With Connecticut public schools set to reopen in the coming weeks, debate over whether kids can safely return to the classroom revolves around a complicated and much-debated question: How likely are children to get sick from — or spread — the coronavirus?

There are some things about kids and COVID experts know for sure. It’s clear, they say, that children can contract the virus and can get sick and even die from COVID-19, as well as the related condition multisystem inflammatory syndrome in children.

It’s also clear that kids don’t tend to get as sick, or die as frequently, from the coronavirus as older adults do.

But experts are still gathering information on the role children plan in spreading the virus — and studies show they may be highly contagious, even if they appear asymptomatic.

A Korean study found children older than 10 can spread the virus as easily as adults. And researchers at Boston’s Massachusetts General and MassGeneral Hospital for Children found that children carry a high viral load of COVID-19, meaning they can be contagious whether or not they grow sick from the disease.

“We’re still trying to figure out what the overall role of kids are in the bigger picture,” said Dr. David Banach, an epidemiologist at UConn Health.

“Given the unknowns, I would be a little more cautious with kids who are around older individuals given the possibility the kids might be able to spread COVID to higher-risk individuals,” he said.

Can COVID-19 infect kids?

According to data from the state of Connecticut, 810 children under age 10 have been diagnosed with COVID-19 during the pandemic, the fewest of any age group and only about 1.5% of the state’s total cases.

Still, the share of cases in that demographic has grown recently as the disease has increasingly affected young people. Numbers released Aug. 13 showed that over the previous seven days, 27 people under age 10 had been diagnosed with COVID-19, representing about 6% of the state’s cases in that period.

From early in the pandemic, it has been clear that young people are not as likely to suffer serious symptoms from COVID-19 as their elders and are far less likely to die from the disease.

But that doesn’t mean they can’t be infected. A new review from the American Academy of Pediatrics and Children’s Hospital Association found that at least 97,000 children had tested positive for the coronavirus in the last two weeks of July alone.

Dr. Tom Balcezak, chief clinical officer at Yale New Haven Hospital, said young people may be under-counted in official case numbers because testing resources have disproportionately gone toward individuals with serious symptoms, who tend to be older. Recent guidance from the U.S. Centers for Disease Control and Prevention echoes that concern, adding that COVID-19 symptoms in children may mirror symptoms of more common ailments, making it harder to diagnose the illness.

“There is not immunity in any age group to this disease,” Balcezak said.

Dr. John Schreiber, the chief of infectious disease at Connecticut Children’s Medical Center, said the hospital has admitted about 25 children who tested positive for COVID-19 and had serious enough symptoms to warrant a hospital stay. Most children don’t get very ill, he said, but certain underlying medical conditions such as obesity, diabetes and a compromised immune system predisposes children — especially older children — to serious illness.

There have been a handful of deaths among children across the country, Schreiber said. According to state data, Connecticut has seen two deaths of people under the age of 20. Across the country, there have so far been 82 coronavirus deaths among children, according to the CDC.
It’s a blessing in that the children don’t seem to get as sick as elderly adults, but they can get sick and they can end up in the hospital,” he said.

Can kids spread COVID-19?
One recent study from South Korea suggested children under age 10 are less likely to spread the disease within their families but also found older children can spread coronavirus at the same rate as adults. Experts note that other studies have shown different results and say it’s simply too early to know for sure.

“They definitely can get infected. They definitely can excrete virus. We don’t know their role in spreading it through the community,” Schreiber said. “We don’t know the answer to that.”

The researchers at Boston’s Massachusetts General and MassGeneral Hospital for Children found some children have high levels of COVID-19 in their airways despite mild symptoms or none at all. This suggests, the researchers say, that kids are capable of spreading the disease.

“Some people thought that children might be protected,” researcher Alessio Fasano told the Washington Post. “This is incorrect. They may be as susceptible as adults — but just not visible.”

In large part because of the possibility of children spreading the virus to others, the state’s largest teachers union is calling for a two-week delay in school reopenings, The Courant previously reported. The Connecticut Education Association is pushing for an extension of remote learning, which doesn’t carry the risk of community coronavirus spread.

“The state must revise school reopening plans to protect our school communities, especially in light of new reports confirming that children can readily transmit COVID-19 and may be drivers of the pandemic,” said CEA President Jeff Leake in a statement.

What about MIS-C?
In addition to typical COVID-19 cases, Connecticut has seen at least a few dozen occurrences of multisystem inflammatory syndrome in children, a rare disease linked to the coronavirus. Patients with MIS-C can experience a high fever; a rash; redness around the eyes; swelling of the face, hands and feet, achiness and severe diarrhea, abdominal pain and cramps.

Schreiber said children start falling ill with the condition about a month or a month and a half after COVID-19 sweeps through a community. Children with the condition also have antibodies to the coronavirus, Schreiber said, indicating that they were infected with the virus at one point.

So far, medical experts have only a basic understanding of the condition, and no way to predict which children will fall ill.

“We don’t how to predict which kid will get that condition,” Schreiber said. “It’s one of the challenges with COVID overall. ... It’s a very unpredictable virus.”

Schreiber said that Connecticut Children’s treated three children with confirmed MIS-C and another with suspected MIS-C. He declined to say how many of those children recovered.

Yale New Haven has treated 40 children for the syndrome, Balcezak said last week, all of whom have now been released from the hospital.

“All of them have done well,” Balcezak said.

Other states have seen some MIS-C deaths. In Louisiana, for instance, the department of health reported Monday that four children have died of the condition. In New York, three children had died of the condition by mid-May.

But in Connecticut, most children diagnosed with MIS-C seem to have made a full recovery.

“Fortunately almost all recover without long-term consequences that we’re aware of,” Banach said. “But we’re still learning as far as which kids are susceptible to it, why some kids develop it and others don’t, and trying to understand whether there are long-term implications for the people who develop that syndrome.”

Is it safe to reopen schools?
For weeks, parents, teachers and officials in Connecticut have debated whether the state’s low number of COVID-19 infections means it’s safe for public schools to reopen for in-person learning.

The developing understanding of the science surrounding kids and COVID-19, Banach said, make back-to-school decisions especially complicated. Even if kids don’t typically become as sick from the coronavirus as older adults do, they may or may not be likely to spread the virus to others in their households.

Plus, children infected with COVID-19 are often asymptomatic or have symptoms that resemble the flu or strep throat, according to the latest guidance from the CDC. That means a child who doesn’t appear to be sick with COVID-19 could be spreading the virus.

“Kids going back to school is important, but it has to be done in a safe and thoughtful manner,” Banach said.

Schreiber said he personally feels that Connecticut’s low rate of community spread makes it reasonable to open schools back up — assuming the schools take precautions such as spacing children out and requiring them to wear masks.

But even with those measures in place, Schreiber said there’s an extremely high chance that there will be some COVID-19 outbreaks.
In my view, there probably will be a few cases in the schools, but I don’t think it will be dramatic as it has been in other states,” he said. “If there’s any community spread at all, there’ll be some cases.”

Gov. Ned Lamont has encouraged districts to reopen their classrooms, arguing that doing so would benefit students’ social development and help parents who work full time. During one press briefing with Lamont in mid-July, former FDA commissioner Scott Gottlieb suggested schools reopen in September for as long as is safe, then close again if the state confronts a second wave in late fall.

Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, recommended district-by-district decision-making.

“The default position should be to try as best as you possibly can to open up the schools for in-person learning,” Fauci said at a briefing with Lamont. But “the primary consideration should always be the safety, the health and the welfare of the children, as well as the teachers.”

How will schools track COVID cases?

When Connecticut’s schools reopen, parents and guardians will be expected to monitor their children for any symptoms of the coronavirus and to keep their children at home if they are exhibiting symptoms.

If and when cases do pop up in schools, local health departments will have the responsibility to trace them back and find any other people who may have been exposed to the virus — inside or outside of school. Public health departments are not only responsible for tracing COVID-19 cases in schools but also all COVID-19 cases outside of congregate living facilities such as nursing homes and jails.

The Courant previously reported that some local health departments worry that don’t have the staffing levels to keep up with the COVID-19 cases in their town, particularly if there’s a cluster or outbreak in a local school.

The Farmington Valley Health District Director Jennifer Kertanis said she’s “very anxious” about how school reopenings could affect contact tracing efforts.

But a number of health directors across the state say it is critical to work through the challenges and give kids the option to sit in a classroom again.

“We have a window to get kids in school, and I think we should take advantage of that window because we don’t know what the future holds with a potential second wave,” said Hartford health director Liany Arroyo.

COVID-19 RESOURCES FOR FAMILIES AND EDUCATORS

Meet Norm...
the COVID-19 Community Watchdog!

Norm is here to teach us some tricks to keep us as safe as possible.

- Norm is always learning new ways to protect himself and others. Norm is happy when you wear your mask because it helps to protect others, too.
- Norm knows that not all four-legged and two-legged friends have had their shots. Norm thinks you should keep your distance...at least six feet.
- Norm catches lots of things with his mouth but doesn’t want you to catch COVID-19. Norm knows best...keep your hands away from your face and wash them often with soap & water.
- Norm’s water bowl is refreshing but has lots of his germs floating in it. Norm says, “Drink plenty of water but don’t spread germs by sharing drinks.”
- Norm loves to get outdoors and take walks. Short ones. Long ones. Norm wants YOU to go for a walk or two today!

Let’s all make friends with the new NORM - the official “mask-ot” of ALL generations!
Adopt Norm and his healthy habits today at: normthedog.org

Preventing illness, promoting wellness, and protecting public health since 1973.
NDDH.ORG

GENHEALTH.ORG

This is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under the CARES Act. The content is that of the author(s) and does not necessarily represent the official views of, nor is an endorsement by, HRSA, HHS or the U.S. Government.
© 2020 Generations Family Health Center: Norm (in all formats) is the sole property of Generations Family Health Center. To make arrangements for rights/release licensing beyond what is detailed on normthedog.org, please email Allison W. Fenechman or chris@genhealth.org.
Stop The Spread

1. Wear A Mask
   Keep the covering on your face while out in public.

2. Stay 6 Feet Apart
   Keep space between yourself and everyone...everyone.

3. Wash Your Hands
   Scrub hands with soap and water for at least twenty seconds.

4. Get Tested
   Even if you have no symptoms, testing helps stop the spread.

www.ct.gov/coronavirus
Robin Brewer will be conducting a virtual support group in conjunction with the Norwich Youth and Family Services.

The virtual support group will be held: June 11th, June 25th, July 23rd, and August 27th.

Please contact Robin at 860-887-3561 ext. 124 for more information.

CAREGIVERS SUPPORT GROUP
[You Are NOT Alone!]

2020 Schedule

All support groups have been postponed until further notice.

If you have any questions please speak with Robin at 860-887-3561 ext. 124

Senior Resources
Agency on Aging

19 Ohio Avenue, Suite 2
Norwich, CT 06360
860-887-3561 / 800-490-6998
www.SeniorResourcesEC.org

This program is supported by Senior Resources-Agency on Aging with Title III funds made available under the Older American’s Act.
We hope you find the September edition of our Caregiver of Children newsletter informative.

Senior Resources currently produces a monthly caregiver of children newsletter. We are looking for feedback on any ideas you may have for future editions.

Please contact Robin Brewer with any ideas/suggestions or if you wish to be removed from our mailing list.

Robin Brewer: RBrewer@seniorresourcesec.org or 860 887-3561 x 124.

To read previous editions of this newsletter please visit: www.SeniorResourcesEC.org/stay-informed/grandparent-newsletter