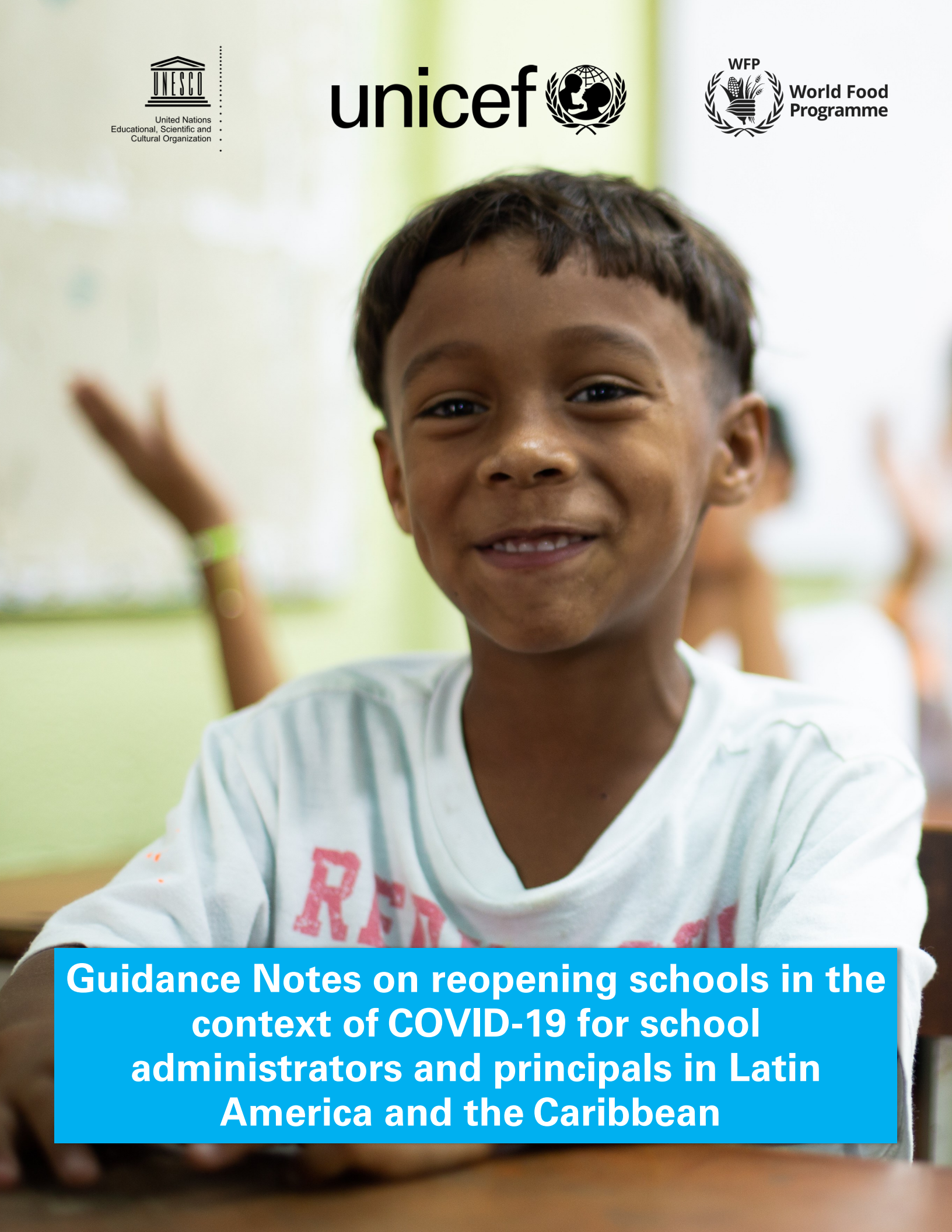
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Guidance Notes on reopening schools in the context of COVID-19 for school administrators and principals in Latin America and the Caribbean

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Guidance Notes on reopening schools in the context of COVID-19 for school administrators and principals in Latin America and the Caribbean.

Panama City, July 2020

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This document was prepared by the Education Section of the UNICEF Regional Office for Latin America and the Caribbean, together with the Sections of Health and Nutrition; Water, Sanitation and Hygiene; Child Protection; and Gender, in consultation with the UNICEF Country Offices in Latin America and the Caribbean, and with contributions from the United Nations Educational, Scientific and Cultural Organization Regional Office for Education in Latin America and the Caribbean (OREALC/UNESCO Santia) and the World Food Program Regional Office for Latin America and the Caribbean (WFP).

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UNICEF pays special tribute to the contributions and inputs of the WFP technical teams, and in particular Giulia Baldi, Regional Social Protection Adviser, and Alessio Orgera, WFP Regional Policy and Program Officer; Mary Guinn Delaney, Regional Education for Health and Welfare Adviser, Yayoi Segi-Vltchek, Regional Chief of Education 2030, Migration, Displacement and Emergencies and Paula Klenner Forttes, Associate Coordinator of the Education 2030 Program, Migration, Displacement and Emergencies of OREALC/UNESCO Santiago, UNESCO Regional Bureau for Education in Latin America and the Caribbean.

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INTRODUCTION

As the spread of COVID-19 has progressively spread in Latin American and Caribbean countries, ministries of education have taken the decision to close educational institutions at the preschool, primary and secondary levels. Some 23 countries and 12 independent states in the region have closed their schools. As a result, an estimated 154 million children and adolescents (including some 12 million who were out of school before the pandemic) have been affected in the region.[1]

Lack of access to schools puts at risk not only the educational continuity and learning of millions of children and adolescents, but also access to other important basic services provided by schools, such as school feeding (for many, school meals be the only meal they eat in a day), health, water, sanitation and hygiene, recreational programs, extracurricular activities and pedagogical and psychosocial support that may seriously affect their protection and welfare. Closing schools increases the economic burden on families and increases the workload of girls and women disproportionately, as they are left with additional domestic responsibilities and, in the case of girls, care of younger siblings and household tasks at the expense of their learning.

During the crisis, UNICEF, UNESCO, as well as other international, regional and national organizations, have supported the governments of Latin America and the Caribbean to implement multiple strategies to guarantee the continuity of learning: adapting curricula to distance modalities, making available to students, teachers and parents and caregivers various learning resources through online platforms, mobile phones, radio and television stations, social networks and print media. However, these solutions do not meet the needs of all children and adolescents, since those in the most vulnerable situations will have very little access to the Internet or a computer and therefore run a greater risk of being left behind in their learning and even of never returning to school.

Also, the World Food Program (WFP), the Food and Agriculture Organization of the United Nations (FAO) and the United Nations Children's Fund (UNICEF) developed a joint note to provide guidance to governments, education authorities and other key stakeholders on how to support, transform or adapt school feeding programs to ensure food security and nutrition for schoolchildren during the COVID-19 pandemic.[2]

The United Nations Children's Fund (UNICEF), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Bank and the World Food Program (WFP) recently adopted a framework for the reopening of schools to support Governments in strengthening distance education and in the process of reopening schools. This aims to accelerate system-wide reforms to expand reach and improve the quality of education services, ensuring the safety, protection and welfare, health and nutrition status of all members of the education community.

The reopening of school will mean for the child a return to a sense of normality, to a routine that, although different, will allow him/her to share with his/her teachers and peers, practice hygiene measures, get informed, receive psychosocial and cognitive support.

The decision to reopen should be guided by the best interests of the child and the guidance of the public health authorities in each country, based on a benefit-risk analysis according to each context, prioritizing mitigation measures and priority areas. It is important to carefully prepare for reopening through the implementation of **policies and funding measures** that ensure the development of **safe**

[1] United Nations Educational, Scientific and Cultural Organization, Institute of Statistics, 'Welcome to UIS.Stat', <http://data.uis.unesco.org/#>, consulted on June 29, 2020.
[2] World Food Program, Food and Agriculture Organization of the United Nations and United Nations Children's Fund, *Interim Guidance Note: How to mitigate the impact of the COVID-19 pandemic on the food and nutrition of students?*, WFP, FAO y UNICEF, Rome, 2020.

school operations, **learning achievements, reaching the most vulnerable and the welfare, health and nutrition and protection** of all members of the education community.

In most countries in this region, schools have closed their doors until further notice; however, there are some countries that, based on epidemiological data, the level of virus containment, the capacity of the health system and the level of preparedness of their ministries and schools, have decided to start the reopening process in the next weeks. Although there is no clarity on the dates for reopening, it is key that preparedness processes begin now, planning carefully to have the necessary inputs, ensure continuity of learning, minimize risks and support the health and safety of children, adolescents and education personnel.

These guidance notes contain a series of indications to support school administrators/directors in taking the necessary steps before and during the process of reopening schools; likewise, when schools remain open, it must be ensured that children are not at risk of contracting or spreading the virus and that their parents feel confident in sending their children to school. They also propose detailed guidelines to enable schools to resume the learning process and catch up on any learning lost, while also ensuring that the most vulnerable children and adolescents return to school.

It is key to understand that this preparation requires work that goes beyond the education sector, so close collaboration and coordination between the education, health, water and sanitation, protection and gender sectors will be essential.

The proposed protocols have been developed based on the review of numerous guidelines by various governments and institutions in this and other regions and are intended as an example that may be adapted to the specific context of each school.

What does this guidance note cover?

The first section presents key guidelines for before and during the reopening process related to:

a. Planning, coordination, communication and monitoring.

b. Policies, procedures and funding.

c. Safe school operations.

d. Continuity of safe school food and nutrition service.

e. How to reach all children and adolescents with a focus on the most vulnerable.

f. Protection and welfare.

The second section presents key actions and guidelines for when schools are open in relation to:

1. Entry process.
2. Water, sanitation and hygiene practices (hand washing, respiratory etiquette, menstrual hygiene, among others).
3. Basic Disinfection and cleaning supplies.
4. Orientations on physical distance (in classrooms, in the school yard, dining rooms, kitchens, dressing rooms, bathrooms, in school transportation).
5. Continuity of school feeding and nutrition service/safe school canteens.
6. Continuity of learning for all.
7. Psychosocial support and welfare.
8. Management and referral of suspected cases of COVID-19.
9. Guidelines to prevent discrimination and stigma.
10. Information and communication guidelines.

How to use this guidance note?

Objective:

- Provide school administrators/directors with guidance on recommended measures to be implemented in schools to ensure safe and multi-sectoral school operations once schools reopen.
- Provide practical guidance that may be contextualized for the reopening and operation of schools as safe and protective environments.
- Provide administrators, principals and teachers with recommendations on how to structure and organize the learning process when schools are reopened (adaptation of the curriculum, assessment of learning levels, prioritization of the development of essential skills, among others).
- Guide school administrators/directors of educational institutions in the development of information and communication materials with specific guidance for school administrators, principals, teachers, students, families and other members of the educational community.

FIRST SECTION: Before and during the reopening process

Parents should be notified of new school entry procedures well in advance using all available means of communication: official information on the website of the Ministry of Education, dissemination of newsletters, through mass media such as radio and television, at the national, district and local levels.

Principals should ensure that information about the reopening process reaches teachers, students, administrative staff, parents, community leaders, school committees, and others, and may also use other means of communication such as WhatsApp messages or electronic messaging.

Prior to the reopening of schools, it will be important to take the necessary steps to ensure the continuity of school feeding and nutrition services once schools are open in accordance with physical distancing and hygiene protocols determined by national and international health authorities.

1. Planning, coordination, communication and monitoring

- Establish a work team that has representation from school authorities, teaching and administrative staff, parents and students as far as possible.
- Formulate a prevention and control work plan for the COVID-19 epidemic, including actions and responsibilities both before reopening and when schools are open.
- Conduct a rapid analysis of the school's condition to implement the recommended protocols. (Develop a diagnosis on infrastructure conditions, access to water, sanitation and hygiene services, internet connection, available online platforms, learning materials, number of teachers, students and educational staff).
- Conduct an analysis of students at risk who may not return to school, determining whether incentive packages such as cash transfers, food, school materials, among others, are feasible in coordination with child protection and social protection systems.
- Conduct a rapid assessment of the number of students who have had access to distance education.
- Include training activities and drills as part of the plan. Remember that the school principal is primarily responsible for the protection and welfare of members of the educational community.

- Plan a daily information system on the health status of staff and students; this will allow the implementation of a "daily report" system, in accordance with the prevention and control requirements established by the health authorities and reporting in case of a specific situation.
- Review the list of students, teaching and administrative staff and their location. Confirm the availability and health status of teachers and administrative staff, develop schedules of attendance according to the mode of education to be implemented (classroom, only a few groups, mixed, staggered, among others).
- Conduct an analysis of school conditions (number of classes, access to water and sanitation services, internet connection, number of students, teachers and educational staff, access to food services, health, transportation, among others).
- Map the scope of distance learning initiatives or other services implemented during quarantine.
- Establish a mechanism for collaboration and information with parents, community leaders and other relevant stakeholders, to support the process of reopening schools.
- Ensure conditions to ensure continuity of school -based food and nutrition interventions by developing and planning for the necessary biosecurity, quality and safety protocols in the school environment and along the supply chain.
- Develop key guidance on school health and nutrition interventions, such as protocols for the use of kitchens, canteens, school stores, among others. It is important to ensure that schoolchildren continue to benefit from adequate nutritional intake and that the risks of spreading the virus are minimized.

2. Policies, procedures and funding:

- Conduct the necessary adjustments, making the school calendar, educational curriculum and evaluation and promotion processes more flexible and/or adequate, based on national guidelines.
- Review the school budget and other opportunities for financial support from the Ministry of Education and prioritize the purchase of supplies and adaptations required to ensure safe return to school.
- Establish (temporary) isolation rooms in relatively separate locations for immediate isolation of students or staff in case of fever or other symptoms of COVID 19.
- Ensure that staff (teachers and administrative staff) are aware of general guidelines prior to deployment to schools.
- Review and adapt the academic calendar, establish the number of hours of stay in the school, the modality of work (presential, virtual or mixed).
- Establish the dates, evaluation and promotion methods to be used (it is suggested, for example, to eliminate marks and to prefer evaluation by competencies).
- Identify available budget and prioritize immediate WASH investments.

3. Safe school operations

- Define a cleaning and disinfection protocol for all areas of the school and define the frequency.
- Conduct a control of existing cleaning and disinfection materials, establish the number of materials and equipment required for the application of hygiene and sanitation protocols (water, soap, cleaning and disinfection products, masks (if required)[3], gloves, alcohol, thermometers, among others), establish the appropriate purchase, replacement, quantity and frequency processes.
- Mark facilities and equipment that will not be accessed if the disinfection protocol cannot be complied with (e.g. sports equipment, music equipment, etc.).

[3] World Health Organization, “Considerations for Public Health Measures for Schools in the Context of COVID-19”, WHO, May 10, 2020, p.3


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- Define the amount of protective equipment and masks the school is required to provide for cleaning staff, teachers, and administrative personnel.
- Conduct a thorough cleaning in schools before reopening (preventive deep cleaning of all surfaces and opening of windows to maintain ventilation in classrooms).
- Ensure the physical layout of classrooms and workspaces to comply with physical distancing protocols (at least one meter of distance is suggested between tables and the teacher's desk and also between students' desks)[4].
- Ensure that classrooms are equipped with manual or mechanical ventilation.
- Mark school spaces to comply with the physical distancing protocol and draw up a circulation plan.
- Establish individual cleaning protocols: workstation, keyboard, mouse, work tools before and after use.
- Establish the room for temporary isolation in case of identifying suspected cases in school.

4. Continuity of safe school feeding and nutrition service

- Review and implement appropriate biosecurity, quality and safety standards throughout the supply chain in schools where school feeding services were provided prior to the pandemic.
- Plan and coordinate the return to pre-COVID school feeding.

[4] Ibid., page.5

- Ensure that transitional arrangements for school rations continue to be made until reopening.
- Develop biosecurity protocols for school food handling along the supply chain (purchasing, transport, storage, preparation, consumption, etc.).
- Develop protocols for food preparation and consumption processes in the school (e.g., distancing and seating in the dining room and kitchen).
- Develop protocols to increase the quality and safety standards of food consumed at school.
- Plan specific training sessions and communication approaches for school feeding committees, cooks, school staff, parents, students and others who manage food in the school setting.
- Conduct checks on school infrastructures such as kitchens, canteens and warehouses, to ensure that they may guarantee the necessary minimum safety conditions.
- Conduct a control of the necessary materials for the school personnel, that guarantee the storage, the preparation, the consumption and the waste with security against the risks related to the COVID.

5. Continuity of learning

- Adapt learning diagnostics according to school levels and context based on national guidelines.
- Define the auxiliary programs, supplementary teaching, extracurricular activities or non-formal learning, which will be implemented once the school is reopened.
- Provide teachers with the necessary equipment and training to conduct distance education processes, for example, computers, mobile devices, data access, reliable internet and telephone connections, digital communication channels (e-mail, Facebook Messenger, telegram, WhatsApp, among others).
- Train teachers in accelerated education programs and in mechanisms to identify children at risk, such as victims of violence or at risk of dropping out.
- Review and adapt educational content according to the modality that will be used once schools are reopened (presential or mixed), based on national guidelines.
- Train teachers in the use of remote platforms and in monitoring, feedback and evaluation processes.
- Improve school connectivity and access to learning equipment (tablets, computers, among others).
- Define educational resource packages (e.g. video, radio, TV, print) that support teachers.
- Train all teachers and staff of the institution in sanitation and hygiene protocols, physical distancing and the use of masks for themselves and their students. This training should be done as much as possible before the reopening and adapted to the age and conditions of the students and the COVID-19 prevention and control program.
- Review policies on education personnel such as working conditions, salaries, attendance policies, based on national guidelines.
- Establish mechanisms for counselling and psychosocial support for teachers and other education personnel.
- Ensure that school personnel (teachers and administrative staff) are aware of the general guidelines prior to deployment to schools.
- Review and adapt the academic calendar, establish the number of hours of stay in the school, the schedules, the number of students and staff who will attend the school, the mode of work (presential, virtual or mixed).
- Establish the dates, evaluation and promotion methods to be used (it is suggested that grades be eliminated and that evaluation by competencies be preferred).

- Identify available budget and prioritize immediate WASH investments.
- Plan remedial learning methods such as remedial classes, tutoring, extracurricular activities.
- Establish flexible sick leave policies and practices.

6. How to reach all children and adolescents with a focus on the most vulnerable

- Follow national guidelines regarding the removal of barriers such as registration fees and examination fees.
- Consider conditional and unconditional cash transfers to support children at risk of dropping out.
- Establish measures to ensure the return of all students, including those from the most vulnerable groups.
- Establish strategies to identify and monitor children who are out of school.
- Review admission policies and remove entry requirements according to national guidelines.
- Provide psycho-social and psycho-pedagogical attention; as well as close accompaniment to students and their families.
- Adapt educational materials to the needs of children and adolescents with disabilities, indigenous people, among others.
- Provide equipment and connectivity to ensure remote study.
- Adapt school facilities so that they are accessible to children and adolescents with disabilities.

7. Protection and welfare

- Support families, parents and caregivers to ensure the protection and welfare of children in and out of school.
- Develop strategies to reduce discrimination and stigmatization of families, children and adolescents.
- Inform parents about the protocols that will be applied once schools reopen, at least one week before the opening, for example:
  a. When should students stay home? If a student has been in contact with a COVID-19 patient, they should not send him/her to school and should contact the health authorities immediately. A specific contact person or hotline number should be provided based on the country's standard operating procedure for referral of suspected cases of COVID-19.
  b. Be alert if a child or adolescent has a fever, headache, cough, difficulty in breathing, weakness, stomach pain, diarrhea, among other symptoms.
  c. Inform the health authorities immediately so that the appropriate control protocols are activated.
  d. Inform the school authorities if the child or any family member has been in contact with a patient with COVID-19, with someone who has arrived from a country where the virus is present, or with someone they believe has died from COVID-19.
  e. Report if any of your children are sick, even if they do not have the symptoms of COVID-19.
  f. Be aware of the procedures applicable in the event that your child presents symptoms at school.
  g. Know that parents, visitors and providers must comply with the prohibition to enter school spaces.
  h. Learning about places to enter and leave school, as well as the times set and the importance of respecting physical distancing.
- Designate a staff person who is responsible for addressing COVID-19 concerns at the school. All school personnel should know who this person is and how to contact him or her.

- Establish a communication system for school personnel and families so they may report any symptoms, express concerns and notify any changes.
- Develop a strategy to ensure psychosocial support for teachers, students and other educational personnel in dealing with situations of stress and frustration that may have developed during time away from school.
- Design strategies to prevent stigmatization and discrimination towards families, children and adolescents who have been infected by COVID-19.
- Review of protocols and referral mechanisms to child protection services by the education community. *See Annex I: Check List.*

SECOND SECTION: With schools reopened

On the first day of the reopening, each teacher should take the time to explain to his or her students the new measures that will be implemented and the importance of complying with them.

Psychosocial support sessions are recommended to identify feelings of fear, anxiety, frustration, sadness, among others, and to work with students and educational staff on strategies to manage these feelings.

On the first day, students should be given information on hygiene measures such as hand washing, adapted according to the age and condition of the students, using for example, media such as songs, explanatory videos and posters. This process should be repeated over the next few days to ensure that the measures are followed.

During the first week, teachers should apply an assessment of the learning achieved during the distance education period to determine remedial strategies, required remedial programs and adjustments to the curriculum by identifying essential learning.

It is advisable to apply a survey to teachers, students and families, to know the effectiveness and identify the main obstacles of distance education. *See Annex II: Together against the Coronavirus.*

1. Protocols for entry

- Check that the doors and gates are open on arrival and remain open throughout the reception of students if security conditions allow.
- Ensure that arrival and departure times are adequate to allow for staggering of student arrivals when appropriate.
- Verify that each student brings his/her mask (if required) and maintains the suggested physical distance of at least one meter[5], for this purpose, signs can be placed at the entrance to the school by locating the places where children should be placed on arrival. Students should:
    - Go through the temperature check.
    - Use the handwashing station with soap and water.
    - Go directly to the classroom.
- Provide schools in high-transmission areas with infrared thermometers. Normal thermometers should not be used, as the temperature is taken in the mouth or under the arm and both saliva and sweat are vectors of infection.
- Take the child's temperature daily before they enter school. This measure may require staggering entry times (between 30 and 60 minutes, depending on the school population) while ensuring that the required physical distance is met.

[5] Considerations for public health measures concerning schools in the context of COVID-.19, p.5.



- Assign the school nurse the task of performing the daily temperature check of students and staff, if the school has one. If health personnel are not available, this function should be assigned to the administrative staff, in which case they should receive prior guidance from the health personnel:
    - Under 38: Ok.
    - Between 38 and 38.5: requires medical follow-up.
    - Above 38.5: children should not be accepted into the school and be referred to the health center.
- Follow the same protocols every day: students, teachers and staff should go through the sanitary mat, check their temperature and apply alcoholic gel.
- Show the protocols clearly printed on a poster at the entrance of the school.

1.1. Before entering the class

- Ensure that the windows are open or that the ventilation system is working.
- Verify that cabinets and other objects for collective use are identified and limit access to them to reduce the risk of exposure.
- Guide the group to the classroom respecting the physical distance and the rules of circulation.

1.2. During the class

- Keep the class doors open until all students enter.
- Give preference to the use of videos or teacher demonstrations to avoid manipulation of the materials.
- Ensure that established physical distancing protocols are followed.

- Ensure that each student has his or her own material and that no personal items are exchanged.
- Check that teaching materials are cleaned and disinfected after use, if possible with a disinfectant cloth.
- Verify that in addition to the daily cleaning protocol, when different groups of students follow one another in specific classrooms, a thorough cleaning of the tables, chairs, equipment and materials in contact with the students is carried out between each group, using, if possible, disinfectant wipes.

1.3. After the class

- Open the doors, ask the students to respect the rules of circulation and physical distancing in particular around the classrooms and toilets.
- Stagger breaks to limit the number of students in the hallways and common areas.
- Open windows for classroom ventilation.

1.3.1. Key messages may include:

- Be aware of your health and that of your co-workers. Do not go to work if you are sick.
- Check your temperature if you feel sick. If you have a temperature above 38.0, do not go to work and do not interact with students. Isolate yourself immediately and call your district health management team for help.
- Follow hand washing protocols when entering the school, with soap and water or hand sanitizer.
- Be aware of the symptoms in your students.
- Include key messages about emotions and handling fears. Remember that it is normal to have these feelings after a quarantine period.
- Report immediately if a student has symptoms and take him/her to the temporary isolation room.
- Follow protocols for communicating with parents and informing health authorities.
- Limit access to the infirmary. Establish a secondary area to care for other student illnesses or injuries.
- Monitoring absenteeism of teachers, students and other school staff, as well as having a list of trained provisional staff.
- Ensure that school nurses and other health personnel may monitor traffic for all types of illnesses and symptoms that students and school staff experience.

2. Water, sanitation and hygiene practices

As far as possible, it is better that children continue to go to school. However, it is important to follow recommended water, sanitation and hygiene practices. It is also important to ensure that children who are not attending school are adequately supervised, as well as facilitating their continued education and ensuring that they are protected, not only from WASH-19, but also from other potential threats they may face if no one supervises them.[6]

Frequent and adequate hand washing with soap and water is one of the most important measures that may be used to prevent the spread of the COVID-19 virus, along with physical distancing, avoiding touching the face (eyes, nose and mouth) and practicing good respiratory hygiene. However, in Latin America and the Caribbean, 1 in 6 schools (16%) does not have water services and 1 in 5 schools (19.8%) does not have hand washing facilities[7] and 40 per cent of households do not have access to a facility with water and soap and of these

[6] United Nations Children's Fund, 'Coronavirus' (COVID-19): What Parents Need to Know', <www.unicef.org/es/coronavirus/lo-que-los-padres-deben-saber>, consulted on July 2, 2020.
[7] World Health Organization and United Nations Children's Fund, 'Data: Hygiene', <https://washdata.org/>, consulted on July 2, 2020.

18 per cent do not have any handwashing facilities (WHO/UNICEF Joint Monitoring Program, 2018). [8]

The following are practical guidelines to be followed by educational staff, school principals, educators, parents and students for a safe reopening process.

2.1. Handwashing

Schools must establish at least one easily accessible handwashing station at the entrance to all school buildings. Gel disinfectant is NOT recommended for schools as a replacement for soap and water. It is recommended to promote the use of soap and water whenever possible. However, in certain circumstances where water is not available, gel sanitizer may be used. In relation to hand drying and if there are no resources to buy disposable paper, it is recommended to teach children and teachers to air dry their hands. *See Annex III: Properly washing hands.*

Handwashing breaks may be integrated into the all-day activity schedule for all students and staff.

- Frequent hand washing with soap and water for at least 20 seconds limits the risk of transmitting COVID-19. To help meet these 20 seconds, it is recommended that mirrors be placed at hand washing stations.
- All staff members and pre-school and primary school students should receive information on hand hygiene and the importance of preventing COVID-19.
- It is recommended that hand washing stations be used to display information and share messages promoting behavioral changes to minimize the risks of COVID-19.

Children and adolescents should always wash their hands:

- When you arrive at the school (main entrance of the building).
- Before entering the classroom.
- After you use the health services.
- Before and after lunch.
- After the game breaks.
- After handling body secretions or blowing your nose (tears, nasal secretions, saliva, among others).
- After school.

Teachers and educational staff should always wash their hands:

- When you arrive at the school (main entrance of the building).
- Before you start work.
- Before taking off your mask.
- Before preparing food, eating or helping children eat.
- After using the bathroom and helping a child to use the toilet.
- After blowing your nose or helping a child blow his/her nose.
- After contact with any body secretions (tears, nasal secretions, saliva, blood).
- After school.

2.2. Training on how to effectively use personal protective equipment (EPP)[9]:

- It is recommended that cleaning and support personnel use appropriate personal protective equipment (PPE) and be trained in its proper use: putting it on, using it, taking it off, and disposing of it.
- The use of the mask is recommended for teachers and administrative staff if it is mandatory following the guidelines of the country's health authorities.

[8] World Health Organization and United Nations Children's Fund, *Water, Sanitation and Hygiene in Schools: Global Baseline Report 2018*, WHO and UNICEF, 2018.
[9] Pan American Health Organization, 'COVID-19 Coronavirus Disease 2019: How to Put on Personal Protective Equipment', Infographic, PAHO/WHO, 2019.

- In the case of students, the use of the mask is not recommended for children under four years of age; for children over this age, training and gradual use is recommended. *See Appendix IV: Use of the mask.*
- The use of gloves is recommended only for medical and cleaning staff.

2.3. Respiratory etiquette

Another precaution that needs to be taken to avoid infection is respiratory etiquette. All staff and students in preschool or elementary school should be trained in respiratory etiquette/ etiquette. Some practical guidelines are:

- Cover your mouth and nose with a bent elbow or tissue when you cough or sneeze and dispose of the tissue in a closed container.
- Use tissues only once.
- Wash your hands often.

2.4. Menstrual hygiene

The COVID-19 pandemic will have secondary impacts on girls' and women's management capacity, menstruation and health. Impacts will vary according to country context and ability to respond through social protection and health systems.

- Consider menstrual hygiene materials as essential supplies for girls, women and other workers in educational units.
- Provide disposable sanitary pads or tampons, 20 -30 per month per woman depending on absorbency; amount of reusable material will vary by type and may require washing facilities.
- If the school is distributing food packages, it is suggested that menstrual hygiene supplies be included in the packages. Include menstrual materials in food or non-food item distributions for girls and women in home quarantine.

2.5. Waste management

- Collect, store, move and properly dispose of school waste; in particular, collect and dispose of used cough and sneeze tissues, masks, menstrual hygiene materials and cleaning supplies.
- Use pedal-operated, bagged waste bins in schools, otherwise it is better to use open bins rather than manually closed ones, as this exposes students, teachers and non-teaching staff to infection.
- Consider all solid waste to be infectious for the duration of the COVID-19 pandemic.
- Adapt storage sites for higher volumes in larger schools by organizing trucking systems and arranging for incineration or final disposal.
- Coordinate with local authorities the collection and final disposal of waste.

2.6. Sanitation

Sanitation systems help prevent the spread of many diseases and provide clean and healthy environments for school members. It is therefore important to ensure the availability of sanitation systems for both safe excreta disposal and the disposal of wastewater from hand washing and cleaning.

Adequate numbers of separate toilets for boys and girls must be ensured and kept clean at all times.

Floors, handles, doors, and other commonly used surfaces should be cleaned and disinfected at least once a day. Sanitary and sanitary facilities must be accessible to students and school personnel with disabilities.

- Sanitation staff should be provided with basic protective equipment (boots, gloves, masks) and trained in safe toilet disinfection practices.
- Ensure availability of cleaning and disinfection items (chlorine, detergents, floor cloths, buckets).



- Ensure that the disposal of faecal material and wastewater is done "on site" and safely in schools; and that the collection, transport, treatment and final disposal of faecal material and wastewater is done properly.
- School staff in charge of sanitation should be trained in safety protocols for unclogging toilet pits (where applicable). Specialized services are needed if septic tanks and pits need to be emptied.

3. Basic Disinfection and Cleaning Supplies

It is important to understand the difference between cleaning, disinfection and hygiene:

- **Cleaning.** Removes germs, dirt and impurities from surfaces and objects. During the cleaning process, soap (or detergent) and water are used to physically remove germs from surfaces. This process does not necessarily kill the germs but reduces the risk of infection.
- **Disinfection.** Disinfection works by using chemicals to kill germs on surfaces and objects. School facilities must be thoroughly disinfected daily to prevent the transmission of the virus, increasing staff as needed.
- **Hygiene.** Reduces the number of germs on surfaces and objects to a safe level, as set out in public health standards or requirements This process involves cleaning or disinfecting surfaces and objects to reduce the risk of spreading infection.

Cleaning and disinfection of the school environment, (including school furniture, equipment and toys), should be frequent and thorough; at least one thorough cleaning is recommended daily. Floors and surfaces may be cleaned with a cloth soaked in water and detergent and then disinfected with a commercial chlorine-based solution. This disinfectant solution should have a concentration equivalent to 0.1% active chlorine for cleaning surfaces and objects should be disinfected with 70% ethyl alcohol. *See Annex V: Cleaning and disinfection.*

3.1. Establish and monitor cleaning schedules:

- Wash and disinfect toilets, latrines and hand washing stations at least once a day.
- Immediately clean up fluid spills of blood, stool, saliva, vomit, nasal and eye discharges.
- Limit sharing of professional accessories and equipment (e.g., pens, phones, tablets, computer mice).
- Ensure proper operation and maintenance of ventilation systems, in accordance with regulatory requirements for the type of installation and function.
- Keep waste containers with garbage bags; empty and wash them daily.
- Dispose of single-use cleaning equipment in a tightly sealed garbage bag.
- Ensure that hand washing stations are always equipped with soap and paper toilets.
- Ventilate the room regularly (during recess, after lunch, when changing rooms, after cleaning, etc.).
- Limit the number of people present in the bathrooms to respect the physical distance.
- Manage the flow of students into the restrooms (leaving and returning to the classroom).
- Ensure that the urinals used are at least one meter away or block the use of every second urinal.

To clean up blood, stool, saliva, vomit, nasal and eye discharges, the following steps should be taken:

- Wear gloves to protect yourself.
- Pour the detergent or chlorine solution over the spill.
- Soak a large cloth in the detergent or bleach solution and wipe the affected area.
- Place the dirty cloth in a bucket and cover with a bleach solution or chlorine.
- Soiled towels and gloves should be placed in a container filled with detergent or chlorine solution for at least one hour. After one hour, the cloths may be washed with soap and reused once they are dry.

For more information:

Centers for Disease Control and Prevention, 'Guidance for Cleaning and Disinfecting: Public spaces, workplaces, businesses, schools, and homes', Infografía, CDC, 2020.

Centers for Disease Control and Prevention 'Guide to Child Care Programs that Stay Open', CDC, 2020.

United Nations Children's Fund, 'Water, Sanitation, Hygiene (WASH) and Infection Prevention and Control Measures in Schools', COVID-19 Emergency Preparedness and Response, UNICEF, 2020.

United Nations Children's Fund, Guidance on Prevention and Control of COVID-19 *Supplementary material A: Cleaning and supply recommendations*, UNICEF, 2020.

United Nations Children's Fund, World Health Organization and International Federation of Red Cross and Red Crescent Societies, *Important messages and actions for the prevention and control of COVID-19 in schools,* UNICEF, WHO and IFRC, 2020.

4. Guidelines to ensure physical distance

The reception capacity of schools must be determined in accordance with the protocols established by the country's health authorities, considering the following parameters: size of the institution, surface area of classrooms and other school spaces, number of students, teachers, levels working, days (morning, afternoon, evening), outdoor spaces available, capacity of sanitary facilities to comply with physical distancing protocols.

4.1. On the premises of pre-school and primary school (for students)

- Take measures to promote physical separation between people and limit the duration of close contact with preschool and primary school pupils, along the lines of the country's health authorities.
- Respect the maximum ratio of pre-school or primary students per classroom for schools prescribed by the ministries of education.
- Close non-essential communal areas and restrict access to schools to pre-primary or primary students only.
- Adjust schedules to minimize travel and grouping at the same time. Access to the playground will be in subgroups and in a controlled manner and if there are cafeterias at the school it is suggested that they remain closed.
- Establish rotating shifts for pre-school or elementary school feeding times when a dining room is available, or outdoors within the suggested distance.


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- Ensure, if possible, that the same pre-school or primary school students are always kept in the same group, on the same premises, at the same desk, and that educational staff always have the same group of students.

4.2. On the premises of preschool and primary schools (for members of the educational community)

- Respect the physical distance of 2 meters, both between teachers and students in all areas of the school: classrooms, bathrooms, dining rooms, courtyards.
- Ensure that educational personnel who are in contact primarily with preschool students or students with a disability, for a period of more than 15 minutes, wear a protective mask and eye protection at all times.
- Provide educational personnel with the necessary protective equipment, including masks and eye protection by the school.

4.3. In the school yard

- Designate play areas for each group, avoiding contact between students in different groups.
- Plan for changes in the recess schedule and intervals between periods to minimize contact between students.
- Pay special attention to spaces that act as bottlenecks (e.g. entrance to the changing rooms, exit to the courtyard, stairs) to avoid creating queues or crowds.
- Limit outdoor interactions by avoiding contact play.
- Promote individual recreational activities that maintain physical distance.

4.4. In school transport

- Consider that in the absence of physical barriers in the bus, the first seats should be reserved to respect the distance of 2 meters from the driver.
- Ensure that the driver wears a protective mask and eye protection at all times on the bus.
- Provide the necessary personal protective equipment, including a protective mask and eye protection, and make it available to the driver in sufficient numbers.
- Facilitate adequate ventilation in the vehicle by avoiding recirculation of the same air.
- Clean and disinfect the driving position at every shift or when changing drivers (steering wheel, interior and exterior door handles, interior mirror, seat belts, doors, seat).
- Recommend the use of masks for children using school transportation.
- Ensure that signage is easy to understand and visible (signs, posters, red/green/yellow colors, among others).

For more information:

United Nations Children's Fund, World Health Organization and International Federation of Red Cross and Red Crescent Societies, *Important messages and actions for the prevention and control of COVID-19 in schools*, UNICEF, WHO and IFRC, 2020.

World Health Organization, *Considerations for public health measures related to schools in the context of COVID-19*, May 10, 2020.

5. Continuity of safe school food and nutrition service

When schools are reopened, it is essential that biosecurity, quality and safety protocols and measures are implemented to ensure school feeding services and that the physical distancing and hygiene guidelines provided by the country's health authorities are followed; similarly, school authorities should be kept informed of the evolution of the COVID-19 and have the necessary flexibility to adapt measures if necessary.

The sustained increase in national prevalence of overweight and obesity is a cause for concern, especially in view of the fact that COVID-19 poses an op risk in people with obesity and other non-

communicable diseases. A diverse, age-appropriate, healthy and nutritious diet, in conjunction with regular physical activity, is essential for physical growth, cognitive development and the prevention of non-communicable diseases. The COVID-19 crisis threatens to affect all components of the food system.

Some of the measures that are recommended to ensure the provision of food and nutrition service are[10]:

- Promote optimal water, sanitation and hygiene services to ensure quality cleaning.
- Promote behaviors that reduce the risk of transmission of COVID-19 in children and adolescents, teachers and food service staff/ volunteers, school canteens and food vendors, also considering the wider educational community (parents and caregivers, among others).
- Ensure that compliance with food safety standards is not broken or relaxed.
- Ensure adequate nutritional intake in school meals and continue health and nutrition services.
- Create contingency plans for distribution of meals/food baskets in preparation for possible school closures.
- Promote initiatives that strengthen the link between school nutrition/health and learning.
- Promote initiatives to prevent overweight and obesity through educational tools (nutritional education, behavior change strategies, among others).
- Promote healthy and diversified diets in conjunction with physical activity at school to reduce the risk of overweight and obesity and strengthen students' cognitive abilities.



[10] *How to mitigate the impact of the COVID-19 pandemic on the food and nutrition of students?*

6. Learning

Once schools are open, it is important to assess the learning levels and scope of distance education, as well as to adapt the curriculum based on the results of the initial diagnosis. Priority should be given to the development of essential skills such as reading, writing, and mathematics in primary schools, in addition to transferable skills such as creativity, communication, collaboration, respect for diversity, among others. On the other hand, it is important to continue with distance education, in the event that schools are reopened in phases.

As far as possible, it is advisable to start the reopening with the educational levels that are key to the process of transition to higher education, i.e. with the levels of transition from primary to secondary education and from secondary to higher education.

Schools should adjust their curricula and prioritize work on developing basic skills and include activities in psychosocial support, water and sanitation, prevention of stigma and discrimination, physical development activities, among others.

It is critical to recognize that there will likely be feelings of distress, fear and uncertainty among teachers and students when they return to school. For teachers, these feelings may be associated with excessive workloads, family concerns or health risks. For this reason, they need a psychosocial support system that ensures the best conditions for the development of their functions and respect for their rights. It is important to prepare them to face new forms of learning, as well as the use of modalities to provide distance education.

During the process of reopening schools, it is necessary to continue developing the capacities of teachers and support staff to fulfil their responsibilities. In the case of teachers with realistic academic expectations, who, although they may not be able to cover all of the learning proposed initially, will do so with those that are essential to ensure continuity and promotion in a safe and welcoming environment.

If the school has decided to continue with a mixed mode (presential and distance), this may create greater pressure on teachers, so it is important that they participate in decision-making regarding teaching and learning processes.

6.1. Some of the strategies to support teachers may include:

- Promote peer learning and collaboration with other teachers.
- Ensure that school authorities support teachers in adjusting curricula and methodologies based on established schedules, as well as in reorganizing classrooms to meet physical distancing standards and training processes.
- Guide teachers on rapid learning assessment; the use of appropriate pedagogies to work with risk groups; and the support resources, technologies, etc. available to them for the development of their work.
- Consider the role of educational authorities in preparing guidelines for balancing the responsibilities of presential and distance education processes.
- Establish support systems in case a teacher has to be absent and conduct frequent psychosocial support and stress management sessions.
- Ensure short training sessions so that they do not increase the pressure to which they are already exposed.
- Establish work teams to develop diagnostic assessments of learning and adjust the curriculum.
- Define learning achievements based on analysis of time, conditions and diagnostic evaluation, always prioritizing the welfare of teachers and staff and establishing realistic and flexible expectations.

- Assess the need to expand staff in case it is necessary to integrate accelerated learning strategies or to meet the needs of the most vulnerable groups, such as students with disabilities, minority groups, migrants or those living in rural areas.
- Consider innovative methods of teacher support such as online professional development and coaching systems.
- Train teachers in the use of digital tools for distance education (online, radio, TV, SMS, among others).
- Train teachers, students and school education staff in emergency preparedness and response, because although COVID-19 is the emergency we face today, we cannot forget that the region is exposed to natural disasters and political or migratory crises, so it is essential that they are prepared in this area.
- Promote the development of innovative and alternative teaching methods among teachers.
- Create support networks and knowledge communities to promote the exchange of good practices and lessons learned on learning, health and nutrition.
- Support teachers in promoting initiatives to prevent overweight and obesity through educational tools (nutritional education, behavior change strategies, among others).

6.2. Some strategies to support students:

- Ensure tutoring, support classes and extracurricular learning activities.
- Ensure accelerated learning programs for those outside of school.
- Continue distance learning activities for those students who cannot or do not wish to return to school.
- Establish monitoring and follow-up systems for students who have not returned to school.
- Create mechanisms to identify children at risk of abandonment (early warning) and appropriate response strategies.
- Support teachers with innovative methods, such as online professional development and coaching systems.
- Establish contingency plans to respond if the school must be closed again.
- Training in the use of digital tools for distance education (online, radio, TV, SMS, among others).
- Add training activities for families and caregivers on how to support their children in distance education systems.
- Implement inclusive learning methods that are adapted to the needs of all children and adolescents, especially those with disabilities who may have lost access to physical therapy and language services, among others.
- Assess children and adolescents with special needs to determine their needs for compensatory education, as well as complementary services such as psychosocial support, therapies and other related services as required.

For more information:

United Nations Children's Fund, Guidance on Prevention and Control of COVID-19 in Schools, *Supplementary Material F: Accelerated Education in Response to COVID-19*, UNICEF, 2020.

United Nations Children's Fund, Guidance on Prevention and Control of COVID-19 in Schools, *Supplementary Material G: Recommended Resources,* UNICEF, 2020.

United Nations Children's Fund, *Plan 12 - Learning to Transform: A plan created by and for adolescents to develop and implement 12 transferable skills for today's changing world*, UNICEF, 2020.

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Inter-Agency Network for Education in Emergencies, IASC Global Education Cluster and Child Protection Global Protection Cluster, Safe Back to School: A Practitioner's Guide, 2020.

Save the Children et al., 'Learning Must Go On: Recommendations for keeping children safe and learning, during and after the COVID-19 crisis', Save the Children, UNICEF, INEE, Plan International, HI, FCA.

7. Psychosocial support

Schools are platforms that support intersectoral efforts and are essential to the response to COVID-19. While mental health and psychosocial support interventions are delivered through general health and child protection services, schools and other community structures also provide critical support to education communities. In addition, schools may also address social stigma and discrimination and support children and adolescents and their families who suffer negative psychological impacts due to problems such as loss of schooling, fear, anxiety, or having family members in isolation. School staff play an important role in supporting mental health promotion and psychosocial support activities, such as exchanging key messages about objective facts with students and their families; maintaining communication with those students who are isolated through phone calls, text messages or other virtual platforms; and providing care and support to people who have been separated from their families and caregivers.

Schools should:

- Ensure that mental health and psychosocial support services are accessible and appropriately adapted to the specific needs of children and adolescents.
- Ensure inclusion as some students may face barriers to accessing information and care and support if information is not provided in multiple accessible formats and through inclusive channels.
- Train and support workers who provide mental health and psychosocial support services to children and adolescents in schools in the fundamental principles of protection against all types of violence, especially gender-based violence (GBV).
- Address issues related to the mental health and welfare of teachers and other staff in the education community.
- Promote the following mental health and psychosocial support activities: (a) self-care strategies, such as deep-breathing exercises or other forms of relaxation; (b) reassuring messages about the normality of harboring feelings of fear and anxiety; and (c) clear, concise and accurate information about COVID-19.
- Collaborate with child protection specialists to provide appropriate awareness-raising messages for the prevention of violence, according to the gender and age of the children and adolescents on the channels of assistance and reporting available in the educational community.
- Establish a system in place that allows for the referral of students to specialized protective services when required to address previously identified needs.

For more information:

Centers for Disease Control and Prevention, 'Coping with Stress', CDC, 2020.

United Nations Children's Fund, *'Talking to your child about coronavirus disease 2019 (COVID-19): 8 tips to reassure and protect children'*, UNICEF, 2020.

IASC Reference Group on Mental Health and Psychosocial Support in Emergency Settings, Interim Briefing Note: Addressing Mental Health and Psychosocial Aspects of COVID-19 Outbreak.

United Nations Children's Fund, Guidance on Prevention and Control of COVID-19 in Schools, *Supplementary Material C: Mental Health and Psychosocial Support*, UNICEF, 2020.

United Nations Children's Fund, *6 Ways Parents can support their kids through the coronavirus disease (COVID-19) outbreak*, UNICEF, 2020.

Substance Abuse and Mental Health Services Administration, *Talking to Children: Tips for Caregivers, Parents, and Teachers during an Outbreak of a Contagious Disease*, SAMHSA, 2020.

8. Handling suspected cases of COVID-19 at school

It is important to take every precaution to identify any teachers or school personnel who have symptoms related to COVID-19. To do so, it is necessary that both teachers and administrative staff follow the same protocol for entering the school as that established for students. If parents have been in contact with someone with COVID-19, students should stay home and follow health authority quarantine protocols.

If students, teachers or other school staff are showing symptoms, they should stay home; and if they are showing symptoms of the virus when they are at school, a number of steps need to be taken to prevent the spread of the virus in educational institutions. Physical contact with anyone showing symptoms of COVID-19 in schools should be controlled and all possible precautions should be taken (physical distancing, protective mask and eye protection at all times). In addition, it is important to remember to treat the person (child or adult) with care and affection and to remain calm.

- School administrators, nurses, and other health care providers should identify a room or isolation area to keep out any person who has symptoms of COVID-19 in schools.
- If a student or staff member exhibits one or more symptoms (coughing, sneezing, shortness of breath, sore throat, fatigue, digestive problems, feeling feverish, etc.) while at school, that person should be immediately separated in a temporary isolation room provided for this purpose and only one staff member should be assigned to assist him or her. The staff member should wear a mask, eye protection and protective equipment.
- Use a pre-prepared COVID-19 emergency kit containing at least gloves, a mask, eye protection, a fully closing bag, a gown and a hydro alcoholic solution.
- Establish transportation mechanisms to safely transport anyone showing symptoms of COVID-19 in schools to their home or nearest health facility.
- Place personal items of the student/staff with symptoms in a closed cloth or plastic bag.
- Disinfect personal protective equipment (e.g. eye protection) with a suitable product.
- Promptly inform the staff of the institution, health authorities and families of a possible case of infection, while maintaining a commitment to confidentiality regarding the identity of the person at risk.
- Close areas or zones where the person at risk has been and do not use them again until they have been properly cleaned and disinfected following the hygiene and disinfection procedures specified in point 3 of this document. Wait 24 hours before carrying out the cleaning and disinfection process. If it is not possible to wait 24 hours, it is recommended to wait as long as possible. In this sense, it is also important to keep cleaning products out of the reach of children and adolescents.
- Meticulously clean and disinfect occupied premises and objects potentially used by the student/staff in the 48 hours prior to isolation.
- Inform all those (teachers, students, other school personnel and occasional visitors) who have been in contact with anyone infected with the virus to stay home and monitor the appearance of symptoms. In the case of students, they should have access to distance learning solutions.
- The student may return to class after being diagnosed by the corresponding health authorities or according to the protocols established by the country.
- If the doctor orders the test and it is positive, immediately inform the health authorities and the educational community.

- The health authorities together with the educational authorities will define the procedure for the identification of cases of contact and the decision to close the school if necessary.
- Inform staff and parents of students who may have been in contact with the ill student, according to the communication plan defined by the school.
- Psychologists and health staff in the national and/or sub-national education system should provide support.

For more information:

Centers for Disease Control and Prevention, 'Guidance for Schools and Child Care Programs', CDC, 2020.

9. Guidelines to prevent discrimination and stigma

Discrimination related to COVID-19 may increase vulnerability to violence and distress in children and adolescents. Control measures against the spread of diseases that do not consider gender aspects such as the specific vulnerabilities of girls may also increase protection risks and generate negative survival mechanisms. In addition, children, adolescents and families who are vulnerable due to their situation of socio-economic exclusion are at greater risk.

Stigma and discrimination may lead to social isolation, which in turn may lead to greater health problems and difficulties in controlling the outbreak of the disease. For this reason, it is essential that school staff show empathy for children, adolescents and other staff affected by the virus and build an environment in which the disease and its impact may be discussed openly and honestly.

9.1. Why does COVID-19 cause discrimination?

The discrimination associated with COVID-19 is based on three main factors:

1. It is a new disease about which there are still many unknowns.
2. We often fear the unknown.
3. It is easy to associate this fear with "the others".

9.2. Some tips to address discrimination around COVID-19

- Use person-centered language as a priority, respecting and empowering individuals. For example, talk about the new coronavirus disease, without attributing locations or ethnicities to the disease, and also about "people who have the COVID-19", without referring to them as "victims" or "cases".
- Speak of "persons who may have COVID-19", rather than "suspects with COVID-19" or "suspected cases", as well as "persons who acquire or contract COVID-19" rather than "persons who transmit, infect, or spread" the virus, as these terms imply intent.
- Use accurate language to refer to the virus, referencing official sources and not share unfounded rumors that may generate fear and confusion.
- Speak in a positive tone, emphasizing the effectiveness of preventive measures. There are simple steps we may all take to avoid contracting the virus.
- Respect the confidentiality of those who need medical care, as well as the privacy of the individual who has been in contact with people who have contracted the virus.

For more information:

Centers for Disease Control and Prevention, 'Reducing Stigma Associated with COVID-19', CDC, 2020.

United Nations Children's Fund, World Health Organization and the International Federation of the Red Cross, 'Social *Stigma Associated with COVID-19',* UNICEF, WHO, IFRC, 2020.

United Nation Children's Fund, COVID-19 & Stigma: 'How to prevent and address social stigma in your community', UNICEF, 2020.

10. Guidelines for information and communication

- School principals, with the support of the education area and/or municipality, should develop a detailed communication plan to sensitize all members of the education community about their responsibility to limit the spread of the virus.
- Everyone in the school community has a role to play in ensuring a safe school environment during the outbreak of COVID-19. Establishing clear communication mechanisms with families and communities is key.
- Families and communities need to be sensitized and given clear information on the new measures taken and the behavioral changes required to prevent the spread of the virus. Members of the educational community must be the school's partners in advocating and implementing safe return to school protocols.
- It is important that sanitation and hygiene measures are also applied at home. Families should ensure that children wash their hands with soap and water before eating, after using the toilet and before going to school.
- Remind children and adolescents, every day and before leaving for school, not to share food, glasses, bottles or other materials with their peers.
- Children should inform teachers promptly when they feel sick (headache, fever, cough, among other symptoms).
- Education authorities together with community leaders should disseminate key messages and relevant information using various channels such as radio, television, text messages, online platforms, messages on networks such as Facebook, Twitter, posters, among others.

Before the reopening of the school it is important that messages are transmitted several times a day through different communication channels at the national or local level as appropriate. *See Annex VI: Advice for children and adolescents* and *Annex VII: Advice for parents and caregivers.*

For more information:

Centers for Disease Control and Prevention [Print Resources], CDC, 2020.

World Health Organization, 'Physical Distancing: Social Networking Postcards', WHO, 2020.

Pan American Health Organization, 'Social Networking Cards: Adolescents and COVID-19', PAHO/WHO, 2020.

Pan American Health Organization, 'Social Networking Postcards: Be Kind (COVID-19)', PAHO/WHO, 2020.

Pan American Health Organization, 'Social Networking Postcards: Prepare to Combat COVID-19', PAHO/WHO, 2020.

World Health Organization, 'Using a mask: social network postcards, animations and computer graphics', Infographic, WHO, 2020.

Pan American Health Organization, 'Social *Networking Postcards: Questions and Answers'*, PAHO/WHO, 2020.

ANNEXES

ANNEX I: Check list.

1. **Checklist before reopening schools**
2. **Checklist as part of reopening schools**
3. **Checklist with reopened schools**

ANNEX II: Together against the Coronavirus[11].



[11] UNICEF Venezuela poster

ANNEX III: Properly washing hands[12]



[12] UNICEF Colombia poster

ANNEX IV: The use of the mask[13]



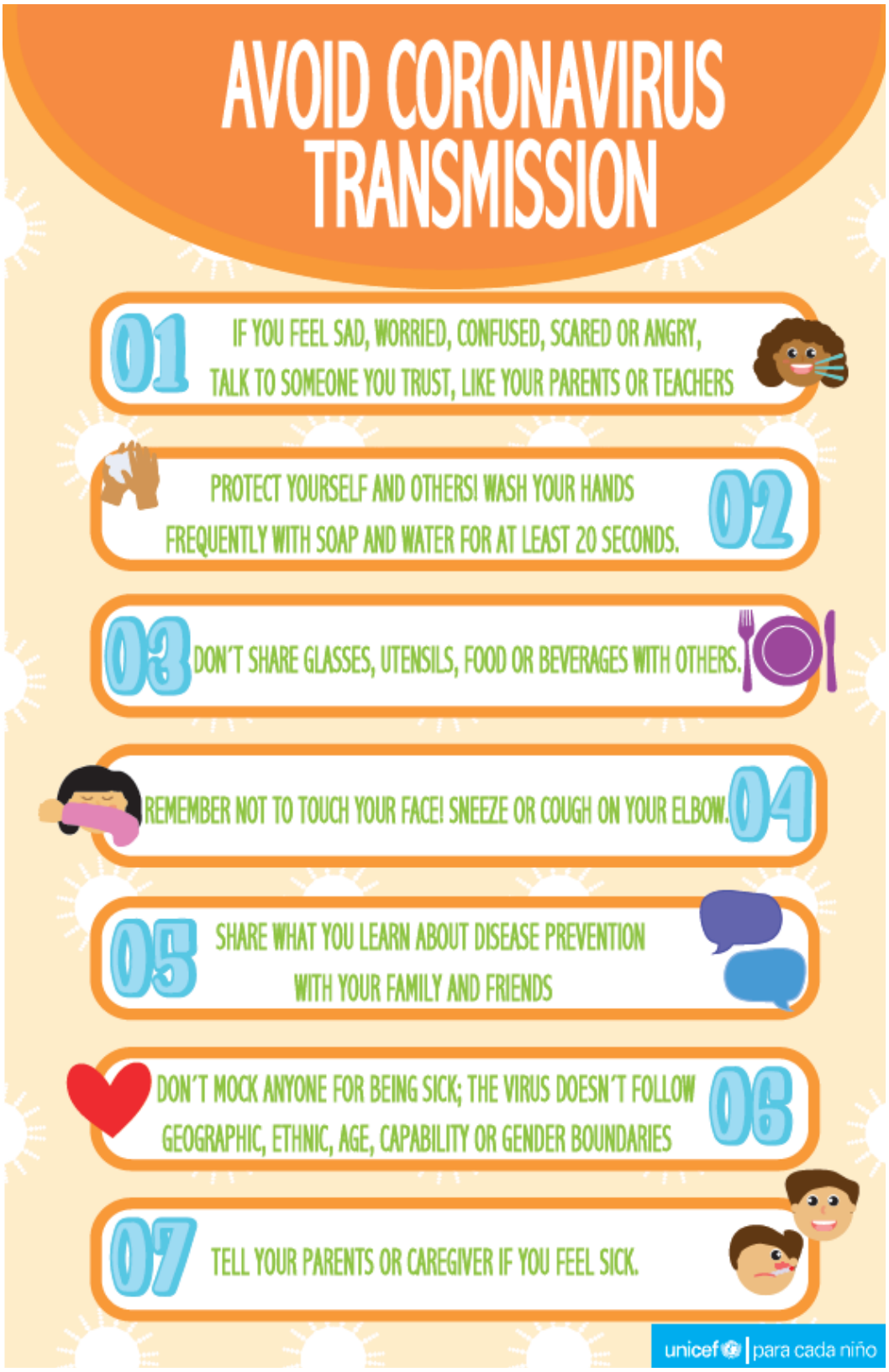
[13] UNICEF Perú flipchart

ANNEX V: Cleaning and disinfection[14]

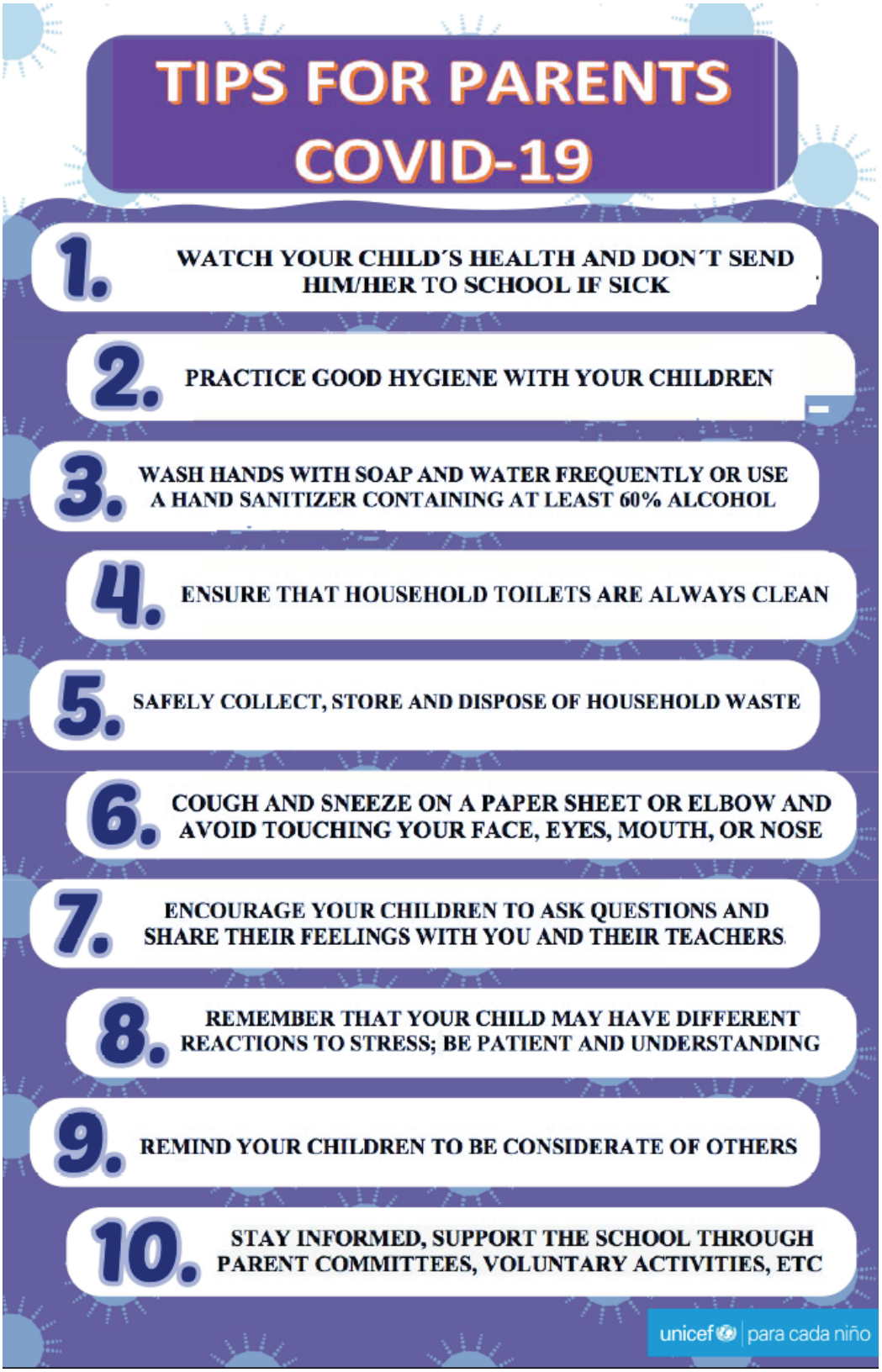
N°	Category	Product Description	Comments
1	Community	Toilet soap, bar, approx. 100-110 g, wrapped.	
2	Community / Hygiene	Hand sanitizer alcohol >60% 500 ml. with pump.	
3	Community	Information on hygiene and education, as well as on hand washing, cough and sneeze management, home cleaning, through communication materials such as: posters, stickers and brochures.	
4	Hygiene	Hand washing station (50-100 L. drum with tap, wood/metal support).	The hand washing station can also be used in meeting places (markets, etc.)
5	Hygiene	50 L drum with lid for preparation/ storage of chlorine solution. 20-liter bucket with lid for preparation/storage of chlorine solution.	
6	Hygiene	Cleaning/disinfection kits (commercial disinfectant, detergent, mops, buckets, brushes, latex gloves, cleaning brush, etc.)	
7	Hygiene	Powdered laundry detergent, 5 k.	
8	Hygiene	Powdered lime.	
9	Hygiene	65-70% Calcium Hypochlorite.	Used to disinfect drinking water.
10	Hygiene	12 L sprayer.	
11	Hygiene	20 L. backpack sprayer.	
12	Sanitation	Latrine griddle, plastic, without tray, 120x80 cm.* 4x5 m canvas.	In case you urgently need more bathrooms on the premises.
13	Sanitation	Pump for the extraction of sludge.	To ensure proper emptying of pits and septic tanks, when necessary, in the absence of truck service for the extraction of sludge.
14	Water	Water tank, rigid, polyethylene, 500 L. -> 2.000 L. Water tank, collapsible, 1,500 L. *	To ensure sufficient water storage in areas with irregular water service.
15	Water	20 L bucket with lid and tap, with wooden/metal support.	

[14] Table from the document *Guidance for COVID-19. Prevention and Control in Schools. Supplemental Content A: Cleaning and Supply Recommendations* by UNICEF.

ANNEX VI: Advice for children and adolescents.



ANNEX VII: Advice for parents and caregivers.



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