

# Updated Interim Guidance for COVID-19 Prevention and Control in Schools V2

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## I. FACTS ABOUT COVID-19

### **What is COVID-19?**

COVID-19 is a disease caused by a coronavirus called SARS-CoV-2, linked to the same family of viruses as Severe Acute Respiratory Syndrome (SARS) and some types of common cold, 'CO' stands for corona, 'VI' for virus, and 'D' for disease.

### **What are the symptoms of COVID-19?**

Children and adolescents will often have no, or only mild symptoms similar to a cold. The most common symptoms are fever, dry cough and/or fatigue. Other symptoms can include sore throat, blocked or runny nose, sneezing and/or muscle aches. These symptoms are similar to seasonal flu (influenza), which is why it is important to confirm if someone has COVID-19 through testing.

### **Variants**

All viruses, including SARS-CoV-2, change over time. Most changes have little to no impact on the virus' properties. However, some changes may affect how easily it spreads, the associated disease severity and the effectiveness of vaccines, therapeutic medicines, diagnostic tools, or other public health and social measures against the virus. When these changes in the genomic makeup of the virus occur, they are known as "variants." WHO, in collaboration with partners, expert networks, national authorities, institutions and researchers monitor and assess the evolution of SARS-CoV-2 and use this information to inform the ongoing response to the COVID-19 pandemic.

### **How does COVID-19 spread?**

The virus spreads mainly between people who are in close contact with each other. The virus can spread from an infected person's mouth or nose in small liquid particles when they cough, sneeze, speak, sing or breathe. Another person can then contract the virus when infectious particles that pass through the air are inhaled at short range (this is often called short-range aerosol or short-range airborne transmission) or if infectious particles come into direct contact with the eyes, nose, or mouth (droplet transmission).

The virus can also spread in poorly ventilated and/or crowded indoor settings. This is because aerosols can remain suspended in the air or travel farther than conversational distance (this is often called long-range aerosol or long-range airborne transmission). People may also become infected when touching their eyes, nose or mouth after touching surfaces or objects that have been contaminated by the virus, although the risk of infection this way is considered very low.

### **Who is most at risk of severe illness and death?**

Older people, and people who are immunocompromised or have medical conditions such as diabetes, obesity and heart disease are more at risk of severe illness and death. Children with certain risk factors including cancer, diabetes, certain disabilities, and obesity are at higher risk of severe illness and death, but this is rare in this age group.

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## How can the spread of COVID-19 be slowed down?

As with other respiratory infections, public health measures are critical to prevent and slow the spread of infections. Public health measures are everyday preventive actions that include:

- Staying home when feeling unwell or if you test positive for COVID-19;
- Covering mouth and nose with flexed elbow or tissue when coughing or sneezing. Disposing of used tissue immediately in a closed bin;
- Wearing a mask when recommended<sup>1</sup>;
- Washing hands regularly with soap and water or hand sanitizer;
- Ensuring adequate ventilation (e.g. through opening windows and doors) and routinely cleaning frequently touched surfaces and objects;
- Keeping a distance where feasible;
- Keeping up-to-date on COVID-19 advisories from public health officials who may recommend additional or revised actions.

## What is the prevention of severe forms and treatment for COVID-19?

COVID-19 vaccines and medicines are being rolled-out globally to help prevent severe illness and death and many of the milder symptoms can be treated. Healthy children and adolescents are the lowest priority for COVID-19 vaccination because they are not at high risk of severe illness.<sup>2</sup> Vaccination of children, teachers and school staff should never be a prerequisite for in-person learning.

## II. INTRODUCTION

The outbreak of COVID-19 was declared a Public Health Emergency of International Concern (PHEIC) in 2020 and the virus has spread across the globe. Since then, schools have been closed for millions of learners as part of overall efforts to slow the spread of infection. This has led to devastating impacts on children and young peoples' learning, health and well-being.

Today, children and young people have voiced their opinions on the importance of education and in-person schooling during the COVID-19 pandemic and the negative effects of school closures on their overall well-being and mental health.

When and if public health authorities require the implementation of prevention and control measures to reduce the risk of COVID-19 in schools, the following mitigation measures can be included as part of a comprehensive approach by government. Schools should remain open even if all mitigation measures cannot be implemented as the benefits of in person learning outweigh the risks of COVID-19 for children and adolescents.

This document supports the continuity of in-person schooling and provides key messages and considerations for engaging school administrators, teachers and staff,

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parents, caregivers and community members, as well as children themselves in promoting safety, health and well-being in schools during the COVID-19 pandemic when public health authorities require prevention and control measures to reduce COVID-19 in schools.

This document is an update to the original interim guidance that was written by UNICEF, WHO and IFRC in March 2020 to reflect the current knowledge and understanding of COVID-19 and best practices in prevention and control in schools. This document is a living guidance and will be updated to reflect the latest understanding of COVID-19 as the pandemic evolves. It should be used in conjunction with the multi-agency Framework for Reopening Schools<sup>3</sup> which provide practical and flexible advice for national and local governments.

### **Impact of school closures on learners**

Even before COVID-19, the world was grappling with a learning crisis. Pre-pandemic data show that half of ten-year-old living in low- and middle-income countries were unable to read or understand a simple story. Today, this figure is estimated to have reached up to 70 per cent due to the learning lost to school closures.<sup>4</sup>

School closures have significant negative effects on the learning, mental health and overall well-being of children and adolescents. Recent data show today's school children will lose an estimated \$17 trillion in potential lifetime earnings due to COVID-19-related school closures.<sup>5</sup> COVID-19 has been associated with high rates of anxiety and depression among children and young people, with some studies finding that girls, adolescents and those living in rural areas are the most likely to experience these problems.

Prolonged school closures exacerbate these impacts, especially for the most vulnerable and marginalized who were less likely to access remote learning opportunities and are facing increases in violence against children, gender-based violence, child marriage, and teenage pregnancy, all of which increase the probability of missing further education.

For many children, schools provide an opportunity for social interaction where they can be supported by their peers and teachers. Schools offer a place of safety and nutrition and are a place where they can get structure and routine in their lives. School closures result in loss of access to a wide range of school-provided services such as school meals, health, nutrition, water, sanitation and hygiene (WASH) and services targeted to children with special needs such as learning support, speech therapy and social skills training.

To ensure education settings continue to be welcoming, respectful, inclusive, and supportive environments to all, care must be taken to avoid stigmatizing students and staff who may have been exposed to the virus. It is important to remember that COVID-19 does not differentiate between borders, ethnicities, disability status, age or gender.

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### **III. Key Messages & Actions for School Administrators, Teachers and Staff**

The following are key messages and actions which may not all be feasible in particular contexts. They should not be a barrier for children to receive in person learning.

#### **Basic principles**

The following basic principles can help keep students, teachers, and staff safer at school and help reduce the spread of COVID-19 as well as other diseases. Recommendations for healthy schools are:

- Students, teachers and other staff with symptoms or feeling unwell should not come to school.
- Provide water, handwashing stations or alcohol-based hand rub and follow standard cleaning procedures and encourage regular hand washing with cleanwater and soap, alcohol rub/hand sanitizer.
- Routinely cleaning school buildings including classrooms.
- Support adequate ventilation.<sup>6</sup> (e.g. through opening of window/doors at regular intervals)
- Support and prioritize teachers and school personnel to receive COVID-19 vaccines once frontline health personnel and high-risk populations are vaccinated.

#### **Know the latest facts**

Understand basic information about COVID-19 including its symptoms, complications, how it is transmitted and how to prevent or reduce transmission. Stay informed through reputable sources. Children want and need factual information around COVID-19. Use child-friendly and age- appropriate resources available in your country/region to respond to children's questions about COVID-19 accurately and based on available scientific evidence.

#### **Develop a plan for safer school operations**

Update or develop school emergency and contingency plans. Work with officials to guarantee schools are not used as isolation and/or quarantine centers, vaccination centers, treatment units, etc. Establish mitigation measures and/or consider holding outdoor community events and meetings that take place on school premises, based on risk.

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<sup>1</sup> <https://www.who.int/publications/i/item/WHO-2019-nCoV-ipc-guideline-2022.1>

<sup>2</sup> <https://www.who.int/publications/i/item/who-sage-roadmap-for-prioritizing-uses-of-covid-19-vaccines>

<sup>3</sup> <https://www.unicef.org/documents/framework-reopening-schools-supplement>

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## Masks

Policies on the use of masks in schools should be guided by the latest evidence. A link to the most recent guidance by WHO can be found [here](#). Mask use in children should be considered in the context of broader adjustments of public health and social measures, so that guidelines on when to use masks for school-age children are not more stringent than for adults. Policy and decisionmakers are encouraged to consider the following when implementing the use of masks for children in school settings<sup>8</sup> :

- No child should be denied access to education because of mask wearing or the lack of a mask;
- The views of teachers and educators on the perceptions of risks and time burden required to ensure mask adherence by children should be considered, while ensuring that national policies are followed;
- Situations where wearing a mask can significantly interfere with the learning process and have a negative impact on critical school activities such as physical education, meal programmes, play time and sports, as well as learning, require special consideration;
- Specific instructions and supplies should be provided for the safe handling, storage and availability of masks;
- A sufficient supply of appropriate masks should be ensured for all school children; and
- Mask breaks should be implemented when children are expected to wear masks for a long duration [ideally outside or in a well-ventilated space].

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<sup>4</sup> <https://www.unicef.org/press-releases/learning-losses-covid-19-could-cost-generation-students-close-17-trillion-lifetime>  
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<sup>5</sup> [Roadmap to improve and ensure good indoor ventilation in the context of COVID-19.](#)

<sup>6</sup> In areas where there is known or suspected community transmission of SARS-CoV-2, in indoor settings where ventilation is poor or unknown, even if physical distancing of at least 1 metre can be maintained; in indoor settings that have adequate ventilation when physical distancing of at least 1 metre cannot be maintained. (physical distance should be increased beyond 1 metre whenever feasible.

<sup>7</sup> <https://www.who.int/publications/i/item/WHO-2019-nCoV-ipc-guideline-2022.1>

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### Establish procedures if students or staff become unwell

Plan with local health authorities and school staff to update emergency contact lists. This could include mental health professionals and child protection authorities. Ensure a procedure for separating sick students and staff from those who are well – without creating stigma – and a process for informing parents/caregivers, and consulting with health care providers/health authorities wherever possible. Students/staff may need to be referred directly to a health facility, depending on the situation/context, or sent home. Share procedures with staff, parents and students ahead of time.

### Promote information sharing

Coordinate and follow guidelines from the national and local health and education authorities. Regularly share information with staff, caregivers and students, providing updated information on the disease situation, including prevention and control efforts required in school. Reinforce that caregivers should alert the school and health care authorities if someone in their home has been diagnosed with COVID-19 and keep their child at home. Ensure confidentiality. Utilize parent-teacher committees and other mechanisms to promote information sharing. Also be sure to address children's questions and concerns in a child-friendly manner.

### Monitor school attendance

Implement school absenteeism monitoring systems to track student and staff absence and compare against usual absenteeism patterns at the school. This is especially important for children who have not returned to school upon school reopening and/or after illness or illness of someone in the household, and to identify those at risk of dropping out who might require additional support. Alert local health authorities about large increases in student and staff absenteeism. Children's absenteeism may be linked with children experiencing severe distress and/or experiencing abuse, exploitation, or neglect at home. In close collaboration with health, social welfare and child protection authorities, schools can monitor and respond to children's health, mental health, and child protection needs in a timely manner.

### Adapt school attendance policies where appropriate

Develop flexible attendance and sick leave policies that encourage students and staff to stay home when not feeling well or when caring for sick family members. Discourage the use of perfect attendance awards and incentives. Identify critical job functions and positions, and plan for alternative coverage by cross-training staff. Plan for possible additional academic calendar changes, particularly in relation to breaks and exams.

### Focus on Learning Recovery

Schools should focus on learning recovery to ensure: All children and youth are back in school and receive the tailored services needed to meet their learning, health, psychosocial wellbeing, and other needs; Students receive effective remedial learning to address their learning losses; and all teachers are prepared and supported to address learning losses among their students and to incorporate digital technology into their teaching.



### Implement targeted health education for preventing COVID-19 infection

Integrate good overall education on preventing COVID transmission through infection prevention and control such as physical distancing, hand hygiene, respiratory etiquette, use of masks as part of daily activities and lessons and promote these practices in educational settings. Ensure content is age-, gender-, ethnicity-, and disability-responsive and activities are built into existing subjects.

### Educate Communities

Even before the COVID-19 pandemic, schools often served as information hubs for communities. In this time of uncertainty, when not only transmission rates in communities are fluctuating, but also our knowledge of what is safe is improving, the role of schools to educate communities is even more important. Minimizing disease transmission in schools requires that students and staff adhere to mitigation measures in school and in the community (see Communication with Stakeholders). Schools can communicate their expectations for maintaining mitigation measures when students and staff are not in school (for example, when using public transport or when socializing) and publicize policies of having students and school staff remain at home when sick.

### Address Mental Health/Psychosocial support needs

Encourage children to discuss their questions and concerns. Explain it is normal that they may experience different reactions and encourage them to talk to teachers if they have any questions or concerns. Provide information in an honest, age-appropriate manner. Guide students on how to support their peers and prevent exclusion and bullying. Teachers and other education professionals are well placed to offer each child the support they need during this time of adversity by providing them with opportunities to discuss their ideas and experiences related to the Covid-19 pandemic, helping them find ways to cope with the changing situation, providing accurate information around covid-19, and engaging children and caregivers in creating a welcoming and safe learning environment for all. Ensure teachers are aware of local resources for their own well-being. Work with school health workers/social workers to identify and support students and staff who exhibit signs of distress.

- Increase and diversify opportunities for children to socialize, play and interact with their peers, particularly after extended periods of school closure.
- Provide opportunities for students to discuss their ideas and experiences related to the COVID-19 pandemic.
- Offer students the possibility of having a one-to-one conversation with teachers/ school counselors to reconnect and discuss any concerns that might have arisen during the school closure period.
- Develop/adapt referrals and protocols to respond to students' mental health and psychosocial support needs.
- Provide learning opportunities and technical support for educators to strengthen their knowledge and capacities to promote their students' mental health and wellbeing.

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- Ensure that teachers' mental health and wellbeing are supported, this includes access to professional development opportunities and regular informal communication with teachers.

#### Support vulnerable populations

- Working with social service systems will ensure continuity of critical services that may take place in schools such as health screenings, feeding programs or therapies for children with special needs and protection-related services. Consider the specific needs of children with disabilities, and how marginalized populations may be more acutely impacted by the illness or its socioeconomic effects. Examine any specific implications for girls that may increase their risk of exclusion or drop out, such as responsibility for taking care of the sick at home (and provide links to services, care and support), or exploitation and violence when out of school.

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## CHECKLIST FOR SCHOOL ADMINISTRATORS, TEACHERS AND STAFF

- 1. Work with local authorities and health officials to ensure educational facilities are not used as treatment, vaccination, isolation or quarantine centers, as shelters or for any other non-educational purposes, even on a temporary basis.
- 2. Promote and demonstrate regular hand washing and positive hygiene behaviours and monitor their uptake.
  - Ensure soap and safe water is available at age-appropriate hand washing stations.
  - Encourage students and staff to clean hands.
  - Place hand sanitizers in toilets, classrooms, halls and near exits where possible.
- 3. Routinely clean school buildings, classrooms and water and sanitation facilities, particularly surfaces that are touched by many people. (railings, lunch tables, sports equipment, door and window handles, toys, teaching and learning aids etc.)
  - If there is an identified case of COVID-19, use sodium hypochlorite at 0.5% (equivalent 5000ppm) for disinfecting surfaces and 70% ethyl alcohol for disinfection of small items, and ensure appropriate equipment for cleaning staff.
- 4. Increase air flow and ventilation where climate allows (open windows, doors and use air conditioning where available ensuring the setting does not recycle air, etc.)
- 5. Post signs encouraging good hand and respiratory hygiene practices
- 6. Follow guidance on mask use (see above).
- 7. Establish a system for disposal of used disposable masks to reduce the risk of contaminated masks being disposed of in classrooms and playgrounds.
- 8. Ensure trash is removed daily and disposed of safely.
- 9. Get vaccinated when it is available to you in order to help protect yourself from severe illness and to help keep healthy so you can continue the inspiring work you do in the classroom and the school.
- 10. Monitor School Attendance regularly and support the most marginalized children.
- 11. Restart Comprehensive Services like health, nutrition and protection.
- 12. Ensure children, adolescents, and teachers' mental health and psychosocial well-being is promoted and protected.
- 13. Focus on Learning Recovery and support teachers to implement programmes on learning, prioritise and implement catch-up programmes.

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## **IV. PARENTS/CAREGIVERS AND COMMUNITY MEMBERS**

### Key Messages and Actions

#### Know the latest facts

Understand basic information about COVID-19, including its symptoms, complications, how it is transmitted and how to prevent transmission. Stay informed about COVID-19 through reputable sources. Be aware of fake information/myths that may circulate by word-of-mouth or online.

Recognize the symptoms of COVID-19 (e.g. sore throat, blocked or runny nose, cough, fever, sneezing, muscle ache and fatigue, shortness of breath) in your child  
Seek medical advice by first calling your health facility/provider and then take your child in, if advised. Remember that many children are asymptomatic and symptoms of COVID-19 such as cough or fever can be similar to those of the flu, or the common cold. If your child is unwell, keep them home from school as advised by your health provider and in line with protocol and notify the school of your child's absence and symptoms. Where possible request reading and assignments so that students can continue learning while at home. Explain to your child what is happening in simple words and reassure them that they are safe.

#### Keep children in school

It's best to keep your child in school—unless a public health advisory or other relevant warning or official advice has been issued affecting your child or school.

#### Help children cope with the stress

Children may respond to stress in different ways. Common responses include having difficulties sleeping, bedwetting, having pain in the stomach or head, and being anxious, withdrawn, angry, clingy or afraid to be left alone. Respond to children's reactions in a supportive way and explain to them that they are normal reactions to an abnormal situation. Listen to their concerns and take time to comfort them and give them affection, reassure them they're safe and praise them frequently. If possible, create opportunities for children to play and relax. Keep regular routines and schedules as much as possible, especially before they go to sleep, or help create new ones in a new environment. Provide age-appropriate facts about what has happened, explain what is going on and give them clear examples on what they can do to help protect themselves and others from infection. Share information about what could happen in a reassuring way. Be aware of your own stress levels and how they may impact on your children.

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## CHECKLIST FOR PARENTS/CAREGIVERS & COMMUNITY MEMBERS

Children rely on their parents to provide a sense of safety and security, particularly during difficult times. Check in with them about how they feel, be patient and understanding, support them with any transitions, and be attentive to changes in their behavior and mood. Maintain communication with teachers to follow up on your child's wellbeing and learning.

- 1. Monitor your child's health and keep them home from school if they are unwell.
- 2. Teach and model good hygiene practices for your children.
  - Wash your hands with soap and safe water frequently. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water, if hands are visibly dirty.
  - Cough and sneeze into a tissue or your elbow and avoid touching your face, eyes, mouth, nose.
- 3. Encourage your children to ask questions and express their feelings with you and their teachers. Remember that your child may have different reactions to stress; be patient and understanding.
- 4. Prevent stigma by using facts and reminding students to be considerate of one another.
- 5. Coordinate with the school to receive information and ask how you can support school safety efforts. (through parent-teacher committees, etc.)

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## V. STUDENTS AND CHILDREN

Children and young people should understand basic, age-appropriate information about coronavirus disease (COVID-19), including its symptoms, complications, how it is transmitted and how to prevent transmission. Stay informed about COVID-19 through reputable sources. Be aware of fake information/myths that may circulate by word-of-mouth or online.

### CHECKLIST FOR STUDENTS AND CHILDREN

- 1. In a situation like this it is normal to feel sad, stressed, worried, confused, scared or angry. We are all adjusting to new ways of learning and interacting with others. Know that you are not alone, stay connected to loved ones. You can talk to someone you trust, like your parent or teacher, about your feelings. If things are getting out of control or are so overwhelming that you think you cannot deal with your daily routine, look for professional support. Take care of your physical and mental health and help others to do the same and talk to someone you trust, like your parent or teacher so that you can help keep yourself and your school safe and healthy.
  - Ask questions, educate yourself and get information from reliable sources.
  
- 2. Protect yourself and others.
  - Stay home if you have symptoms or are not feeling well. If you feel sick at school, tell a teacher. Tell your parents, another family member, or a caregiver if you feel sick, and ask to stay home.
  - If a face mask is required, follow the rules for wearing and disposing of masks.
  - Wash your hands, always with soap and water for at least 20 seconds or with hand sanitizer.
  - Do not share cups, eating utensils, food or drinks with others.
  
- 3. Be a leader in keeping yourself, your school, family and community healthy.
  - Share what you learn about preventing disease with your family and friends, especially with younger children
  - Model good practices such as sneezing or coughing into your elbow and washing your hands, especially for younger family members
  
- 4. Treat everyone with kindness and respect; remember that the virus doesn't follow geographical boundaries, ethnicities, age or ability or gender.
  - For example, a teacher comes to school with a cold. They sneeze and cover their nose with their hand. They then shake hands with a colleague. They wipe their hands after with a handkerchief then go to class to teach. What did the teacher do that was risky? What should they have done instead?
    - If a face mask is required, explain and model the appropriate use, cleaning and disposal of masks
    - Introduce socio-emotional learning and other school-based mental

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health activities (mental health literacy, peer to peer support mechanism, teaching children breathing and relaxing exercises, teachers peer support groups, etc.) to support the mental health and psychosocial wellbeing of children and teachers; throughout and beyond the pandemic, including through periods of distance and hybrid learning.

### Lower and Upper Secondary School

- Make sure to listen to students' concerns and answer their questions.
- Emphasize that students can do a lot to keep themselves and others safe.
  - Focus on good health behaviors, such as covering coughs and sneezes with the elbow, washing hands and wearing face masks if recommended.
  - Remind students that they can model healthy behaviors for their families.
- Encourage students to prevent and address stigma.
  - Discuss the different reactions they may experience and explain these are normal reactions to an abnormal situation. Encourage them to express and communicate their feelings.
- Incorporate relevant health education into other subjects.
  - Science can cover the study of viruses, disease transmission and the importance of vaccinations.
  - Social studies can focus on the history of pandemics and evolution of policies on public health and safety.
  - Civics and citizenship education can underscore the importance of individual and collective behaviours and responsibilities in public health.
  - Media literacy lessons can empower students to be critical thinkers and makers, effective communicators and active citizens.
  - Introduce socio-emotional learning and other school-based mental health activities for adolescents throughout and beyond the pandemic, including periods of distance and hybrid learning. Ensure that there is a space for listening to adolescents' concerns and needs. Support adolescents to lead safe offline and online awareness-raising interventions, including the dissemination of reliable and context-specific information about COVID-19 and around adolescent mental health, among their peers and community networks.
  - If a face mask is required, explain and model the appropriate use, cleaning, and disposal of masks.
  - For example, a teacher comes to school with a cold. They sneeze and cover their nose with their hand. They then shake hands with a colleague. They wipe their hands after with a handkerchief then go to class to teach. What did the teacher do that was risky? What should they have done instead?

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- If a face mask is required, explain and model the appropriate use, cleaning and disposal of masks
  - Introduce socio-emotional learning and other school-based mental health activities (mental health literacy, peer to peer support mechanism, teaching children breathing and relaxing exercises, teachers peer support groups, etc.) to support the mental health and psychosocial wellbeing of children and teachers; throughout and beyond the pandemic, including through periods of distance and hybrid learning.

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  - If a face mask is required, explain and model the appropriate use, cleaning, and disposal of masks.



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