no avail.** **Cases by zip code does not invade personal privacy, it provides schools with information about their community.**

MY BACKUP MATERIAL

<p><i>To be clear, any formal positions the Board takes regarding the four areas are not policies. Rather, these positions are the Board's expectations of the Superintendent and the DOE.</i></p>	
BOARD OF EDUCATION PROPOSED MOTION	BOARD RECOMMENDATIONS
<p>"Moved to adopt the following positions as the Board's expectations for the Superintendent and the DOE on the reopening of schools for the 2020-2021 school year:</p>	
<p>1. Additional training and professional development days. Like with any changes to the school calendar, additional training or professional development days are subject to collective bargaining. Depending on what changes the DOE and exclusive representatives agree to and the Board adopts, a revised calendar may include more professional development days. The Board may want to set expectations for how the DOE focuses these professional development days to ensure schools can safely open.</p>	<p>1. The Board expects any additional training and professional development days adopted as part of any changes to the school calendar to focus on health, safety, and distance learning to ensure schools can safely open and teachers and administrators are ready to provide instruction to students in distance learning mode;</p>
<p>2. Starting in distance learning mode. During the Board's last meeting, Board members discussed the possibility of gradually phasing to on-campus instruction by first having students start the school year in a distance learning instructional mode. Under this proposal, the first day for students on the school calendar would not change, and therefore, a change to the school calendar would not be necessary. Students and teachers would start instruction on August 4, 2020 in distance learning mode, giving teachers and administrators more time to adjust and prepare for students' return to campus, and continue for at least two weeks. The nine half-days of on-campus instruction described in the Memorandum of Understanding between State of Hawaii and Hawaii State Teachers Association (SY2020-2021 COVID-19 Response), dated June 26, 2020 (hereinafter, "HSTA COVID-19 MOU") would commence after the end of the full distance learning period.</p>	<p>2. The Board expects schools to begin the school year for students in distance learning instructional mode for at least two weeks or until the Superintendent believes all schools are prepared, whichever is longer. Schools may determine that students who do not benefit from distance learning can be provided more intensive supports, including in-person supports, during this distance learning mode period;</p>

<p>3. Mandating masks.</p>	<p>3. The Board expects everyone on public school campuses to wear a face mask (or a face shield if a medical condition prevents the extended use of a face mask); and</p>
<p>4. Department of Health guidance. While this matter did not come up explicitly during the Board’s last meeting, it has been the subject of numerous written testimonies. The absence of detailed, written, and publicly shared guidance from the DOH for schools has resulted in confusion and questioning of the guidance documents issued by the DOE. Without the ability to see the detailed guidance on which the DOE is relying, the public has resorted to questioning the DOE’s guidance. This lack of transparency has caused problems, delayed the implementation of guidance and led to a general erosion of public trust. The Board should consider urging the DOH to post public, detailed, written guidance for schools and to update this guidance as necessary as new evidence emerges.</p>	<p>4. The Board expects the DOE to rely on detailed, written, publicly available guidance from the DOH when formulating its own guidance to schools and the Board urges the DOH to issue such guidance.”</p>
<p>BOARD OF EDUCATION PROPOSED MOTION “Moved to adopt the following positions as the Board’s expectations for the Superintendent and the DOE on the reopening of schools for the 2020-2021 school year:</p> <p>1. The Board expects any additional training and professional development days adopted as part of any changes to the school calendar to focus on health, safety, and distance learning to ensure schools can safely open and teachers and administrators are ready to provide instruction to students in distance learning mode;</p> <p>2. The Board expects schools to begin the school year for students in distance learning instructional mode for at least two weeks or until the Superintendent believes all schools are prepared, whichever is longer. Schools may determine that students who</p>	

<p>do not benefit from distance learning can be provided more intensive supports, including in-person supports, during this distance learning mode period;</p> <p>3. The Board expects everyone on public school campuses to wear a face mask (or a face shield if a medical condition prevents the extended use of a face mask); and</p> <p>4. The Board expects the DOE to rely on detailed, written, publicly available guidance from the DOH when formulating its own guidance to schools and the Board urges the DOH to issue such guidance.”</p>	



Fwd: Please Delay the Start of School

BOE Hawaii <boe.hawaii@boe.hawaii.gov>
To: Testimony BOE <testimony.boe@boe.hawaii.gov>

Fri, Jul 31, 2020 at 11:54 AM

----- Forwarded message -----

From: **Andrea Aiona** <onedreality@gmail.com>
Date: Wed, Jul 29, 2020 at 5:28 PM
Subject: Please Delay the Start of School
To: <boe.hawaii@boe.hawaii.gov>

Aloha,

I have been an educator since 1997. I taught elementary school in the DOE for 10 years, then at UH Manoa as a teacher educator for 10 years, then at a DOE Public Charter School, next at Kamehameha Elementary at Kapalama, and this past year at Mokapu Elementary School as a Part-time RTI Math Teacher.

I am also a parent of three children in DOE schools, one in elementary school, one in middle school and one in high school.

Here is a scenario:

We go back to school. One child brings Covid-19 into my classroom. I get sick. I die.

What psychological affect will that have on that child? That child's family? My three children? My brothers and sisters? My parents? My grandparents (one is 90-years old, the other is 95-years old)? What will you say to the student and the students' family who brings Covid-19 into the classroom, whose teacher ends up contracting it, and dies? Who will pay for the medical bills? Who will pay for the trauma support that all parties involved will need in their futures?

In my living will, I ask my family, whoever will be left alive, to sue the state for willingly endangering the lives of all of the people in my family, and further, all of the students, faculty and staff in the DOE.

The DOE and schools are expected make data-driven decisions. What data has been presented and what data are you using that is evidence that it is safe to go back to school?

I would like to return to teaching this year. However, all of the plans presented to me, from each of my children's schools, as well as all of the schools I've been asked to teach at, in my opinion, have inadequate plans for safety. There has also been inadequate training for administration, faculty and staff for providing effective virtual learning.

I implore you to delay the opening of schools.

- Please do not use our students and families as a social experiment without the proper data and support.
- Please have a better plan for safety and protections for all people in the school environment.
- Please provide the necessary professional development for teaching and learning in a virtual and hybrid in-face/virtual environment

Please put our children and families first, rather than money and the economy.

Pleadingly,

Andrea Aiona, PhD
1050 Kupau St., Kailua, HI 96734
(808) 551-2050



School reopening

Alapa'i Kaulia <alapaikaulia@gmail.com>

Wed, Jul 29, 2020 at 8:38 PM

To: boe.hawaii@boe.hawaii.gov, testimony.BOE@boe.hawaii.gov

Aloha mai kākou,

My name is Alapa'i Kaulia. I am a middle/high school teacher at Ke Kula o 'Ehunuikaimalino located in the Konawaena Complex area. I was on school campus today and they started to do visual checks on staff. When I arrived I was asked if I had any of the symptoms listed on the visual checklist by our school SHA (school health aide). She is new to the DOE and had not yet gone to training for her COVID19. I had mentioned to her that I had a sore dry throat with a cough from the night before and she continued with the temperature check and said I was fine because there was no high temperature. Later in the day, our Admin was reviewing the DOE guideline and it states "If any of these symptoms are present, the person should be sent home immediately." Why is this not being enforced?

Secondly, I understood that I had a cough and a sore throat and can not afford to call in sick, therefore I had requested, as allowed outlined in the MOU, to teleconference from my classroom. I was given an alternative to sit outside of the cafeteria and listen in of which I wanted to be a team player and agreed to but why is our request questions and these options not being provided?

Schools are not ready to open to students. We have had triple-digit positive COVID19 cases today. With these inconsistencies of the regulations and policies of social distancing between the general public and the schools, we will be in quadruple digits before next month. Why is it okay to be closer than 6 ft in schools but not okay in the general public?

If the DOE can not get their things together for the health and safety of teachers, I will not be looking to fulfill tenure-ship or work towards this career as it seems to be a danger to my health and safety at this time and further jeopardizes my well being. Crossing my fingers to make it through this quarter, but not if we continue to be the guinea pigs of these hazardous conditions, COVID19.

Mahalo,
Alapa'i

Late Testimony

July 29, 2020

Dear Members of the Board of Education:

I am a retired DOE teacher and currently a substitute teacher for the public schools.

During the long “break” for two and half months due to COVID 19, there was a great disparity between the instruction from the private schools vs. public schools. The private schools offered distance learning for a minimum of 6 hours/day while the public schools instruction varied from school to school. The quality of instruction was so evident.

I strongly feel that if the public schools resume on August 17th, then the students should continue to have 180-182 days of solid instruction. Possibly remove Fall and Spring Breaks or extend the school year to mid-June. The children have LOST so many days of instruction. The lack of instruction clearly impacts their learning. It is nearly impossible to cover all of the grade level standards when time is taken away from the students.

Thank you for your kind attention to the re-opening of the school year.

Sincerely,
Carey Akamine



Fwd: School opening delay

BOE Hawaii <boe.hawaii@boe.hawaii.gov>
To: Testimony BOE <testimony.boe@boe.hawaii.gov>

Fri, Jul 31, 2020 at 11:55 AM

----- Forwarded message -----

From: **Sharie Ono** <sharieso@gmail.com>
Date: Thu, Jul 30, 2020 at 8:47 AM
Subject: School opening delay
To: <boe.hawaii@boe.hawaii.gov>

First you said school would open on Aug 4 now its Aug 17. Many teachers I hear about just don't want to work and weren't taking the time to prepare for school. This is not about my kids health this is about getting a free ride. I used to support teachers, but you no longer have my support.



Fwd: Testimony: Student class sizes are more than the rooms will allow

BOE Hawaii <boe.hawaii@boe.hawaii.gov>
To: Testimony BOE <testimony.boe@boe.hawaii.gov>

Fri, Jul 31, 2020 at 11:55 AM

----- Forwarded message -----

From: **Rhonda Comet** <rhondacomet@gmail.com>
Date: Thu, Jul 30, 2020 at 9:46 AM
Subject: Testimony: Student class sizes are more than the rooms will allow
To: <boe.hawaii@boe.hawaii.gov>

Aloha,

This is our second day at school, our rosters show student headcounts are larger than what our classrooms will allow per square footage.

Thank you for listening.

Rhonda



Fwd: Health Aide

BOE Hawaii <boe.hawaii@boe.hawaii.gov>
To: Testimony BOE <testimony.boe@boe.hawaii.gov>

Fri, Jul 31, 2020 at 11:56 AM

----- Forwarded message -----

From: **(null) (null)** <cindyshigeta@yahoo.com>
Date: Thu, Jul 30, 2020 at 12:46 PM
Subject: Health Aide
To: <boe.hawaii@boe.hawaii.gov>

Aloha,

There are some schools that do not have certified health aides. Please,
Please make sure each school has a full time certified Health Aide to assist through this
Monday-Friday. An EA is not certified or qualified to be a Health Aide. For=
the safety of the students and staff this needs to be implemented Today, NoW! This could be a big lawsuit for parents.
Please help in this matter!
We appreciate everything the board is doing to make our schools safe for everyone!
Thank you!



Fwd: ATTN BOARD MEMBERS- Reasons to Reopen our Schools

BOE Hawaii <boe.hawaii@boe.hawaii.gov>
To: Testimony BOE <testimony.boe@boe.hawaii.gov>

Fri, Jul 31, 2020 at 11:58 AM

----- Forwarded message -----

From: **Clyde Okuda** <cokuda3@live.com>

Date: Thu, Jul 30, 2020 at 2:50 PM

Subject: ATTN BOARD MEMBERS- Reasons to Reopen our Schools

To: BOE.Hawaii@boe.hawaii.gov <BOE.Hawaii@boe.hawaii.gov>

Cc: Clyde Okuda <cokuda3@live.com>, Pastor Ed Hanohano <kahued@hawaii.rr.com>, Vika McMoore <mcmoores001@hawaii.rr.com>, Roy Tetsutani <roytetsutani@hawaiiantel.net>, Simon Hanohano <alohaokamakua@gmail.com>, Annette Gima <loveconquers3@gmail.com>



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Watch "Doctors stand behind President Trump, call for reopening America thanks to miracle drug" on YouTube
<https://youtu.be/7zklguitaqc>

Published today, Thursday, July 30, 2020

ALL OF THE VIDEO APPLYS TO HAWAII.

FOR THE SAKE OF THE CHILDREN.

Thank you for your attention.

Sincerely,
Clyde Okuda, Concern Parent and Citizen
808-216-3231

Sent via the Samsung Galaxy S8 Active, an AT&T 5G Evolution smartphone



Fwd: Aug 17 Start date Delay

BOE Hawaii <boe.hawaii@boe.hawaii.gov>
To: Testimony BOE <testimony.boe@boe.hawaii.gov>

Fri, Jul 31, 2020 at 12:02 PM

----- Forwarded message -----

From: **Daniel Lukacinsky** <nofacemusic002@gmail.com>
Date: Thu, Jul 30, 2020 at 7:12 PM
Subject: Aug 17 Start date Delay
To: <BOE.Hawaii@boe.hawaii.gov>

Dear Board of Education,

As a parent of 3 elementary school children and a taxpaying citizen of the State of Hawaii I wish to express my alarm and extreme dissatisfaction at the Board's decision today to delay the start date of the school year to Aug 17th. Like many other parents who are outraged by this decision, my wife and I pay the high taxes here in Hawaii which fund the salaries of government employees i.e. teachers, maintenance, etc.

Here in Hawaii, despite the very recent uptick in cases at a little over 100 per day here on Oahu which is very minor compared to the 10,000+ new cases States on the mainland are experiencing, we have the unique opportunity for our children to return to school to receive the education that they are entitled to.

My wife and I now have to extend expensive child care services which are difficult for us to afford as a result of this decision even though we already pay high taxes to pay State government employees that seem to want to earn their full salaries but do not seem to want to do their jobs.

My children have already lost months of learning. This is Hawaii not Texas, California, or Florida.

It was decided and agreed upon by the DOE and the teachers union on June 27th that the schools would open on schedule on Aug 4th. Now on extremely short notice - 4 days - we find out that this will be changed and have to scramble to figure things out. 2 weeks notice on big changes like this are the rule and we would have appreciated the courtesy.

I feel that the voices of taxpaying parents who want their children back in school are not being heard or appreciated here in any kind of legitimate way.

So as the Superintendent Ms. Kishimoto has stated "My expectation is that if the Board approves the two week delay, that our labor partners will do an aggressive push to their members to be at schoolhouse doors on day one for our students."

I fully absolutely expect this as well - that my children will be in school on Monday Aug 17th and no later. My wife and I cannot justify paying the high taxes that we do if our children cannot go to school.

Distance learning does not work which has been undeniably proven by the DOE's research. Especially for elementary school students. I'm not sure what kind of specific training is needed here for the staff and if so why it wasn't done 2 or 3 weeks ago if it was needed so schools could begin on schedule on Aug 4th.

At any rate it's very simple - Wear a mask at all times, social distance 6 feet, and wash your hands. If these simple rules are followed in a controlled environment such as a school there will be very few if any problems.

Sincerely,

A very concerned parent.



Testimony

Joy Paul <joy.paul@k12.hi.us>
To: testimony.boe@boe.hawaii.gov

Fri, Jul 31, 2020 at 12:55 PM

Aloha,

My name is Joy Paul. I am a classroom teacher at Holualoa Elementary School on Hawaii Island. I encourage you to please make on-campus learning decisions on an island-by-island basis, or even by complex area. Hawaii Island currently has zero active COVID-19 cases. We absolutely should return to school using in-person teaching.

We know that in-person instruction is best for students. Please consider the best interest for children including mental health, social-emotional learning, and the power of one adult relationship in the life of a student.

Please make future decisions regarding the pandemic in the best interest for students on islands with either no cases, or very very few cases.

Thank you for your consideration,

Joy Paul
Educator, Hawaii Island

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How to reopen the economy without killing teachers and parents.

Clement Esaki <clement.esaki@gmail.com>

Sat, Aug 1, 2020 at 11:41 AM

To: testimony.boe@boe.hawaii.gov

There was a recent New York Times article on how to reopen the economy without killing teachers and parents written by Shardha Jorgee an astronomy professor and mother on July 20, 2020. Please read the article and seriously consider conducting only online or virtual classrooms and have the school buildings available for those who do not have the necessary tools (such as a computer or wifi) to have access for such educational tools.

I am a grandmother of a young first grader and mother-in-law to two teachers who teach at your public schools and am afraid for them to attend school when Hawaii's covid19 numbers are increasing each day. Hawaii has not gotten a handle on this virus and it would be calling for more trouble and problems for all of us to open schools when Hawaii is still in the danger zone.

Please, please read the article and rethink your steps while you still have time to make the bad situation good rather than worst.

Thank you for your time.

Late Testimony

Dear Members of the BOE:

My name is Caryn Fukuda and I am an English teacher at Mililani High School.

These are unprecedented times. We are all trying our best to cope with the pandemic and to keep teaching at the quality level. We are grateful if we are given the extra nine days to prepare for the future reopening of schools, especially with the lessons toward improving our online classroom.

As of Tuesday, July 28, 2020, we have 47 new covid cases which brings the total to 1,757 cases in Hawaii. I think that our numbers definitely show that we still need to phase in the reopening of schools at this time. In speaking with people who survived covid from other states, one lady who survived covid came out to social media via facebook to support the teachers in holding back the reopening of schools. I had the opportunity to speak honestly with her about her case. She is still weak and recovering but wanted to tell as many people as she could about the dangers of covid. She admits that she was careless at times when the numbers started to stabilize, she was not consistent with her mask use and started to socialize again. My classmate from Regent University online disappeared for three weeks and ended up dropping out of the university. She caught it from her aunt who was careless and also inconsistent with mask use and did not adhere to the social distancing warnings. My classmate was the lucky one, she came back after three weeks in the hospital but her aunt passed away in a coma in the same hospital.

I cannot imagine in the slightest what would happen if we release these students back into the schools. We don't even have an accurate number of students who are coming to the classroom in person, since parents are still unsure about the quality of education they will be receiving online. Most parents are apprehensive because of what they are equating with and remembering as to the quality of online education their child received when our schools suddenly closed in March. At that time, the teachers and administration were very unsure and ill-prepared to deliver appropriate online learning.

The teachers are now to approach a new form of teaching, to teach hybrid for some schools or 100% online. My school chose the hybrid method. It will be difficult to try to include both the students who are physically present as well as those who are at home. I think that what is better is that both students be together in real time whether at home or at school. What is best for the current situation; however, is to deliver all instruction 100% online.

My push for the safety of everyone is to do what other schools have chosen to do in preservation of everyone's health and safety. We need to keep the children at home with 100% online instruction with our teachers there to instruct and conduct school as normal.

With the phased in reopening of schools based on the timeline of the number of new covid cases present, we could safely reopen schools in the next few months.

In 2004, when I graduated from the University of Phoenix online with my Masters in Education, initially the DOE refused our degrees saying it was invalid because we earned it online. The two years which it took for my peers and I to earn this degree were time-consuming, and difficult. It was a juggling act for most of us, who had to work simultaneously. But it was probably one of the best learning experiences that I have ever had. Our peers testified and eventually gave up. It was only the two of us left and we had to convince the DOE to have foresight and to accept our earnest diplomas from our online school. After much deliberation, we won! I am proud to say that we paved the way for other online schools to gain acceptance in Hawaii. We were the very first online Masters in Education class in the State of Hawaii.

I know that we can make this happen. We need to do a phased in reopening of schools. Evidence and inquiry into the safety of hybrid learning is the same as reopening the schools and allowing them to come to school face-to-face. We need to do 100% distance learning for now until the numbers of covid cases decline significantly.

Thank you

Caryn Fukuda



(no subject)

Adrianne Akina <akinaadrianne@gmail.com>
To: testimony.boe@boe.hawaii.gov

Wed, Jul 29, 2020 at 11:08 AM

As a Aunty that has been working with 2 niece and and 1 nephew which one of my niece is a special need student that attends public school and the other two attends charter school I feel education is very important but not to the risk of their life's. Why should this student's life be but in harm because the president said we need student's to return cause we need the money but how is that helping the coronvise from not getting in to the student's or staff if they need more things to make sure of safety on all? You need to make sure everyone have hand sanitizer, temperature check, their on bathrooms in their classroom, feed in their own corners cause of social districts and let alone seat alone in bus! How is this helping the economy? Am very worried about my family safety in all.



TESTIMONY

Amy Colmenares <mrscolmenares7@gmail.com>

Fri, Aug 7, 2020 at 11:51 AM

To: testimony.BOE@boe.hawaii.gov

BOE Members,

I am a teacher in the Department of Education. I am also a parent of two students in the DOE.

I do not understand why the BOE/DOE is not making a decision to start the school year 100% virtual. How can you in good conscience believe that starting the school year in our face to face models is safe and effective given the current massive spikes in covid cases, the quick filling of and overwhelming of our hospitals, and the additional deaths that are occurring. Do you honestly believe that sending students back in a face to face educational model is what is best for all involved? Are you willing to shoulder the burden of DEATH and sickness that is sure to occur? Are you aware of what has happened in other states and countries upon opening schools? Do you not care? I am mind-blown at the fact that rules to slow the rate of covid in our state have been implemented, but no call has been made in regards to school. I honestly sat at my desk today, listening to the "training" that has been mandated, and cried. I have never cried at my desk before today, but hearing that there are 200 additional cases on Oahu and 2 additional deaths, yet the DOE/BOE have made no decisions so that schools can prepare for 100% virtual just overwhelmed me. We are going to lose teachers due to the DOE/BOE's lack of care and concern and commitment to teachers. We are going to lose administrators. We are going to lose students. This is unbelievable and unacceptable and I am ashamed and disheartened to be a part of our Hawaii DOE right now.

Sincerely,
Amy Colmenares



Testimony

Elise Swope <eswope@yahoo.com>

To: testimony.boe@boe.hawaii.gov

Wed, Jul 29, 2020 at 9:29 PM

Name: Elise A. Swope, Ph.D. retired clinical child psychologist, formerly with Hawaii DOH, child and adolescent health division, contract employee of the Hawaii DOE, covering the windward side, from Waimanalo to Waialua, contract employee Sunset Beach Elementary School, Intern supervisor HSPP, Private practice, Haleiwa Town Center, co-chair curriculum reform committee,, Hawaii Goals 2000

Submitting testimony as a concerned community member, my youngest child having graduated from the California Institute of Technology 1 month ago.

Meeting: special meeting on safe reopening of schools
Agenda item: School reopening

In November 2019 I received a letter from the president and provost of Cal Tech, introducing the idea of Cal Tech taking classes remote for Spring Semester, 2020. Up to that point I had not heard much about COVID19, but made it my business to learn, and have been reading ever since, focused primarily on excellent materials provided by the Cal Tech administration, and other parents, many of whom are professionals in the fields of medicine and science.

When Cal Tech announced their decision to take classes remote, they said that their community included their professor's day care and the families of the other children in that day care. In my opinion Cal Tech has set a high water mark in their responsibility to their students, faculty, the broader community. I am happy and comfortable with having left my child in their care. It is clear that they take seriously their responsibility to their students, their faculty and the surrounding community. I am attaching an article which was posted to the parent's forum which help shape their decision. It is a metareview of prior pandemics which indicate that schools being open contributes 50-80% to community spread. Even though my children are out of school and I am not longer working with children privately nor in the schools, I am being made (more) vulnerable because the State of Hawaii is not taking its stewardship as seriously. While our numbers are low, as Governor Ige said, they are still higher in terms of case/ 100k compared to states on the continent which do not have the advantage of relative isolation. By comparison to places which do, Samoa, New Zealand, Taiwan, Hong Kong, we are doing miserably, and we made the front page of the New York Times last week as one of the 3 states with the fastest growing case loads.

Hawaii still does not have a real plan. People have been arrested AFTER they violate quarantine. We have no idea how many people actually cooperate with quarantine. There is no supervision. In my neighborhood, I have not seen 1 single person wearing a mask. I frequently see kids playing in the street when they come to visit grandparents, as well as the children of community members. Clearly whatever guidelines have been put in place have not been well communicated or received.

Is it realistic to believe it will go any better at school? or that these children will not be introducing the virus? There does not seem to be any indication that the DOE is prepared to follow the CDC guidelines (the ones President Trump called "too cautious"). As is, the state is teetering on the brink of violating his very meager guidelines, that states with rising case loads do not open. Instead we are looking at doing the single thing most responsible for community spread: opening schools.

I could comment as a parent (whose children have recently graduated) or as a scientist. I am commenting as a community member who feels that her life is being threatened by your actions. In addition, children and teachers are unnecessarily being placed at risk. Teachers are not front line workers (Doctors, Nurses, medics, first responders). They are not trained to be, nor did they volunteer or apply for those jobs. It is not right to put them in that position, and it endangers their health and well being as well as that of the children and the greater community.

I live several blocks from Heeiea school. A dozen yards away is a new senior center. How long will it take before the virus is introduced to that center? My guess is less than 1 week.

A moral society does not endanger their citizens unnecessarily. Our constitution guarantees the rights to life liberty and

the pursuit of happiness. I contend that opening schools would violate the first precept by endangering our lives. I say this as someone who is not physically in the schools but as someone whose life, health and well being hangs in the balance.

I am prepared to provide a great deal of scientific literature to substantiate how dangerous a decision opening schools at this time is.

2 attachments



Nonpharmaceutical Interventions Implemented by US Cities During the 1918-1919 Influenza Pandemic

Geriatrics JAMA JAMA Network.htm

257K



Does closing schools slow the spread of coronavirus Past outbreaks provide clues Science AAAS.htm

111K

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Figure 1. Scatterplot of Public Health Response Time for 43 US Cities From September 8, 1918, Through February 22, 1919

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The 4 cities represented by black circles are discussed further in the text. The 2 cities represented by blue circles are outliers chosen to demonstrate that the associations shown are not perfect. The Spearman rank correlation coefficient was used.

Figure 2. Aggregate Weekly Excess Death Rates for 43 US Cities by Region From September 8, 1918, Through February 22, 1919

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The total excess death rate is 555 for the East region; 413 for the Midwest and South region; and 529 for the West region.

Figure 3. Weekly Excess Death Rates From September 8, 1918, Through February 22, 1919

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Type and duration of nonpharmaceutical interventions are indicated under each plot. For the specific nonpharmaceutical interventions, black bars indicate activation.

^aBusiness hours restricted, streetcars' capacity limited.

^bStaggered business hours, signs with “cover coughs.”

^cStaggered business hours, warning signs posted in theaters.

^dSchoolchildren given information to take home, warned not to gather in groups.

Table 1. Characteristics of Influenza Pandemic for 43 US Cities Between September 8, 1918, and February 22, 1919

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Table 2. Nonpharmaceutical Interventions Implemented in 43 US Cities Between September 8, 1918, and February 22, 1919

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Table 3. Multivariate Model Showing Effect of Combinations of Nonpharmaceutical Interventions on Weekly Excess Death Rates for 43 US Cities Between September 8, 1918, and February 22, 1919^a

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Table 4. Implementation Strategy of Nonpharmaceutical Interventions for 21 Cities Between September 8, 1918, and February 22, 1919

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Nonpharmaceutical Interventions Implemented by US Cities During the 1918-1919 Influenza Pandemic

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Abstract

Context A critical question in pandemic influenza planning is the role nonpharmaceutical interventions might play in delaying the temporal effects of a pandemic, reducing the overall and peak attack rate, and reducing the number of cumulative deaths. Such measures could potentially provide valuable time for pandemic-strain vaccine and antiviral medication production and distribution. Optimally, appropriate implementation of nonpharmaceutical interventions would decrease the burden on health care services and critical infrastructure.

Objectives To examine the implementation of nonpharmaceutical interventions for epidemic mitigation in 43 cities in the continental United States from September 8, 1918, through February 22, 1919, and to determine whether city-to-city variation in mortality was associated with the timing, duration, and combination of nonpharmaceutical interventions; altered population susceptibility associated with prior pandemic waves; age and sex distribution; and population size and density.

Design and Setting Historical archival research, and statistical and epidemiological analyses. Nonpharmaceutical interventions were grouped into 3 major categories: school closure; cancellation of public gatherings; and isolation and quarantine.

Main Outcome Measures Weekly excess death rate (EDR); time from the activation of nonpharmaceutical interventions to the first peak EDR; the first peak weekly EDR; and cumulative EDR during the entire 24-week study period.

Results There were 115 340 excess pneumonia and influenza deaths (EDR, 500/100 000 population) in the 43 cities during the 24 weeks analyzed. Every city adopted at least 1 of the 3 major categories of nonpharmaceutical interventions. School closure and public gathering bans activated concurrently represented the most common combination implemented in 34 cities (79%); this combination had a median duration of 4 weeks (range, 1-10 weeks) and was significantly associated with reductions in weekly EDR. The cities that implemented nonpharmaceutical interventions earlier had greater delays in reaching peak mortality (Spearman $r = -0.74$, $P < .001$), lower peak mortality rates (Spearman $r = 0.31$, $P = .02$), and lower total mortality (Spearman $r = 0.37$, $P = .008$). There was a statistically significant association between increased duration of

nonpharmaceutical interventions and a reduced total mortality burden (Spearman $r = -0.39$, $P = .005$).

Conclusions These findings demonstrate a strong association between early, sustained, and layered application of nonpharmaceutical interventions and mitigating the consequences of the 1918-1919 influenza pandemic in the United States. In planning for future severe influenza pandemics, nonpharmaceutical interventions should be considered for inclusion as companion measures to developing effective vaccines and medications for prophylaxis and treatment.

The influenza pandemic of 1918-1919 was the most deadly contagious calamity in human history. Approximately 40 million individuals died worldwide, including 550 000 individuals in the United States.¹⁻⁴ The historical record demonstrates that when faced with a devastating pandemic, many nations, communities, and individuals adopt what they perceive to be effective social distancing measures or nonpharmaceutical interventions including isolation of those who are ill, quarantine of those suspected of having contact with those who are ill, school and selected business closure, and public gathering cancellations.^{5,6} One compelling question emerges: can lessons from the 1918-1919 pandemic be applied to contemporary pandemic planning efforts to maximize public health benefit while minimizing the disruptive social consequences of the pandemic as well as those accompanying public health response measures?⁷⁻¹⁰

Most pandemic influenza policy makers agree that even the most rigorous nonpharmaceutical interventions are unlikely either to prevent a pandemic or change a population's underlying biological susceptibility to the pandemic virus. However, a growing body of theoretical modeling research suggests that nonpharmaceutical interventions might play a salubrious role in delaying the temporal effect of a pandemic; reducing the overall and peak attack rate; and reducing the number of cumulative deaths.¹¹⁻¹⁵ Such measures could potentially provide valuable time for production and distribution of pandemic-strain vaccine and antiviral medication. Optimally, appropriate implementation of nonpharmaceutical interventions would decrease the burden on health care services and critical infrastructure.

The historical record of the 1918-1919 influenza pandemic in the United States constitutes one of the largest recorded experiences with the use of nonpharmaceutical interventions to mitigate an easily spread, high mortality and morbidity influenza virus strain (ie, a category 4-5 pandemic using the Centers for Disease Control and Prevention February 2007 *Interim Pre-Pandemic Planning Guidance*).¹⁶ Our study focused on this data set by assessing the nonpharmaceutical interventions implemented in 43 cities in the continental United States from September 8, 1918, through February 22, 1919, a period that encompasses all of the second pandemic

wave (September-December 1918) and the first 2 months of the third wave (January-April 1919) and represents the principal time span of activation and deactivation of nonpharmaceutical interventions. The purpose was to determine whether city-to-city variation in mortality was associated with the timing, duration, and combination (or layering) of nonpharmaceutical interventions; altered population susceptibility associated with prior pandemic waves; age and sex distribution; and population size and density.

Methods

Data Collection

We combined systematic historical data collection and contemporary epidemiological and statistical analytic tools. Mortality data were obtained from the US Census Bureau's *Weekly Health Index*¹⁷ for 1918-1919, a series of reports listing total deaths and death rates for 43 large US cities. These 43 cities were among the 66 most populous urban centers according to the 1920 census, and all had a population greater than 100 000. Of the 66 most populous cities, the remaining 23 had incomplete archival and mortality records. No city with a comprehensive archival record of nonpharmaceutical interventions was excluded. The *Weekly Health Index* is the most complete extant compilation of weekly pneumonia and influenza mortality data in US urban areas during the 1918-1919 pandemic.

In addition, we captured all of the available public health documents on nonpharmaceutical interventions implemented by these 43 cities during the 1918-1919 pandemic, including municipal public health department annual and monthly reports and weekly bulletins; every state and federal report on the 1918-1919 influenza pandemic published between 1917 and 1922; US Census pneumonia and influenza mortality data from 1910-1920; the corpus of published historical, medical, and public health literature on the 1918-1919 pandemic; 86 different newspapers from the 43 different cities; records of US military installations between 1917-1920; and additional holdings housed in several major libraries and archival repositories (the complete bibliography of the 1144 primary and secondary sources is available as an online supplement at <http://www.cdc.gov/ncidod/dq/index.htm>).¹⁷⁻²³

Data Analysis

From the census reports, we extracted the weekly pneumonia and influenza mortality data covering the 24 weeks from September 8, 1918, through February 22, 1919, for the 43 US cities. In 1920, these 43 cities had a combined population of approximately 23 million (22% of the total US population). A small number of missing values (846 [0.6%] of 136 563 deaths) was imputed. Using estimated weekly baseline pneumonia and influenza death rates generated from the 1910-1916 median monthly values found

by Collins et al,¹⁸ weekly excess death rates (EDR) were computed. Based on available mortality data and epidemiological reports from that era, as well as a recent retrospective statistical analysis, we estimated that those who succumbed to influenza contracted it 10 days earlier.^{3,24-27}

The onset of the epidemic in a particular city was estimated as either the day of the first reported pneumonia and influenza case, or the calendar day of the first recorded pneumonia and influenza death minus 10 days, whichever was earlier. Information on nonpharmaceutical interventions was captured by reviewing at least 2 daily, high-circulation newspapers for each city and available municipal or state health reports. Nonpharmaceutical interventions were grouped into 3 major categories: school closure; public gathering bans; and isolation and quarantine. We also considered an additional general category of ancillary nonpharmaceutical interventions (eg, altering work schedules, limited closure or regulations of businesses, transportation restrictions, public risk communications, face mask ordinances).

Nonpharmaceutical interventions were considered either activated (“on”) or deactivated (“off”), according to data culled from the historical record and daily newspaper accounts. Specifically, these nonpharmaceutical interventions were legally enforced and affected large segments of the city's population. Isolation of ill persons and quarantine of those suspected of having contact with ill persons refers only to mandatory orders as opposed to voluntary quarantines being discussed in our present era. School closure was considered activated when the city officials closed public schools (grade school through high school); in most, but not all cases, private and parochial schools followed suit. Public gathering bans typically meant the closure of saloons, public entertainment venues, sporting events, and indoor gatherings were banned or moved outdoors; outdoor gatherings were not always canceled during this period (eg, Liberty bond parades); there were no recorded bans on shopping in grocery and drug stores. Based on an estimated 10-day time frame between disease onset and death, we estimated that the association of nonpharmaceutical interventions with reductions in EDR occurred 10 days after their actual date of implementation.^{3,24-27}

To test the association of the layering and timing of nonpharmaceutical interventions with mortality, an analysis of variance (ANOVA) model was constructed with weekly EDR as the dependent variable and epidemiological week, city, and the status (on/off) of every combination of nonpharmaceutical interventions as the independent variables. In the ANOVA model, each possible combination of nonpharmaceutical interventions was treated as an independent variable to test for layering effects. Any factor with a *P* value of less than .10 was included in the model. Because there is ambiguity over the rigor with which the category of ancillary nonpharmaceutical interventions was applied, enforced, and deactivated, we focused primarily on the 3

major categories of nonpharmaceutical interventions discussed above and we included the ancillary nonpharmaceutical interventions in the multivariate model for purposes of completeness.

We defined additional outcome (dependent) variables: (1) the time to first peak as the time in days from the activation of the first major category of nonpharmaceutical interventions to the date of the first peak EDR; (2) the magnitude of the first peak as the first peak weekly EDR; and (3) the mortality burden as the cumulative EDR during the entire 24-week study period.

We also defined the following independent variables. The first was the public health response time (PHRT) as the time in days (either positive or negative) between the date when weekly EDR first exceeds twice the baseline pneumonia and influenza death rate ($2 \times$ baseline; ie, when the mortality rate begins to accelerate) and the activation of the first major nonpharmaceutical interventions. Interventions that occurred prior to this reference point are recorded as negative PHRT values, indicating that public health officials responded to events prior to the acceleration of weekly death rates. However, most cities had positive PHRT in that they reacted after the $2 \times$ baseline mortality threshold, indicating that the epidemic had already entered its acceleration phase. The second independent variable was total days of nonpharmaceutical interventions, which was defined as the total cumulative number of days that nonpharmaceutical interventions from the 3 major categories were activated during the entire 24-week study period.

The ANOVA models were based on the study design of a 43 (city) \times 24 (week) factorial design without replication. Because there is no replication, the city \times week interaction term was treated as the error term in the multivariate analysis. We considered 4 different nonpharmaceutical interventions. Hence, there are 15 different combinations of these interventions (excluding the no intervention combination). Each of these 15 combinations was either implemented (on) or not implemented (off) in each city for each week. Thus, the effects of each of these combinations of nonpharmaceutical interventions are included in the city \times week interaction term. Each of these terms (along with their \times city and \times week interaction terms) were extracted from the original city \times week interaction term. The remaining unexplained variation was used as the error term in the ANOVA model. The remaining error term is likely to be larger than a true error term generated through replication so the analysis of any effects using this error term can be expected to be conservative. Such a factorial model without replication can be used to test hypotheses but the lack of natural error in the model makes estimates or predictions from the model such as effect size measures and confidence intervals nonestimable.

We also generated scatterplots and Spearman rank correlation coefficients to explore the associations between PHRT and each of the 2 additional dependent variables and associations between total days of nonpharmaceutical interventions and mortality burden. We further investigated these associations by using box plots and Wilcoxon rank sum tests to compare the outcomes for the cities above and below the median of each independent variable.

We also generated scatterplots and Spearman rank correlation coefficients to explore other potential or confounding associations (as independent determinants): (1) EDR in the 4 successive waves of the pandemic; (2) city-specific population size vs EDR; (3) city-specific population density vs EDR; (4) city-specific population age distribution vs EDR; and (5) city-specific sex distribution vs EDR. Analyses were performed using SAS statistical software version 9.1 (SAS Institute Inc, Cary, NC).

Results

There were 115 340 excess pneumonia and influenza deaths (EDR, 500/100 000 population) in the 43 cities during the 24 weeks analyzed. [Table 1](#) shows considerable city-to-city variation in mortality profiles and intervention characteristics; lists the earliest reported dates of the first pneumonia and influenza cases by city, mortality acceleration ($2 \times$ baseline EDR), first implementation of nonpharmaceutical interventions, and first peak EDR; and lists the values for each of the independent and outcome variables described above.

[Table 2](#) shows the categories of nonpharmaceutical intervention combinations, the number of cities implementing those combinations, and the median and range of duration of implementation by each of the 43 cities during the study period. Every city adopted at least 1 of the 3 major categories of nonpharmaceutical interventions; 15 applied all 3 categories of nonpharmaceutical interventions concurrently. School closure concurrently combined with public gathering bans represented the most common combination, implemented in 34 cities (79%) for a median duration of 4 weeks (range, 1-10 weeks). School closure was ultimately used in some combination with the other categories of nonpharmaceutical interventions by 40 cities (93%). Three cities never officially closed their schools (New York City, New York, New Haven, Connecticut, and Chicago, Illinois, although the latter reported a student absenteeism rate of $\geq 45\%$ at the peak of its epidemic); 25 cities closed their schools once, 14 closed them twice, and 1 (Kansas City, Missouri) closed its schools 3 times. Schools were officially closed a median of 6 weeks (range, 0-15 weeks).

The ANOVA multivariate model had an r^2 of 86.7% ($P < .001$). Nonpharmaceutical interventions were a significant source of the variation in the weekly EDRs within and between the cities. The ANOVA results are shown in [Table 3](#). The multivariate model

demonstrates that layered nonpharmaceutical interventions generally had a more significant association with weekly EDR than individual nonpharmaceutical interventions. Specifically, combinations of nonpharmaceutical interventions including school closure and public gathering bans appeared to have the most significant association with weekly EDR (ie, the lowest P values, most were $P < .001$). The large number of significant nonpharmaceutical interventions \times week interactions in the model confirms that the timing of the implementation of a given combination of nonpharmaceutical interventions was a significant factor in reducing mortality. One caveat is persistent nonpharmaceutical interventions \times city interactions, meaning that the success of a strategy of nonpharmaceutical interventions in a particular city does not uniformly translate to all other cities. The 2 outlier cities in our study, Grand Rapids, Michigan, and St Paul, Minnesota, exemplify this point.

The scatterplots in [Figure 1A](#), [Figure 1B](#), and [Figure 1C](#) display the associations between the PHRT and each of the 3 dependent variables. [Figure 1A](#) displays the association between PHRT in days and time to first peak EDR; cities that implemented nonpharmaceutical interventions earlier had greater delays in reaching peak mortality (Spearman $r = -0.74$, $P < .001$). [Figure 1B](#) shows the association between PHRT and the magnitude of the first peak EDR; cities that implemented nonpharmaceutical interventions earlier had lower peak mortality rates (Spearman $r = 0.31$, $P = .02$). [Figure 1C](#) depicts the association between PHRT and total mortality burden; cities that implemented nonpharmaceutical interventions earlier experienced a lower total mortality (Spearman $r = 0.37$, $P = .008$). In summary, when comparing the 21 cities with earlier (less than the median) PHRT with the 21 cities with the later (greater than the median) PHRT, there are statistically significant differences for each of the outcome measures ($P \leq .001$; [Table 4](#)).

[Figures 1C](#) and [1D](#) show the association between early, sustained, and layered application of nonpharmaceutical interventions and total excess pneumonia and influenza mortality burden in 43 cities. [Figure 1C](#) shows the statistically significant association between PHRT and total mortality burden. [Figure 1D](#) shows a statistically significant association between increased duration of nonpharmaceutical interventions and a reduced total mortality burden (Spearman $r = -0.39$, $P = .005$). In summary, the 21 cities that had earlier PHRT (ie, less than the median) and the most sustained and most days of nonpharmaceutical interventions had a statistically significant reduction in excess pneumonia and influenza mortality rates compared with the 21 cities that had later PHRT and fewer days of nonpharmaceutical interventions ([Table 4](#)).

[Figure 2](#) shows the aggregate city mortality curves by region (East, Midwest and South, and West). [Figure 3](#) displays 4 city-specific mortality curves, including weekly EDR and the nonpharmaceutical interventions implemented as well as their activation and deactivation dates for St Louis, Missouri, New York City, Denver, Colorado, and

Pittsburgh, Pennsylvania. These 4 cities were chosen because they indicate the broad spectrum of outcomes seen in the 43 cities studied as well as for their geographical and social diversity. (The mortality curves for all 43 cities are available at <http://www.cdc.gov/ncidod/dq/index.htm>.) Overall, cities that implemented nonpharmaceutical interventions earlier experienced associated delays in the time to peak mortality, reductions in the magnitude of the peak mortality, and decreases in the total mortality burden.

In exploring alternative and potentially confounding explanations for variation in city-specific EDR, we used a scatterplot to compare the cumulative EDR of the 43 cities during pandemic waves 1 (February-May 1918), 2 (September-December 1918), 3 (January-April 1919), and 4 (January-April 1920).^{2,3} We found no statistically significant association of the EDR across the 43 cities when comparing successive waves. Specifically, the severity or occurrence of wave 1 is not associated, either positively or negatively, with the severity of wave 2; the severity of wave 2 is not associated with the severity of wave 3; and the severity of wave 3 is not associated with the severity of wave 4 (figures appear in the online supplement at <http://www.cdc.gov/ncidod/dq/index.htm>).^{28,29}

Published virological evidence for strain variation during wave 2 is limited to a single genotypic variant without evidence for significant phenotypic change in virulence.³⁰⁻³³ While plausible, no virological evidence yet exists to explain the perplexing mortality difference between the spring 1918 wave, which was reportedly milder, and the subsequent fall and winter waves. Additional studies may clarify the understanding of the 1918 pandemic's wave phenomena.

Similarly, scatterplots comparing the cumulative EDR to the city-specific population size and density; sex distribution; and proportion of ages of younger than 1 month to 5 years, 15 to 40 years, and older than 65 years, which corresponded to high reported specific mortality rates in 1918 demonstrated no association. Among the 43 cities we investigated, neither the city's population size, density, sex distribution, nor age distribution accounted for the differences in mortality (figures appear in supplement at <http://www.cdc.gov/ncidod/dq/index.htm>).

Comment

During the 1918-1919 influenza pandemic, all 43 cities eventually implemented nonpharmaceutical interventions but the time of activation, duration, and choice or combination of these nonpharmaceutical interventions appear to have been key factors in their success or failure. In 1918, decisions to activate nonpharmaceutical interventions were typically triggered by excess morbidity, mortality, or both, as well as situational awareness of other communities near and far. Because discerning

precisely the first arrival of pandemic virus in a community was difficult, we chose to measure public health response time in reference to excess pneumonia and influenza mortality (ie, when weekly EDR first crossed the threshold of $2 \times$ the baseline and the mortality rates entered an acceleration phase). Hence, the difference in time between the first nonpharmaceutical interventions and this excess mortality threshold may be a positive or negative value. For example, in Philadelphia, Pennsylvania, which was affected early and was unprepared to respond, the PHRT was 8 and the EDR was approximately 37/100 000 population at the point of implementing nonpharmaceutical interventions; in contrast, New York City's PHRT was -11 days and the EDR was 0/100 000 population at the point of implementing nonpharmaceutical interventions. New York City responded to its first influenza cases and the perceived severity of the epidemic in nearby cities without waiting for excess deaths to accumulate.

The US Centers for Disease Control and Prevention's newly released interim community mitigation guidance recommends activating nonpharmaceutical interventions when outbreaks due to a pandemic virus strain first are confirmed in a state or metropolitan service region.¹⁶ Several theoretical models suggest that the effect of targeted, layered strategies for nonpharmaceutical interventions may be optimized when community influenza attack rates are 1% or lower.¹¹⁻¹⁵ Given the exponential growth of an unmitigated influenza pandemic, it is reasonable to expect that the timing of interventions will be among the most critical factors. Such expectations and biological realities are consistent with our observations of the 1918 pandemic, when rapid public health response time was a critical factor in the successful application of nonpharmaceutical interventions.

Late interventions, regardless of their duration or permutation of use, almost always were associated with worse outcomes. However, timing alone was not consistently associated with success. The combination and choice of nonpharmaceutical interventions also appeared to be critical as confirmed by the multivariate model.

For example, New York City reacted earliest to the gathering influenza crisis, primarily with the sustained (>10 weeks beginning September 19, 1918) and rigidly enforced application of compulsory isolation and quarantine procedures, along with an enforced staggered business hour ordinance from October 5 through November 3, 1918.³⁴ During this era, New York City's health department was renowned internationally for its innovative policies of mandatory case reporting and rigidly enforced isolation and quarantine procedures.³⁵ Typically, individuals diagnosed with influenza were isolated in hospitals or makeshift facilities, while those suspected to have contact with an ill person (but who were not yet ill themselves) were quarantined in their homes with an official placard declaring that location to be under quarantine. New York City mounted an early and sustained response to the epidemic and experienced the lowest death rate on the Eastern seaboard but it did not layer its

response. New York City's cumulative mortality burden, 452/100 000, ranked 15 out of the 43 cities studied.

In contrast, Pittsburgh, under orders from the Pennsylvania health department, executed a public gathering ban on October 4, 1918, but city officials delayed until October 24 before implementing school closure. A week later, on November 2, the state rescinded public gathering bans. The city applied its nonpharmaceutical interventions late and individually rather than combined. Pittsburgh's cumulative excess mortality burden (EDR = 807/100 000) ranked 43 out of 43 cities during the study period.

However, the benefits of these interventions were not equally distributed. Those cities acting in a timely and comprehensive manner appear to have benefited most in terms of reductions in total EDR. For example, St Louis, which implemented a relatively early, layered strategy (school closure and cancellation of public gatherings), and sustained these nonpharmaceutical interventions for about 10 weeks each, did not experience nearly as deleterious an outbreak as 36 other communities in the study (cumulative EDR = 358/100 000 population).

The 1918 experience suggests that sustained nonpharmaceutical interventions are beneficial and need to be “on” throughout the particular peak of a local experience. Many of the 43 cities in the study, particularly in the Midwest and South and West, experienced 2 peaks of excess pneumonia and influenza mortality (eg, Birmingham, Alabama, Cincinnati, Ohio, Columbus, Ohio, Denver, Indianapolis, Indiana, Kansas City, Louisville, Kentucky, Milwaukee, Wisconsin, Minneapolis, Minnesota, Oakland, California, Omaha, Nebraska, Portland, Oregon, Rochester, New York, St Louis, San Francisco, California, Seattle, Washington, Spokane, Washington, Toledo, Ohio; see figures in online supplement at <http://www.cdc.gov/ncidod/dq/index.htm>). These second peaks frequently followed the sequential activation, deactivation, and reactivation of nonpharmaceutical interventions, highlighting the transient protective nature of nonpharmaceutical interventions and the need for a sustained response. For example, Denver (cumulative EDR = 631/100 000 population) responded twice with an extensive menu of nonpharmaceutical interventions that included public gathering bans, school closure, isolation and quarantine, and several ancillary nonpharmaceutical interventions and these actions are reflected temporally in its 2-peak mortality curve.

Such dual-peaked cities are of particular interest because of the specificity and temporal associations between excess mortality and the triggers of activation and deactivation of nonpharmaceutical interventions and the implications for a causal relationship. Among the 43 cities, we found no example of a city that had a second peak of influenza while the first set of nonpharmaceutical interventions were still in

effect, suggesting that each city with a bimodal pattern served as its own control. In dual-peaked cities, activation of nonpharmaceutical interventions was followed by a diminution of deaths and, typically, when nonpharmaceutical interventions were deactivated, death rates increased.

History is not a predictive science. There exist numerous well-documented and vast differences between US society and public health during the 1918 pandemic compared with the present. We acknowledge the inherent difficulties of interpreting data recorded nearly 90 years ago and contending with the gaps, omissions, and errors that may be included in the extant historical record. The associations observed are not perfect; for example, 2 outlier cities (Grand Rapids and St Paul) experienced better outcomes with less than perfect public health responses. Future work by our research team will explore social, political, and ecological determinants, which may further help to explain some of this variation.

The United States of 1918 had many similar features to the present era: rapid transportation in the form of trains and automobiles; rapid means of communication in the form of the telegraph and telephone; large, heterogeneous populations with substantial urban concentrations (although a much higher percentage of the US population lived in rural areas compared with the present); a news system that was able to circulate information widely during the epidemic, including many daily newspapers and broadsheets distributed in communities; and a wide spectrum of public health agencies at various levels of government.

When examining the 1918 pandemic, however, it is important to recognize the numerous social, cultural, and scientific differences that do exist between that period and the present. For example, the legal understanding of privacy, civil, and constitutional rights as they relate to public health and governmentally directed measures (such as mass vaccination programs) has changed markedly over the past 9 decades. In addition, public support of and trust in these measures, along with trust in the medical profession as a whole, has shifted over time. Finally, other features of the modern era that need to be considered when applying lessons from history to the present era include the increased speed and mode of travel, above all high-volume commercial aviation; instantaneous access to information via the Internet and personal computers; a baseline understanding among the general population that the etiologic agents of infectious diseases are microbial; and advances in medical technology and therapeutics that have expanded considerably the options available for dealing with a pandemic.

Historical contextual issues and statistical limitations aside, the US urban experience with nonpharmaceutical interventions during the 1918-1919 pandemic constitutes one of the largest data sets of its kind ever assembled in the modern, postgerm theory era.

Our findings conform to 8 of A. Bradford Hill's 9 tenets on causal associations in the consideration of disease and the environment.³⁶ Specifically, during the 1918-1919 pandemic, the relation of early, sustained, and layered nonpharmaceutical interventions to EDR in 43 US cities demonstrate satisfaction of the criteria of *strength* (the magnitude and statistical significance of our findings, which also argue against an association by chance alone), *consistency* (early and combined nonpharmaceutical interventions were consistently associated with reductions in mortality, and our analysis is consistent with 2 recent smaller, preliminary historical epidemiological reports, although these studies look at only 16 US urban centers, do not include actual activation and deactivation time points, duration, or layering of nonpharmaceutical interventions, and rely extensively on secondary historical sources.^{37,38}

Further, our retrospective study is consistent with the results from recent theoretical models of the spread of a contemporary pandemic, which highlight the value of early, combined, and sustained nonpharmaceutical interventions to mitigate a pandemic¹¹⁻¹⁵), *specificity* (best demonstrated in cities with bimodal mortality peaks when the triggers were activated, deactivated, and reactivated), *temporality* (interventions always preceded the reduction of EDR), *dose response* (layering and increased duration of the nonpharmaceutical interventions were associated with better outcomes), *biological plausibility* (these interventions reduce person-to-person interactions and biologically would be expected to reduce the spread of a communicable agent such as influenza), *coherence* (our data align with the established body of knowledge on the epidemiology of influenza), and *analogy* (isolation and social distancing have been demonstrated as effective means of preventing person-to-person spread of other respiratory tract diseases, such as rhinovirus, severe acute respiratory syndrome, respiratory syncytial virus, varicella, and seasonal influenza).

The ninth tenet, *experiment*, could not be demonstrated directly because of the paucity of influenza pandemics in the past century, the trend away from such traditional public health measures for disease control during the past 50 years, and ethical limitations of using population-wide nonpharmaceutical interventions in the absence of a serious threat.

These findings contrast with the conventional wisdom that the 1918 pandemic rapidly spread through each community killing everyone in its path. Although these urban communities had neither effective vaccines nor antivirals, cities that were able to organize and execute a suite of classic public health interventions before the pandemic swept fully through the city appeared to have an associated mitigated epidemic experience. Our study suggests that nonpharmaceutical interventions can play a critical role in mitigating the consequences of future severe influenza pandemics (category 4 and 5) and should be considered for inclusion in contemporary planning

efforts as companion measures to developing effective vaccines and medications for prophylaxis and treatment. The history of US epidemics also cautions that the public's acceptance of these health measures is enhanced when guided by ethical and humane principles.³⁹⁻⁴¹

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Article Information

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Where schools have closed, teachers have attempted to continue coursework with their students online.

Yomiuri Shimbun via AP Images

Does closing schools slow the spread of coronavirus? Past outbreaks provide clues

By [Jennifer Couzin-Franke](#) Mar. 10, 2020 , 11:55 AM

As the societal disruptions from COVID-19 spread and intensify, a question for many in the United States is, what about schools? Schools in Japan, Italy, parts of China, and elsewhere have shuttered. A small but increasing number in the United States are following suit, whether for a day, a week, or longer.

But does shutting a school help a broader community, especially when the role played by children in spreading COVID-19 remains uncertain? Nicholas Christakis, a social scientist and physician at Yale University, thinks it does, but he recognizes that questions around closing schools are difficult. Christakis studies social networks and is developing software and statistical methods to forecast an epidemic's spread before it happens.

This interview has been edited for clarity and length.

Q: There seems to be a lot of variability in how schools are managing this. What are the different approaches schools can take—and have taken in past epidemics—and how might they help?

A: I'd like to emphasize the difference between reactive and proactive school closures. Reactive is when a school decides to close when a student or parent or staff member is sick. Most people don't argue with that. If the pandemic is at the school, you would want the school closed.

There have been a number of studies that have looked at reactive closures. These analyses, [including a paper in *Nature* in 2006 using math models](#) [of an influenza pandemic], typically find that such reactive school closures for a moderately transmissible pathogen reduces the cumulative infection rate by about 25% and delay the peak of the epidemic [in that region] by about 2 weeks. When you postpone the peak, you also typically flatten the epidemic and space out your cases. This has value. It means that the incidence on any given day is lower, so we don't overburden our health care system.

Q: So a reactive closure would occur after a case of COVID-19 in a student, parent, or staff member. Should one case like this close a school? Does it depend on circumstances at all?

A: If, for example, a person flew to your town from Italy and brought the condition with them, that means something different than a community-acquired case, where we don't know how they got the disease. A community-acquired case is like a canary in

the coal mine. When you detect one case there are probably dozens or hundreds of others.

Q: A community-acquired case should close the school?

A: Yes. By that time, they've probably transmitted it to other people. It's the tip of the iceberg. One paper I looked at [on an influenza pandemic] looked at [closing a class or a grade](#). It doesn't gain you much.

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[How an Australian researcher ended up in the spotlight at a White House coronavirus briefing](#)



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Q: What about the parent returning from a trip in Italy? Should that school close?

A: Maybe. They could isolate people close to the infected individual. I would probably close it, but I could certainly understand not doing so.

Q: How about proactive school closures, before there are any infections associated with a school? Are they helpful?

A: Proactive school closures—closing schools before there's a case there—have been shown to be one of the most powerful nonpharmaceutical interventions that we can deploy. Proactive school closures work like reactive school closures not just because they get the children, the little vectors, removed from circulation. It's not just about keeping the kids safe. It's keeping the whole community safe. When you close the schools, you reduce the mixing of the adults—parents dropping off at the school, the teachers being present. When you close the schools, you effectively require the parents to stay home.

There was a wonderful paper published that [analyzed data regarding the Spanish flu in 1918](#), examining proactive versus reactive school closures. When did [regional] authorities close the schools relative to when the epidemic was spiking? What they found was that proactive school closing saved substantial numbers of lives. St. Louis closed the schools about a day in advance of the epidemic spiking, for 143 days. Pittsburgh closed 7 days after the peak and only for 53 days. And the death rate for the epidemic in St. Louis was roughly one-third as high as in Pittsburgh. These things work.

Q: How should jurisdictions decide when to pursue a proactive closing?

A: How many cases are there in the region? And what is the epidemiologically relevant region? If you're in a mid-sized town you might say, as soon as there's a community-acquired case in my town, whether it's in my school or not, I'm closing my school.

Q: Let's consider the community-acquired case of a rector at a church in Washington, D.C., whose COVID-19 diagnosis was [announced this past weekend](#). Should schools close in the region because of that one case?

A: If the rector was in the epidemiologically relevant area (however you define it), and if you believe that you will close your school in a reactive fashion when there's a case at your school, and a community-acquired case appears—it's going to appear [in the school]. So why not close now ahead of time, and gain all the extra time for your staff and students to minimize spread?

Q: This sounds hugely disruptive.

A: Unsurprisingly, there are substantial costs—health costs and economic costs. Many children get school lunches; their health might suffer from closing the school. Health care workers could be taken out of commission to care for their own children precisely when we need them at hospitals. Parents could lose job opportunities. This is why in Japan, they're providing basic income to parents during the closure. It should be rightly seen as a state expense.

Q: Are there social distancing efforts short of closing schools, especially if there are no cases associated with a particular school? For example, canceling big events that bring together lots of families?

A: Yes, I'm so glad you mentioned that. We don't have to have an all-or-nothing policy. We can have intermediate steps. For example, why not allow families who want to keep their kids home keep them home? Why not cancel all activities, like sporting events and musical performances that have large groups present?

When we engage in social distancing, it's not so much that you don't get infected yourself. The real advantage is that by removing yourself from circulation, you stop all the paths of this virus through you. You are doing a social service, you are helping the community. Employees who want to work from home [and are able to] can work from home.

Q: Many schools have closed for 1 day to sanitize. Is that a useful strategy?

A: I don't know the answer to that. It depends on the circumstances.

Q: Another big question is what the endgame is. If schools close, when should they reopen?

A: Honestly, I don't know how much research has been done. It's a number of weeks when you close. The Chinese have had their schools closed for 6 weeks. The Japanese have had their schools closed for four. What is the reopening rule? I don't know the answer.

Q: School closures are pretty controversial right now. Some articles, like [this one](#) and [this one](#), suggest they risk accomplishing little. And because this outbreak is still so new, we are drawing on previous outbreaks of other diseases to guess what shutting schools can do for this one. What would you say to people who argue that closures hold little value, especially when a community has relatively few cases of the virus?

A: Let's do a thought experiment. If there is an outbreak in your school, would you advocate for closing the school? If the epidemic is occurring around your school, you know that it is going to strike the school. And so if you're prepared to close the school when it arrives at your school, it makes much more sense to close when it is near the school.

We know from past epidemics of multiple types of viruses that school closure works. We know that it interrupts adult transmission even if the kids are not vectors. Here, it's [likely that kids are vectors](#), and preliminary evidence from China suggests that they can be. I absolutely recognize it's a difficult calculus. But what we're talking about here is a pandemic.

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[Jennifer Couzin-Frankel](#)

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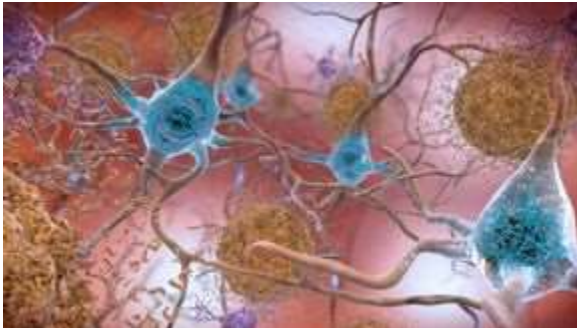
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School Year 2020-21

Orasa Fernandez <okf7694@hotmail.com>

Fri, Jul 31, 2020 at 3:33 PM

To: "BOE.Hawaii@boe.hawaii.gov" <BOE.Hawaii@boe.hawaii.gov>

Good Afternoon BOE,

I am a parent of two that attends public school. I am very concern on sending my children back to in-person learning. Safety of my children comes first even above education and education to me is very important. It is our future, but as parent my role is to ensure my kids grows up to live each day. The school where my kids attend does offer distance learning, but after hearing testimony from yesterday's board meeting stating that distance learn will not have teacher support. That is not right. Distance learning is still part of the school program. It is not home schooling. I ask that you ensure all students who opt for distance learning have teacher and tutor support.

Thank you,
Orasa Fernandez



Infections between children highly likely

Kawehi Ortiz <kkawehi.ortiz@gmail.com>

Fri, Jul 31, 2020 at 6:20 PM

To: BOE.Hawaii@boe.hawaii.gov

Aloha Chairperson Payne and Members of the Board:

Please read the linked news story. It looks like the evidence (from the CDC) is starting to come in that children do in fact transmit the COVID-19 virus between each other very easily. <https://www.wsbtv.com/news/local/hundreds-georgia-campers-infected-with-coronavirus-ymca-summer-camp-cdc-report-finds/EL5FFTVDVETRGROPEXK6CIZNM/>

I want to express my frustration and displeasure that the Board has opted to deny a phased approach in returning our children safely to school. We protect our children by vaccinating them before going to school. Absent a vaccine for COVID-19, sending our children back to school before a vaccine is rolled out is irresponsible.

If we start school with students on campuses throughout the state, it will spell disaster for our communities-- kids will get infected and they will infect their families, many which have Kupuna. We will have to take another giant step backward at reopening the state.

I urge you to support online learning *first* for the majority of the student population with the highest needs students to have access to services first (special education students etc.) Mayors are putting restrictions on gatherings again yet DOE is somehow exempt because campuses will be a controlled environment? That is a joke. Recess will not be a "bubble." Passing time will not be a bubble. Lunch will not be a bubble, and neither will before and after school. It saddens me that "there will always be a risk" is an okay reason to start the school year in-person. Will that be the same reason once we start seeing children and adults within the DOE become seriously ill?

My friends who are teachers and administrators (at different schools) are telling me that their cleaning and PPE supplies still haven't come in yet because they're BACKORDERED. Tell me how schools are going to coordinate sharing supplies if they're not even at the schools to begin with?

Mahalo for your time and mahalo for your service.

Kawehi Ortiz



Don't Rush!

Diane Monaco <bdmonaco@icloud.com>

Sat, Aug 1, 2020 at 7:27 AM

To: boe.hawaii@boe.hawaii.gov

What's the rush in opening school? Hawaii Covid cases are going up and now they are local cases - not from visitors but community.

Prisoners being released for fear they will get Covid, gatherings of more than 10 prohibited yet you want to put the keiki, teachers and keiki family at risk?!

This pandemic situation in Hawaii keeps getting worse, how many people have to die to get you to pull back? How will you feel when a student, teacher or school employee dies after being exposed at school? It's a very likely possibility! How do you expect kids to remember ALL the protocols to keep safe?

Just STOP and value LIFE! Education can be made up, when you die, it's ALL over!

Sent from my iPhone



School opening

Diane Monaco <bdmonaco@icloud.com>
To: BOE.hawaii@boe.hawaii.gov

Sun, Aug 2, 2020 at 8:17 AM

We what happens, read this! Keep schools closed!

<https://www.facebook.com/100002365089226/posts/3245588615529943/>

Sent from my iPad



Value life! Death is final!

Dhs <dhshi1@sbcglobal.net>
To: BOE.hawaii@boe.hawaii.gov

Sun, Aug 2, 2020 at 8:23 AM

Read this - do not open schools yet!

https://www.huffpost.com/entry/georgia-ymca-camp-covid-19-outbreak-260_n_5f24a33cc5b68fbfc8833269?ncid=fbklnkushpmg00000046&utm_medium=facebook&utm_source=women_fb&utm_campaign=hp_fb_pages

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