



When determining whether to mandate universal masking in our schools, decision makers and community members should put children with disabilities and special health needs more squarely at the center of their decision making.

The pandemic has created havoc across the United States, and Vermont has been a beacon of hope for many, modeling what is possible in our country when we care about each other and work together to ensure the safety of our families, neighbors, and communities. However, as the state has “opened the spigot,” and a declared state of emergency no longer exists, schools have been left with “recommendations” and skimpy guidance on managing Covid cases. The Delta variant is clearly impacting the unvaccinated and, in some cases, those who have been vaccinated. Children under twelve years of age are not yet eligible for Covid vaccine, and won’t be for many weeks yet, according to the Food and Drug Administration (FDA).

Families of children and youth with special health needs or disabilities are anxious and afraid. Their loved ones are among “the most vulnerable Vermonters” that Governor Scott has repeatedly and passionately vowed to protect.

Reinforcing families’ concerns, a recent report from the Centers for Disease Control and Prevention (CDC) highlights the risk we run when we are not laser-focused on protecting *all* of Vermont’s children. According to the CDC, Covid-19 infection rates for adolescents aged 5 to 17 were as high as in adults 18 to 49, and higher than rates in adults over 50. The sharp spike in infection rates as the variant spreads, especially in recently reopened schools, is in clear contrast to early reports about the virulence of the Delta variant. School-based cases may be influencing infections in children, according to recent media reports. Cases among children 12 and under have risen from fewer than 20 to more than 30 per 100,000 people over the past two weeks in our state. Cases are highest among children ages 5 to 9, followed by those 4 and younger, with older children far below, according to Vermont’s statistical data.

Perhaps our decision makers are too reliant on early data and need to take more current information under advisement, as well as the strong recommendations from the American Academy of Pediatrics Vermont Chapter and other Vermont health experts, including Department of Health employees.

At the Vermont Family Network, we work with hundreds of families across the state, providing experienced family to family support, information, and training to meet the diverse needs of children and youth with disabilities and special health needs. The rise of the pandemic in 2020 was difficult for any family, but those we typically serve have experienced the loss of much needed resources to support their children, a deepening isolation, increasing and very real fears about adverse health impacts, and for some, difficult financial challenges, as well.

As the Delta variant emerged late this summer, we called on the administration to develop a statewide mandate for universal masking to protect all of Vermont's children. We are reiterating our position, reinforcing our earlier message to the Governor, the Agency of Human Services and Agency of Education Secretaries, and our Health Department Commissioner, Dr. Levine. We stand in support of the powerful public statements made by the American Academy of Pediatrics Vermont Chapter, Vermont Medical Society, Vermont Academy of Family Physicians, the University of Vermont Children's Hospital, some school Superintendents, and especially, families who are speaking out to say that recommendations are not enough.

We want Vermont's leaders to ensure continued universal masking in schools to prevent the spread of Covid-19 and promote a healthy, safe, and productive school year. It's clear from the science and the health experts what the right step is. Let's take that step, and journey forward together in support of all Vermont students and their families, especially the most vulnerable.