

We are at a crossroads.

As leaders with the very important role of making decisions that affect children's lives in a very real and tangible way, I want to thank you for everything you have done up until now in the interest of our children's wellbeing and education.

Today, I urge each of you here to consider how you as an individual can play a meaningful role in saving our children from further suffering and damage by taking meaningful action to get our kids in back in live school now.

There is little debate that our children as a whole are suffering immensely. Beyond the learning deficits caused by CDL, the psychological and physical damages are enormous. Our children and teens are spending hours each day cooped up, eyes bleary from staring blankly at screens for hours on end, their muscles and minds atrophying before us. Many are spending hours each day crying, screaming, experiencing panic attacks, laying in bed with depression and the lack of will to push on. We know others are experiencing the atrocities of child abuse at the hands of those in their homes and without the traditional reporting mechanisms of school and teachers to see the warning signs. We are failing a generation.

My 12-year-old daughter, on paper, looks like she is faring ok. Her grades are high. However, she is experiencing extreme panic attacks daily. Her mental health is spiraling downwards daily.

Are we going to go down in the history books as a community who held the wellbeing of our children in the highest regard? Or are we going to go down as having sacrificed our children at the alter of politics and fear-based demands from the unions?

Are we going to be known for placing courage over fear?

Are we going to bear witness to the great suffering of an entire generation and take action to alleviate that suffering? Or are we going to be deafened by the what-ifs of fear?

Are we going to be guided by the data or are we going to be ruled by emotions?

We are at a crossroads.

On Tuesday, federal health officials weighed in with a call for returning children to the nation's classrooms as soon as possible, saying the "preponderance of available evidence" indicates that in-person instruction can be carried out safely as long as mask-wearing and social distancing are maintained.

Are we going to heed the council of public health experts, physicians (pediatricians), child psychologists, child advocates and some leading educators who share the consensus that schools should be the last to close and the first to open when shutdowns are necessary?

We say that our children are resilient, they're rising to the occasion. But let us ask ourselves, why? The answer is that we're asking them to protect us. Asking them to make us feel safe.

Let's never ask our children to make us feel safe, and never ask our children to stand in front of us in combat. We're asking our kids to do that now. We're the adults, the grownups in the community....We

need to stop asking the children to take one for the team. We're in this together for them. They're not in this for us.

The district, the parents, the union – we need to all work together now and get our kids in school safely.

This is how we protect our children, how we get them back where they are safest and how we overcome all of the damage that has been done. This is how we show up as leaders for the next generation.

Thank you,

Jenna Degen

Parent of a middle and high schooler (Beaumont and Grant)

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Latest evidence to support return to school now:

<https://www.nytimes.com/2021/01/26/world/cdc-schools-reopening.html>

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"Back in August and September, we did not have a lot of data on whether or not we would see the same sort of rapid spread in schools that we had seen in other high-density work sites or residential sites," Dr. Honein said. "But there is accumulating data now that with high face mask compliance, and distancing and cohorting of students to minimize the total number of contacts, we can minimize the amount of transmission in schools."

The call by Dr. Honein and other officials reflects a consensus among some leading educators and public health experts that schools should be the last to close and the first to open when shutdowns are necessary.

From Journal of American Medicine:

<https://jamanetwork.com/journals/jama/fullarticle/2775875>

As many schools have reopened for in-person instruction in some parts of the US as well as internationally, school-related cases of COVID-19 have been reported, but there has been little evidence that schools have contributed meaningfully to increased community transmission.⁴ A case-control study of exposures among children aged 0 through 18 years with (n = 154) and without (n = 243) SARS-CoV-2 infection in Mississippi found that having attended gatherings and social functions outside the home as well as having had visitors in the home was associated with increased risk of infection; however, in-person school attendance during the 14 days prior to diagnosis was not.⁵ In the fall of 2020, 11 school districts in North Carolina with more than 90 000 students and staff were open for in-person education for 9 weeks.⁶ During this time, within-school transmissions were very rare (32 infections acquired in schools; 773 community-acquired infections) and there were no cases of student-to-staff transmission. Similarly, in a report released by CDC on January 26, 2021, with data from 17 K-12 schools in rural

Wisconsin with high mask adherence (4876 students and 654 staff), COVID-19 incidence was lower in schools than in the community.⁷ During 13 weeks in the fall of 2020, there were 191 COVID-19 cases in staff and students, with only 7 of these cases determined to result from in-school transmission.

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