

**Testimony of David Zweig, Author and Journalist, Westchester County, New York,
United States House of Representatives Select Subcommittee on the Coronavirus
Pandemic Hearing “The Consequences of School Closures: Intended and Unintended”
Tuesday, March 28, 2023**

Good morning, and thank you Chairman Wenstrup, Ranking Member Ruiz, and Members of the Subcommittee for inviting me to testify today.

Since the spring of 2020, I have been researching and writing about the nexus of children and schools and COVID. I have conducted more than one hundred interviews with experts in the fields of infectious diseases, pediatrics, immunology, epidemiology, philosophy of medicine, education, economics, statistics, and psychology about this topic. I am currently writing a book for MIT Press, within which I explore and explicate the decision-making process behind school closures and related pandemic interventions that impacted children.

I would like to offer my overview of some of the consequences of school closures and learning interruptions during the pandemic.

The place to begin is by asking a question: is school an essential service? If the answer is yes then that means there is harm if it is denied to children.

In America, the option of free public school is a long-cherished right.

In March 2020, out of an abundance of caution, that right was taken away from more than 50 million children. The country was facing a novel and deadly virus and, in the eyes of many, this was a reasonable action.

Yet caution does not run in only one direction. Recognizing this, at the end of April and in early May, many schools throughout Europe began reopening. In the United States, however, with rare exception, they remained closed for the rest of the academic year.

While most of our focus will be on the effects of closures and interruptions that extended through the 2020/2021 school year, looking back to spring 2020 it can be easy for some to lose sight that three months of school closures was in itself unprecedented—and not without repercussions. It is worth noting that the effects we would see play out over the coming year already began to accrue that spring.

To take but one example: Dr. Jennifer Reesman, a neuropsychologist who works with disabled children in Baltimore, told me that not only did we close the schools that spring but, for many children, we shut down the in-person services that they relied on. Before the pandemic Dr. Reesman had one to two patients each year for whom she needed to develop a safety plan because they were at risk of self harm or suicide. In spring of 2020, she had to develop safety plans one to two times *every week*. There was one particularly horrible day when there were two suicidal children in back-to-back tele-health appointments. These children’s grim condition was not related to deaths of loved ones from Covid or fear of the virus. It was from the loss of social interaction and services—physical therapies, mental health counseling, the warmth of a teacher placing a caring hand on their back—that they depend on schools to provide. And it was the associated isolation, and, for some, chaos of a dangerous home or parents ill-equipped to care for them.

As remarkable as the spring closures were, in the fall of 2020, things took a more consequential turn. At the beginning of the academic year, millions of American children began going back to school, while millions of their peers did not. Within a short time schools in states such as Georgia and Florida, among others, had children attending all day, every day, while millions of children in California, Virginia, Maryland, and other states, did not step foot into a school building for more than a year.

There was wide variation of what was offered within states as well. A child could find herself in school full time, while her best friend down the block, in a different district, was confined to her bedroom, alone for hours each day, staring at a Chromebook. Notably, millions of children in private schools also attended in person while peers in the same cities and towns did not. Still other children were enrolled in a vast experiment of hybrid learning, where schools were listed as “open,” yet students attended only part time, some as little as one half-day each week.

I return to the initial question: is school an essential service? If you believe the answer is yes—as I do—then the circumstance I just described was baldly inequitable. For more than a year, our country denied an essential service to some children while providing it to others.

Of course schools themselves, even in the best of times, are vastly unequal. But when the option of school was taken away from only some children, it did not remedy whatever inequities that already existed. Rather, it exacerbated them.

An analysis by Valdimir Kogan and Stéphane Lavertu at Ohio State University¹ found that “districts with fully remote instruction experienced test scores declines up to three times greater than districts that had in-person instruction for the majority of the school year.” Moreover, their research showed that “disadvantaged students had disproportionate learning declines during the academic year.”

A paper by economist Emily Oster at Brown University, and co-authors², found that pass rates on standardized test scores during the pandemic declined compared to prior years, and that these declines were larger in districts with less in-person instruction. They found that passing rates in math declined by 14 percentage points on average, and they estimate this decline was 10 points smaller for districts fully in person. According to the paper, “changes in English language arts scores were smaller, but were significantly larger in districts with larger populations of students who are Black, Hispanic or eligible for free and reduced price lunch.”

A 36-page report by Dan Goldhaber at Harvard University’s Center for Education Policy Research, and co-authors³, based on data from more than two-million students in 10,000 schools, found that remote instruction was more prevalent among Black and Hispanic students, and that it was a primary driver of widening achievement gaps. They also found that high poverty schools spent more weeks in remote instruction during 2020-21 than low and mid poverty schools.

¹ “How the COVID-19 Pandemic Affected Student Learning in Ohio: Analysis of Spring 2021 Ohio State Tests”

² “PANDEMIC SCHOOLING MODE AND STUDENT TEST SCORES: EVIDENCE FROM US STATES” DOI 10.3386/w29497

³ Goldhaber, D. , Kane, T., McEachin, A., Morton E., Patterson, T., Staiger, D., (2022) The Consequences of Remote and Hybrid Instruction During the Pandemic. Research Report. Cambridge, MA: Center for Education Policy Research, Harvard University

Outside of academics, with the absence of numerical metrics from tests, the effects are harder to precisely quantify, though no less real. Perhaps the most heartbreaking consequence of school closures is the association with increased child abuse. Educators represent around twenty percent of all official reports of child abuse or neglect.⁴ When kids were prevented from attending school teachers were no longer able to act as a safety net for children being abused. Reports from New York⁵ to Chicago⁶ to California⁷, saw massive drops in reports of abuse. “They don’t have a way of telling people that something might be happening, and that really, really scares me,” said Dr. Norell Rosado, at Lurie Children’s Hospital in Chicago. At a Virginia safety center, calls plummeted by around seventy percent. And when they did get calls more of them were for injuries so horrific that it was because an adult had to seek medical help.⁸

Numerous studies have found that the isolation from peers and inactivity of remote learning had broad mental health consequences for children and teens. Assuredly, a much larger number of parents observed depression and anxiety in their kids that never reached a level of requiring medical attention and so was never officially documented.

The sedentariness of remote learning, and of canceled after school programs, may very well lead to lasting physical consequences for many children. A study published by the CDC found that the rate of body mass index (BMI) increase approximately doubled during the pandemic compared to a pre-pandemic period.⁹

A study¹⁰ by researchers from Johns Hopkins, Columbia, and other institutions found that during the period of December 2020 through April 2021, screen time for kids aged 4 to 12 increased by nearly fifty percent, from 4.4 to 6.6 hours per day, versus pre-pandemic levels. Children who are part of racial or ethnic minorities had more screen time than white kids, with Black children far and away faring the worst. Children with mothers who had the least amount of education also logged the most time in front of a screen. Alarming, the researchers found when reviewing data from a follow up period that screen habits that began with the lockdowns and school closures persisted even after a semblance of normal schooling and other activities had resumed for most kids.

Outside of studies are many far more nebulous effects. Many educators have observed worrisome behavioral changes in their students after they returned to school. More acting out, more bullying, and some students became more withdrawn, their personalities different from what they had been before. The lack of socialization during remote learning, and the grossly abnormal environment in the buildings—with mandatory masking, distancing, desktop barriers, and so on—deprived many young children and adolescents of interactions they needed to grow.

School closures also meant the end of organized sports. I spoke with a high school football coach in the New York metro area who has worked with many athletes who went on to play football in college.

⁴ <https://www.childwelfare.gov/pubpdfs/canstats.pdf>

⁵ “Reporting of child maltreatment during the SARS-CoV-2 pandemic in New York City from March to May 2020” 10.1016/j.chiabu.2020.104719

⁶ www.nbcchicago.com/news/local/doctors-fear-child-abuse-is-underreported-during-coronavirus-pandemic/2273364/

⁷ <https://www.latimes.com/california/story/2020-04-21/coronavirus-child-abuse-reports-decline>

⁸ <https://www.washingtonpost.com/education/2020/04/30/child-abuse-reports-coronavirus/>

⁹ https://www.cdc.gov/mmwr/volumes/70/wr/mm7037a3.htm?s_cid=mm7037a3_w

¹⁰ <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2801457>

Students, many from low-income homes and with few prospects, were counting on their senior year season as their ticket out of a bad situation. But no games meant no college scouts. Some of these boys simply disappeared, the coach told me.

It is impossible to quantify how life trajectories are altered by an infinite number of downstream effects. But although they cannot easily be quantified or even identified they are still real.

Lastly, harm should not only be calculated or considered through the lens of long-term effects. Children suffered in the present, and that alone matters. If you get food poisoning, and are on the floor of your bathroom throwing up all night, even if you ultimately recover and are fine, no one would argue that this wasn't still a bad experience. Harms are still endured even without literal or metaphorical scars.

Undoubtedly, for some children school closures were simply different but not, to their perception, worse than regular school. A small portion of children and families have even described remote learning as better than being in school. But, in the main, most children suffered in any number of quantifiable and unquantifiable ways. Again, despite all of its flaws, public school is an essential service and when it is denied to millions of children for a long stretch of time that is not without consequence.

Were the harms of the closures worth it?

Not surprisingly, at this point there are innumerable analyses of the impact on transmission from various nonpharmaceutical interventions (NPIs), including, specifically, school closures. One study, published in *Nature Medicine*¹¹, found that “SARS-CoV-2 incidence rates were not statistically different in counties with in-person learning versus remote school modes in most regions of the United States.” In the South, however, the authors found that counties with open schools had an increase of roughly 10 to 20 more cases per 100,000 people each week than those with hybrid or traditional in-person school.

Are—at the worst—10 cases out of 100,000 people a reasonable tradeoff for kids to be able to attend school? This is the type of question many policymakers did not address during the pandemic, but it is the type of cost benefit question I urge them to consider moving forward.

A limitation of nearly all of the evidence is that it is impossible to ever fully disentangle school closures from any number of other interventions or factors that may have influenced case rates. The *Nature Medicine* study exemplifies the ambiguity of evidence and the, at most, weak association of increased cases with open schools in much of the broader literature. The evidence regarding risk to teachers of open schools is similarly unimpressive. An early study out of Sweden, for example, found that teachers who were in school had no greater risk than average compared with other professionals. (Taxi drivers, as one comparison, were far higher than teachers.)

Regardless of where one falls on in-school transmission, it is important to note that even where in-person learning was offered, for a significant length of time most families had the option to keep their children out of school anyway. Their concerns about attending should not have prevented other children from going to school.

But even if schools were meaningful drivers of transmission—and, again, a wealth of evidence does not suggest that was the case—if they are essential for children's well-being that still does not mean

¹¹ <https://www.nature.com/articles/s41591-021-01563-8>

extended closures was the reasonable or ethical policy decision. In many areas, adults could congregate in bars and restaurants, gamble in casinos, or go shopping at the mall, while schools were closed. This differential suggests that school closures were not exclusively implemented, and extended for so long, simply out of concerns of community transmission.

School closures, and hybrid schedules, were not one decision, but a series of decisions, made by governors, mayors, school boards, and superintendents, that continued month after month. And the more time that passed, whatever theoretical benefit they initially conferred dropped while, conversely, their known harms to children grew.