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URGENT

Our ref. DJ Eloff / MAT3179

12 May 2020

Angie Motshekga

Minister of Basic Education

Sol Plaatjie House

222 Struben Street

Room TF1062

Pretoria

By email: mabua.s@dbe.gov.za
info@dbe.gov.za

Dear Minister Motshekga,

RE: DEAR SA // MINISTER OF BASIC EDUCATION

1. With reference to the above mentioned. We confirm that we act on behalf of Dear SA, a registered national not-for-profit company and civil rights organisation. Our client acts in the interest of its supporters as well as in the interest of the public through active participation and advocacy.
2. This letter is directed to the Minister of Basic Education.
3. The purpose of this letter is to support your position to reopen schools and provide evidence that children under the age of 10 should return to school on **1 June 2020**. As President Ramaphosa said during his 2018 State of

the Nation Address, *“if we are to break the cycle of poverty, we need to educate the children of the poor.”*

SCHOOL REOPENING ANNOUNCEMENT

4. On **30 April 2020** you announced that Grade 7 and 12 learners would be returning to school on **1 June 2020**. We gather that these grades were chosen on the basis that they are on the cusp of completing primary school and high school and deserve special consideration.
5. Children under the age of 10 (nursery school until Grade 4) are also in particular need of educational support and this letter provides reasons to include them in the group of children that return to school on **1 June 2020**.

RISKS POSED BY COVID

6. Our client and its supporters are committed to fighting the spread of this disease and welcome rational and just measures to achieve this goal.
7. The aim of slowing down the spread of the disease, “flattening the curve”, is to improve the health system’s ability to deal with cases requiring treatment. Flattening the curve does not necessarily mean fewer people will get infected and need treatment but rather spreading the inevitable infections out over time prevents the health system which has limited capacity and resources from becoming overrun.¹
8. The following table produced by the Actuarial Society of South Africa demonstrates the risks posed to South Africans by Covid-19.² It is evident that the risks are highly correlated with age and the risks are particularly low for younger children.

¹ Development of a Covid-19 Model for the Actuarial Society of South Africa, 1

² Development of a Covid-19 Model for the Actuarial Society of South Africa, page 14

Age-group (years)	% symptomatic cases requiring hospitalisation	% hospitalised cases requiring critical care	Infection Fatality Ratio
0 to 9	0.1%	5.0%	0.002%
10 to 19	0.3%	5.0%	0.006%
20 to 29	1.2%	5.0%	0.03%
30 to 39	3.2%	5.0%	0.08%
40 to 49	4.9%	6.3%	0.15%
50 to 59	10.2%	12.2%	0.60%
60 to 69	16.6%	27.4%	2.2%
70 to 79	24.3%	43.2%	5.1%
80+	27.3%	70.9%	9.3%

9. Lockdown measures cannot stop the virus from spreading, but they can slow down the speed of infections. Lockdowns will not save the lives of those who contract Covid-19 and do not require hospitalisation. They also do not save the lives of those who contract the virus and would sadly and regrettably succumb to the disease even if they gained access to an ICU bed. They only assist those who contract the virus and would survive if they were hospitalised but are unable to receive such care because the health system has been overrun.

Lower Risk to Children

10. DFTB have produced a survey of medical reports which examined the risks of Covid-19 to children. and those in contact with the children.

Following the initial epidemiological data released from China, it appeared children were significantly less affected by infection with SARS-CoV-2 than their adult counterparts. This was reflected both in total case numbers, but also severity, with very few cases in young children and no deaths in children under 10yrs in the initial report. This finding has been reproduced in subsequent data from other countries. Low numbers of childhood cases have been seen in the rest of Europe, as well as the USA, where 1/3 of childhood cases are in late adolescence. Some concerns exist that low case rates reflect selective testing of only the most unwell, however data from South

Korea and subsequently Iceland which have undertaken widespread community testing, have also demonstrated significantly lower case numbers in children. This has also been seen in the Italian town of Vo, which screening 70% of its population and found 0 children <10 years positive, despite a 2.6% positive rate in the general population.

More detailed information has emerged into childhood severity of COV- ID-19. A large number of children appear asymptomatic. Critical illness appears very rare (~1%). In Chinese and USA CDC data, infants appear most likely to be hospitalised, although rates of PICU admission do not appear to be significantly different as yet. To date, deaths remain extremely rare in children from COVID-19, with only a handful of reported cases.³

11. The survey also considers the risks of transmission posed by children to their families.

Notably, the China/WHO joint commission could not recall episodes during contact tracing where transmission occurred from a child to an adult. Studies of multiple family clusters have revealed children were unlikely to be the index case, in Guangzhou, China, and internationally. A SARS-CoV2 positive child in a cluster in the French alps did not transmit to anyone else, despite exposure to over 100 people.⁴

COVID-19 appears to affect children less often, and with less severity, including frequent asymptomatic or subclinical infection. There is evidence of critical illness, but it is rare. The role of children in transmission is unclear, but consistent evidence is demonstrating a lower likelihood of acquiring infection, and lower rates of children bringing infections into households.⁵

³ DFTB COVID-19 Evidence Review 3rd May 2020, page 4

⁴ DFTB COVID-19 Evidence Review 3rd May 2020, page 5

⁵ DFTB COVID-19 Evidence Review 3rd May 2020, page 8

THE IMPORTANCE OF EARLY LEARNING

12. Research in social sciences, neurosciences and psychology have shown the importance of early learning for later development.⁶ The first one thousand days in a child's life could hold the key to unlocking his/her life-long potential. By the age of 5, almost 90% of a child's brain will be developed. These are the formative years where factors such as adequate healthcare, good nutrition, good quality childcare and nurturing, a clean and safe environment, early learning and stimulation will, to a large extent, influence his/her future as an adult.⁷

13. It is also important to note that as is the case with many other Covid-19 regulatory interventions, the majority of people who are harmed the most through the continued closure of schools, creches and day care centres are the poor and vulnerable. Various schools, creches and day care centres provide valuable and often the sole daily source of nutrition for children from poor and vulnerable groups through feeding programmes. The continued closure of schools therefore takes away this source of nutrition from South African children.

14. Various non-governmental, non-profit and private schools, creches and day care centres care for children during the day while parents work. The continued closure of schools places further strain on these families during already difficult and challenging times.

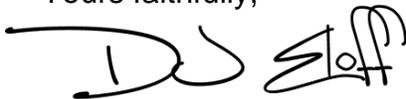
⁶ The Lancet's Early Childhood Development Series 2016: Advancing Early Childhood Development: from Science to Scale, published in October 4, 2016 is a special issue led by Prof. Linda Richter (University of Witwatersrand) which brings together the work of 45 authors from various fields such as neuroscience, psychology, paediatrics, biology, global health and economics.

⁷ StatsSA, Investing in early childhood development is the future

REQUEST

15. Children up to the age of ten are at a lowered risk of developing serious symptoms from Covid-19 and there is little evidence to suggest that they pose a significant threat of transmission to those they come in contact with. Depriving these young children of an education could have significant consequences for years to come.
16. Furthermore, essential workers with young children may be unable to work if there is no one at home to care of their children. Opening schools, creches and day care centres for these children will have the added benefit of freeing up more essential workers.
17. Our client trusts that it is the government's approach to follow a data driven approach to policy making and regulatory functions which take broad inputs into consideration. This letter is sent to your office in order to support the fight against Covid-19 whilst ensuring that children are provided with an ongoing education.
18. In light therefore our client requests that children under the age of ten are allowed to return to school, creches and day centres on **1 June 2020**.

Yours faithfully,



HURTER SPIES INC

Per. Daniël Eloff

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