

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

A: Cleaning and Supply Recommendations

Cleaning Recommendations

It is important to both clean and disinfect the school environment regularly. Cleaning and disinfecting are part of a broad approach to preventing infectious diseases in schools. Here is some information from the Centers for Disease Control

(<https://www.cdc.gov/flu/school/cleaning.htm>) to help staff understand the difference between **cleaning, disinfecting, and sanitizing.**

Cleaning removes germs, dirt, and impurities from surfaces or objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

Disinfecting kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Sanitizing lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements. This process **works by either cleaning or disinfecting** surfaces or objects to lower the risk of spreading infection.

Use and store all products safely. Pay close attention to hazard warnings and directions on product labels. Cleaning products and disinfectants often call for the use of gloves or eye protection. For example, gloves should always be worn to protect your hands when working with bleach solutions. Do not mix cleaners and disinfectants unless the labels indicate it is safe to do so. Combining certain products (such as chlorine bleach and ammonia cleaners) can result in serious injury or death.

Some studies indicate the use of bleach can lower immunity in children, it is essential to allow for bleach solutions to dry before children are exposed and to always ensure proper ventilation. (https://www.who.int/influenza/publications/public_health_measures/publication/en/)

Ensure that custodial staff, teachers, and others who use cleaners and disinfectants read and understand all instruction labels and understand safe and appropriate use. Ensure safety information, instructional materials and training are provided in appropriate and accessible languages for all involved.

Supply Recommendations

As schools often serve as integrated service platforms, schools should consider the following supplies in the categories of Water, Sanitation, and Hygiene (WASH). Most should be available through local procurement, those that may not be available locally are indicated with a * below. Non-formal learning centres should prioritize items 1-3.

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

	Category	Item Description	Comment
1	Community	Soap, toilet, bar, approx.100-110g, wrapped	
2	Community / Hygiene	Hand sanitizer Alcohol >60% 500ml w.pump	
3	Community	Hygiene Information, Education, Communication Materials on handwashing, cough and sneeze management, home cleaning (posters, stickers, leaflet)	
4	Hygiene	Handwashing Station (50-100L drum with tap, wooden/metal support)	Can also be used for handwashing stations in gathering places (markets, etc.)
5	Hygiene	50L drum with cover for chlorine solution preparation/storage 20L bucket with cover for chlorine solution preparation/storage	
6	Hygiene	Cleaning/disinfection kits (commercial disinfectant, detergent, mops, buckets, pails, brushes, latex gloves, cleaning squeegee, etc)	
7	Hygiene	Laundry powder, 5KG	
8	Hygiene	Lime powder	
9	Hygiene	Calcium hypochlorite 65-70%	Used to disinfect drinking water
10	Hygiene	Sprayer 12L	
11	Hygiene	Backpack sprayer 20L	
12	Sanitation	Squatting plate, plastic, w/o pan,120x80cm * Tarpaulin, 4x5m	In the event of facility requiring more toilets urgently
13	Sanitation	Desludging pump	To ensure adequate pit and septic tanks emptying when needed in the absence of desludging truck services
14	Water	Water tank, rigid, PolyEthylene, 500 L -> 2000 L Water tank, collapsible, 1500L *	To ensure sufficient water storage in areas with irregular water service
15	Water	20L Bucket with cover and tap, with wooden/metal support	

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

B: Contextualization, Dissemination & Implementation

Key Considerations

- ✓ Work through local mechanisms (national and sub-national authorities and school communities) to build capacity, disseminate and implement guidance/protocols, and to monitor and evaluate effectiveness.
- ✓ Utilize existing coordination mechanisms in both education and health, including national task forces, clusters, local education groups, etc., ensuring community participation while maximizing multi-sectoral cooperation with WASH and Child Protection.
- ✓ Contextualize guidance based on local strengths, risk factors and evolving health advice and public policies, with a focus on serving the most vulnerable

Contextualization

As COVID-19 is a new virus, we are still learning about transmission and mitigation. Contextualization will be critical to ensure prevention and control measures in school are reflective of and responsive to the latest medical evidence and changing local conditions. Furthermore, this general global guidance should be adapted to reflect cultural considerations, religious practices, diverse educational settings and the specific needs of vulnerable populations.

- Vulnerable populations may include: indigenous communities, children with disabilities, girls, poor children, children from socio-cultural-linguistic minorities, and children on the move (migrants, refugees, IDPs, asylum seekers).
- Consider how guidance will need to be adapted to non-formal and alternative education settings such as specialized schools (schools for the blind, etc.), madrassas, temporary learning spaces, early childhood centers, camp settings, residential schools or schools with dormitories.

Guidance should be reviewed by diverse, representative task teams who can make recommendations for adaptation based on existing school emergency management plans and the local context. These can then be submitted to educational authorities for approval and wide-spread adoption.

Dissemination

Develop **dissemination approaches** informed by local capacity and system efficiency and based on two scenarios, schools open and schools closed (preparing for re-opening).

Where schools are open:

- Work with education authorities to provide official communication on the adoption of school protocols to prevent and control COVID-19
- Display informative brochures and posters on key elements of the guidance at schools and make public announcements
 - Consider targeted guidance for different school audiences: custodial staff, food handlers, students, and teachers, placing guidance in cafeterias, staff rooms, toilets/latrines, etc.
- Provide dedicated trainings for school administrators, staff and teachers

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

- This can be a part of regular in-service training or through a dedicated training session
 - School leaders can be trained as trainers and then utilize a cascade method to train smaller groups of teachers and staff
- Provide orientations for parent committees, school management groups, etc. that involve the community
- Use existing student groups to promote information on safe, healthy behaviors, increase action to combat stigma and discrimination and awareness of resources in the community.
- For all groups, where large gatherings are discouraged, consider virtual or video trainings
 - Ensure information is accessible in relevant languages and adapted for the hearing or visually impaired as relevant

Where schools are closed:

- Work with education authorities to provide official communication on when, where and to what extent schools will be re-opening (particularly where school systems are opening in stages).
 - Share information well in advance and broadcast widely over all media outlets
 - Communications should be accessible in relevant languages and to the hearing/visually impaired
 - Communications should encourage the return to school of students previously out of school, of girls and any marginalized children/youth and explain precautions put in place to ensure staff and students are safe
- Systems should consider staggering school openings to test dissemination and implementation of protocols for COVID-19 prevention and control in schools.

Implementation

- Before schools are open, ensure they are thoroughly cleaned and disinfected
- Before students return to school, ensure staff and teachers are trained on operating procedures and orient parent committees, school management groups, and other bodies that involve the community (see training suggestion above in *Where schools are open*)
 - Consider mock drills for procedures when a staff or student are ill
- Have teachers orient students on new school protocols in each classroom, emphasizing what to do if they feel ill and promoting safe, healthy behaviors
 - Emphasize MH/PSS considerations, including combatting stigma and let students know where they can go for help
- Develop contingency plans to ensure continuity of learning and continuation of critical services
 - Plans should consider no/low tech options
 - Consider what technology can be utilized to support children and families in their homes such as eLearning platforms, radio, TV, telephone calls and messaging services (text message, whatsapp, etc)
- Monitor implementation for adoption, adherence, perceptions of safety and track school-based transmission where possible
 - Consider innovative messaging tools and social platforms such as U-report

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

C: Mental Health and Psycho-Social Support (MHPSS)

MHPSS Key Messages (adapted largely from the IASC Briefing Note on addressing MHPSS)

Schools are integrated platforms that support cross-sectoral efforts critical to the COVID-19 response. While MHPSS interventions are carried out through general health and child protection services, schools and other community structures also provide critical support to school communities, including Child Protection actors. Additionally, schools can address social stigma and discrimination and support children and their families who may suffer negative psychological impacts due to issues such as loss of schooling, fear, anxiety, or family members being in isolation.

School leaders, including teachers, play an important role in supporting MHPSS community activities such as: sharing key factual messages with students and their families; maintaining social contact with students who may be 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.

Key Considerations

- Ground MHPSS responses in the context. The pre-existing and ongoing issues within the school/community cannot be separated from the MHPSS response for COVID-19.
- Work with communities to identify and pro-actively reach out to children who may be marginalized from social networks such as those with disabilities, refugee and migrant children, minorities.
- Make MHPSS services accessible and adapt appropriately for the specific needs of children; those providing MHPSS should be mindful of the different risks and experiences faced by girls and boys and children with pre-existing medical conditions.
- Ensure inclusivity. Some population groups may experience barriers to accessing information, care and support if it is not provided in multiple and accessible formats and through inclusive channels.
 - Includes information in easy to read formats for low literacy audiences, Braille, large print, sign language, video with text captioning and accessible web content
 - For ethnic-socio-linguistic minority groups, information should be available in relevant languages
- Make sure remote learning mechanisms do not expose children to violence such as cyber bullying. Consider when caregiver/adult supervision may be needed (i.e. in cases where teachers have one on one sessions with learners)
- Train and support individuals providing MHPSS for children in schools and other community structures on the fundamental basis of protection from gender-based violence (GBV), protection from sexual exploitation and abuse (PSEA), reporting and referrals (see note below on protection from sexual violence during Covid-19).
- Address the mental health and wellbeing of teachers and other education personnel.
 - Peer support groups for teachers can offer social support during the response while sharing staff care information.
- Map existing MHPSS expertise and structures, including public and private education services, as a mechanism to pool, mobilize and coordinate resources (School counselors and nurses, staff at local health departments, etc.)

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

- Review and strengthen referral systems, particularly for severe cases.
 - Ensure providers are aware of other care services, including referral and services for GBV/PSEA.
- Share positive mental health messages and include other care messages as part of comprehensive public awareness campaigns to combat stigma, address excessive fears of contagion, and encourage the public to value and support frontline workers.
 - Work in collaboration with Child Protection, Health and C4D actors
- As part of a 'whole of society' approach, schools can consider promoting the following MHPSS activities:
 - promotion of self-care strategies, such as deep breathing exercises or other culturally relevant forms of relaxation
 - normalization messages about fear and anxiety and ways people can support others
 - clear, concise and accurate information about COVID-19.

Helping children deal with stress during the COVID-19 outbreak

- Teachers and care givers should engage in active listening and cultivate an understanding attitude with children.
- Collaborate with Child Protection actors to provide gender and age appropriate awareness messages to children about available care services including GBV/PSEA, and encourage them to express their needs, and seek support in a safe and ethical manner.
- Review [UNICEF's 6 ways parents can support their kids through the coronavirus disease \(COVID-19\) outbreak](#), psychologist's advice on how to help your children deal with the many emotions they may be experiencing now.
- Review UNICEF's 8 tips to help comfort and protect children [How to talk to your child about coronavirus disease 2019 \(COVID-19\)](#)

Resources

IASC Briefing note on addressing mental health and psychosocial aspects of COVID-19 Outbreak: <https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/briefing-note-about>

INEE Guidance Note on Psychosocial Support: https://inee.org/system/files/resources/INEE_Guidance_Note_on_Psychosocial_Support_ENG_v2.pdf

SAMHSA Talking with Children: Tips for caregivers, parents, and teachers during infectious disease outbreaks: https://store.samhsa.gov/system/files/pep20-01-01-006_508_0.pdf

Guidance Note: Protection of Children During Infectious Disease Outbreaks: <https://alliancecpha.org/en/child-protection-online-library/guidance-note-protection-children-during-infectious-disease>

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

D: Child Friendly Materials

Materials shared below are messages, activities and stories focused on COVID-19, prevention of disease transmission and promotion of healthy behaviors. They can be used as part of remote/distance learning and integrated into educational activities where/when schools are open.

Young Children (pre-school and primary school)

- Two instructional, **animated videos** from Sesame Street on how to wash your hands and how to sneeze and cough safely
<https://sesamestreetincommunities.org/topics/health-emergencies/?activity=time-to-wash-your-hands> and <https://sesamestreetincommunities.org/topics/health-emergencies/?activity=sneezing-and-coughing-safely>
- UNICEF Lebanon has three **animated videos** explain COVID-19, prevention and healthy habits
<https://www.youtube.com/playlist?list=PLuN7t8nV8p4ZpA3P4ZqMGJZNMx87VrEKf>
 - Arabic with French and English subtitles available
- Southend Learning Network, a social service provider, has a **story to color** about a family staying at home because of COVID-19 and their coping strategies
https://b8ccd561-4063-4e7a-91f3-e70ded17121c.filesusr.com/ugd/bbe3de_eebf4121a3b642859f614be5fd3e58b0.pdf
- Short **booklet** from Mindheart with worksheets <https://www.mindheart.co/descargables>
 - Available in many languages
 - Version from IFRC https://www.communityengagementhub.org/wp-content/uploads/sites/2/2020/03/COVID19_childrens-book_EN_FINAL.pdf
- BrainPOP has assorted **educational activities** (games, activities and quizzes) on an animated educational site, with a free lesson on hand-washing for younger children
<https://jr.brainpop.com/health/bewell/washinghands/>
- **Book** (e-book or printable) developed by the Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings (IASC MHPSS RG), *My Hero is You, Storybook for Children on COVID-19* is focused on COVID-19 prevention for children.
https://inee.org/system/files/resources/My%20Hero%20is%20You%2C%20Storybook%20for%20Children%20on%20COVID-19_0_1.pdf
- Peekaboo Kidz animated **video** explaining COVID-19 & safety measures
<https://www.youtube.com/user/Peekaboo>
- Scholastic Science Spin has a lesson on germs with multiple **education activities** that can be accessed online, downloaded or adapted.
<https://sciencespin2.scholastic.com/issues/2017-18/090117.html>

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

Lower Secondary & Upper Secondary School

- Voices of Youth is an organization set up by UNICEF to help children from across the world exchange knowledge and ideas. The **online platform** covers multiple issues related to COVID-19, including combatting stigma and mental health
<https://www.voicesofyouth.org/>
 - Young people can submit their own content
 - Available in Arabic, French, Spanish and English
- **E-book** (can download and print) from 1M (Indian healthcare platform) has two illustrated guides, *Coronavirus: No Panic Helpguide* and *Combating Coronavirus: An Action Guide* that explains COVID-19 and necessary precautions and an action guide (explains social distancing, quarantine, etc.) https://www.1mg.com/coronavirus-covid19?utm_source=dmg&utm_medium=lhsdweb&utm_campaign=covid19
- **Video** from Kurzgesagt – In a Nutshell, a science focused YouTube channel explains COVID-19 and prevention <https://www.youtube.com/watch?v=BtN-goy9VOY>
- **Video** episode on how germs spread from Mark Rober, a former NASA engineer with a science focused YouTube channel <https://www.youtube.com/watch?v=l5-dl74zxPg>
- BrainPOP has assorted **educational activities** (games, activities and quizzes) on an animated educational site, with a free lesson on COVID-19
 - Available in [English](#), [Spanish](#) and [French](#)
- Scholastic Magazine’s COVID-19 online lesson, *Sneeze Scientist*, includes an **article, video and worksheet** exploring how respiratory droplets spread disease
<https://classroommagazines.scholastic.com/support/coronavirus.html#grades612>

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

E: Protection of Children in and out of school in the context of COVID-19 pandemic

Education and Child Protection are complementary sectors, each contributing significantly to healthy development of children and their short- and long-term well-being. In the context of the Coronavirus pandemic (COVID-2019) Education and Child Protection actors should collaborate to ensure the well-being of children and their families – in schools, communities, and homes.

Supporting Children's Emotional Wellbeing

- Children often take their emotional cues from the important adults in their lives, so how teachers and caregivers respond to the crisis is very important.
- It is important that caregivers manage their own emotions well and remain calm, listen to children's concerns, speak kindly to them and reassure them, and establish a sensitive and caring environment around the child.
- Whether at school or at home, caregivers can help engage children in a creative activity, such as playing and drawing, to facilitate their ability to express and communicate negative feelings they may be experiencing in a safe and supportive environment, and thus help children find positive ways to express disturbing feelings such as anger, fear, and sadness.

In Schools (when and where open):

- Provide a safe space to support children dealing with the impacts of COVID-19 on their lives and address emerging issues such as social stigma and discrimination.
- Put mechanisms in place for students who require more specialized support as a result of the pandemic or due to pre-existing conditions.
- Create a sense of normalcy and routine in the classroom to help children deal with the uncertainties surrounding them.
- Train teachers and other school staff on signs of distress to enable them to identify and refer children and young people who may have specific child protection needs.
- Ensure teachers and volunteers have necessary knowledge and skills related to GBV risk mitigation, Prevention of Sexual Exploitation and Abuse (PSEA), child safeguarding, and safe referral practices.
- Develop and roll-out child-friendly complaints and feedback mechanisms.
- Develop, disseminate or display messages about child protection and GBV issues as well as available services including family tracing and reunification and case management.

In case of school closure:

- Support communities and families in fostering an environment that encourages continued education and growth for children and youth of different ages. This is particularly important in contexts with pre-existing conflict or high levels of violence.
- Make sure remote learning mechanisms do not expose children to violence such as cyber bullying. Consider when adult supervision may be needed (i.e. in cases where teachers have one-on-one sessions with learners).
- If possible, caregivers should maintain schoolwork, study or other routine activities that do not endanger children or go against health authorities. They can also help create new routines at home, including through learning, playing and relaxing.
- Advocate with government and private employers for flexible working arrangements for parents and caregivers to enable them to continue responsive care and education of their children.

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

- Teachers can play an important role in supporting children at home, for example by maintaining social contact with students through phone calls, text messages, or other virtual platforms.
- Ensure that protection and safety messages are delivered to parents and children in a way that limits panic and distress, is reassuring and encourages adherence to health messaging.

Protection from sexual violence: harassment and exploitation

Violence against children and adults can exacerbate during emergencies including disease outbreaks. For example, in previous public health emergencies, women and adolescent girls have become more vulnerable to coercion, exploitation, and sexual abuse.

The following actions should be implemented when ***schools/learning centres are open*** to mitigate increased risk of sexual violence and to respond to sexual violence during the COVID-19 response:

- Raise awareness and train teachers and volunteers working with children on protection from sexual violence: harassment and exploitation
- Ensure that teachers and volunteers read and sign code of conduct
- Ensure learning spaces have functioning confidential and safe reporting and referral mechanisms available to help children and adults (including female teachers/volunteers) who may experience sexual violence to seek support
- Raise awareness among teachers, volunteers and learners about the existing reporting channels, referral pathways and how to access support services
- Immediately link or refer children reporting cases of sexual violence to appropriate specialists: Child Protection, Gender Based Violence (GBV) and Health actors available. Ensure this is done as soon as possible or within 72 hours
- Ensure reported incidents of sexual abuse against children are swiftly addressed in a safe and confidential manner. Learn about the [GBV Pocket Guide](#) to support survivors in locations where there are no services.
- Work closely in collaboration with Child Protection actors to identify and address any potential risks of sexual violence against children
- Work closely with WASH actors to ensure gender-segregated facilities including toilets exist.

During ***school closures***, it is important to utilize alternative mechanisms as the support schools offer and the line of communication or reporting may be broken. Being confined at home could have additional safety risks especially for those who are already vulnerable and/or those who live in households where intimate partner violence and/or child abuse are occurring.

- Use remote learning modalities to also promote and provide support services and to disseminate protocols and referral pathways, working with protection and health specialists
- Also consult with Child Protection and Health specialists to integrate relevant content into core subjects, MHPSS, risk communication and life skills materials.

Key Resources

- Technical Note: Protection of Children during the Coronavirus Pandemic (<https://alliancecpha.org/en/COVID19>)
- How to support survivors of gender-based violence when a GBV actor is not available in your area <https://gbvguidelines.org/en/pocketguide/>

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

F: Accelerated Education as COVID-19 Response

COVID-19 has disrupted education systems and learning at an unprecedented level. When children and youth go back to school there will be an urgent need to recover lost learning. Accelerated Education is an important strategy to support children to make up for learning lost due to the pandemic and help integrate previously out-of-school children.

Accelerated Education (AE) is “a flexible, age-appropriate programme, run in an accelerated timeframe, which aims to provide access to education for disadvantaged, over-age, out-of-school children and youth. This may include those who missed out on or had their education interrupted due to poverty, marginalisation, conflict and crisis. The goal of Accelerated Education Programmes (AEPs) is to provide learners with equivalent, certified competencies for basic education using effective teaching and learning approaches that match their level of cognitive maturity.”

AE is an important strategy for connecting humanitarian, early-recovery and development programming. It contributes to the goals of (1) increasing equitable access to learning opportunities for hard-to-reach learners, both in humanitarian contexts and other settings, and providing them with validated and accredited non-formal learning pathways; and (2) increasing engagement with adolescents and providing pathways to secondary education, particularly for girls and young women.

The AEWG’s **10 Principles for Effective Practice** set a foundation to improve AE programme quality, design, implementation and assessment of results. If the principles are considered and applied, then AEPs will support learners to attain recognized qualifications in basic education. This will then enable learners to transition into formal education, other education or vocational training, or employment. While the long-term goal should be that AEPs meet all these Principles, it will not happen immediately and will require the involvement and coordination of different actors. The principles are as follows:

1. AEP is flexible and for over-age learners
2. Curriculum, materials and pedagogy are genuinely accelerated, AE-suitable and use relevant language of instruction
3. AE learning environment is inclusive, safe and learning-ready
4. Teachers are recruited, supervised and remunerated
5. Teachers participate in continuous professional development
6. Goals, monitoring and funding align
7. AE centre is effectively managed
8. Community is engaged and accountable
9. AEP is a legitimate, credible education option that results in learner certification in primary education
10. AEP is aligned with the national education system and relevant humanitarian architecture

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

AE Evidence Base

A review of recent evidence based on evaluations, reviews and other studies on AEPs globally was conducted in the first quarter of 2020. The review considers how AE is recognized at national levels (through policies, EMIS systems etc.) as an approach for supporting learning opportunities for out-of-school children and AE's impact on learning outcomes and girls' education. The following are some of the key findings:

- AEPs are an important lever for providing access to out-of-school children and youth (OOSCY) who would otherwise lack any other form of recognised learning. While in some contexts the numbers of OOSCY remain sizeable, AEPs, when delivered at scale and supported through and by government initiatives, can increase access.
 - Individual AEPs which manage to support large numbers of OOSCY often accomplish this using e-learning or distance-based platforms or through large-scale government supported initiatives using several implementing partners which target specific districts or groups of learners
- AEPs can act as a critical tool for increasing participation rates of out of school girls. In many contexts there are still significant gender-based barriers. Most programmes, even if not managing to achieve full gender equity, are able to make strides in a positive direction.
- AEPs with higher completion rates tend to be shorter-term programmes (typically one year) which then transition learners back into formal schooling at various intermediary points in the basic education cycle.
 - These programmes tend to have strong mechanisms for community mobilization, provide free and high-standard educational facilities and learning materials, use child-centred and participatory teaching methodologies, and monitor and follow up on learners' data, such as absenteeism, regularly.
- A strong body of evidence indicates that AEPs have significant impacts on students' literacy and numeracy skills. Several evaluations found that such improvements are significant in comparison to other groups of OOSCY or government school students in the same grade.

Tools from the Accelerated Education Working Group (AEWG)

All are available on the AEWG page at INEE unless otherwise indicated

<https://inee.org/collections/accelerated-education>

- AE Decision tree
- Accelerated Education 10 Principles for Effective Practice
- Programming Checklist
- Case studies
- Literature Review
- Mapping of global AE programs <https://data.humdata.org/organization/aewg>
- AE Monitoring and Evaluation Framework and Toolkit
- AE Review of Evidence (forthcoming in May 2020)

The AEWG is collecting AE curriculum from around the world to serve as global good for local adaptation and expedited development of context specific AE programs. In addition, they are

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplemental Content

collecting AE program tools such as registration and assessment tools. For more information about this effort or general inquiries related to the AEWG, contact Martha Hewison hewison@unhcr.org

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplementary Content

RECOMMENDED RESOURCES

As the COVID-19 situations continues to rapidly evolve, existing resources are being updated and new resources are continuously being developed. Many of the resources below are available in multiple languages or are in the process of being translated as of March 2020.

Collections

- Global Education Cluster <https://educationcluster.net/COVID19>
- INEE <https://inee.org/collections/coronavirus-covid-19>

Child Protection & MHPSS

- The Alliance for Child Protection in Humanitarian Action Guidance note: Protection of children during infectious disease outbreaks <https://alliancecpha.org/en/child-protection-online-library/guidance-note-protection-children-during-infectious-disease>
- The Alliance for Child Protection in Humanitarian Action Technical Note: Protection of Children during the Coronavirus Pandemic https://alliancecpha.org/en/system/tdf/library/attachments/the_alliance_covid_19_brief_version_1.pdf?file=1&type=node&id=37184
- IASC's Reference Group on Mental Health and Psychosocial Support's Briefing note on addressing mental health and psychosocial aspects of COVID-19 Outbreak <https://interagencystandingcommittee.org/system/files/2020-03/MHPSS%20COVID19%20Briefing%20Note%202%20March%202020-English.pdf>

Reaching and Engaging Specific Populations

- Care, Gender Implications of COVID-19 Outbreaks in Development and Humanitarian Settings <https://reliefweb.int/sites/reliefweb.int/files/resources/Gender%20implications%20of%20COVID-19%20outbreaks%20in%20development%20and%20humanitarian%20settings.pdf>
- IASC, Interim Guidance on Scaling-up COVID-19 Outbreak in Readiness and Response Operations in Camps and Camp-like Settings <https://interagencystandingcommittee.org/other/interim-guidance-scaling-covid-19-outbreak-readiness-and-response-operations-camps-and-camp>
- UNHCR Age, Gender and Diversity Considerations – COVID-19 <https://www.globalprotectioncluster.org/wp-content/uploads/UNHCR-AGD-Considerations-COVID-19-210320182.pdf>
- UNICEF, Considerations for Children and Adults with Disabilities https://www.unicef.org/disabilities/files/COVID-19_response_considerations_for_people_with_disabilities_190320.pdf
- UNICEF, Practical Tips for Engaging Adolescents and Youth <https://www.unicef.org/media/66761/file/Practical-Tips-on-Engaging-Adolescents-and-Youth-in-the-COVID-19-Response-2020.pdf>
- UNICEF, Quick Tips on COVID-19 and Migrant, Refugee and Internally Displaced Children (Children on the Move) <https://www.unicef.org/media/67221/file>
- The Sensory Project, COVID-19 educational resources include activities and content for children with special needs <http://www.thesensoryprojects.co.uk/covid19-resources>

GUIDANCE FOR COVID-19 PREVENTION AND CONTROL IN SCHOOLS

Supplementary Content

REFERENCES

- Centers for Disease Control <https://www.cdc.gov/coronavirus/2019-ncov/communication/guidance-list.html?Sort=Date%3A%3Adesc>
 - Guidance for Schools and Childcare Programs <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/>
 - NPIs <https://www.cdc.gov/nonpharmaceutical-interventions/>
 - School Cleaning <https://www.cdc.gov/flu/school/cleaning.htm>
 - School Readiness for Pandemic Flu <https://www.cdc.gov/nonpharmaceutical-interventions/pdf/gr-pan-flu-ed-set.pdf>
 - Teaching Resources <https://www.cdc.gov/flu/pdf/freeresources/updated/teachingchildrenflu.pdf>
- International Federation of the Red Cross and Red Crescent (IFRC) <https://media.ifrc.org/ifrc/emergency/global-covid-19/>
- UNICEF <https://www.unicef.org/coronavirus/covid-19>
 - Evaluation of UNICEF's Response to the Ebola Outbreak in West Africa 2014-2015 https://www.unicef.org/evaldatabase/files/UNICEF_Ebola_Evaluation_final_EO2016-010.pdf
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