CORONAVIRUS ORIENTATION GUIDELINES FOR SCHOOLS

For Teachers,
Non-Teaching Staff
And Learners

On The Covid-19 Outbreak
In South Africa

Published by

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1. Background

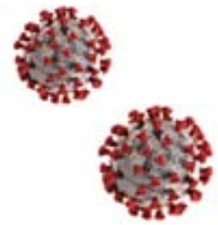
On 31 December 2019, the China office of the World Health Organisation (WHO) was informed that cases of pneumonia with an unknown cause had been detected in the city of Wuhan in China's Hubei Province. On 7 January 2020, the causative pathogen was identified as a novel (new) coronavirus (2019-nCoV). On February 11, WHO gave the disease an offical name: *Coronavirus Disease 2019*, abbreviated as *COVID-19*. 'CO' stands for 'corona', 'VI' for 'virus', 'D' for 'disease' and -19 for 2019.

South Africa is one of many nations that have taken drastic measures to curb the spread of the virus and limit the rate at which new infections are increasing.

***The whole world is affected by** COVID-19.*

These measures include:

- promotion of healthy hygienic practices (especially hand-cleansing) and the practice of social distancing
- prohibition of gatherings of more than 100 people
- closing our national borders and prohibiting non-citizens from entering the country
- repatriating South African citizens abroad and screening and testing returning international travellers
- limiting interprovincial travel
- promoting self-isolation
- quarantining those who show Covid-19 symptoms.



National Lockdown

On 16 March, President Cyril Ramaphosa announced the government's measures to curb the spread of COVID-19. These included the closure of schools from Wednesday, 18 March 2020.

The National Lockdown came into force on 26 March and remained in place until 30 April. On 23 April 2020 the President announced a new set of lockdown restrictions that took effect from 1 May. He explained that, in order to balance the need to resume economic activity with the continuation of measures to contain the virus and save lives, a new approach would be followed. According to this approach, the implementation of measures across the provinces are to be determined by the direction the pandemic is taking in the provinces and municipalities across the country. Five (5) COVID-19 Alert Levels were defined, as shown in Table 1.

To ensure the response to the pandemic is precise and targeted there will be a National Alert Level as well as separate Provincial, District and Metro Alert Levels.

ALERT LEVEL 5	ALERT LEVEL 4	ALERT LEVEL 3	ALERT LEVEL 2	ALERT LEVEL 1
Drastic measures to contain the spread of the virus and save lives. (Full lockdown)	Extreme precautions to limit community transmission and outbreaks, while allowing some activity to resume.	Restrictions on many activities, including at workplaces and socially, to address a high risk of transmission.	Physical distancing and restrictions on leisure and social activities to prevent a resurgence of the virus.	Most normal activity can resume, with precautions and health guidelines followed at all times. Population prepared for an increase in alert levels if necessary.

Table 1: Summary of COVID-19 Alert Levels

Whether you are an educator, learner, parent, public servant or community member, you have a key role to play in this orientation programme. Understanding what COVID-19 is, and knowing what steps we need to take to protect ourselves and each other, is vital.

Teachers, non-teaching staff and learners all have their own roles to play in the day-to-day operations of schools during the COVID-19 pandemic. Whatever the local circumstances may be, each school is required to ensure compliance with the National, Provincial and Municipal Alert Levels. To achieve this, a diversified approach is required. It is hoped that this Orientation Programme will empower teachers, non-teaching staff and learners with useful information about their own personal roles and responsibilities.

The medical community is still learning about how COVID-19 spreads, and classrooms and schools are breeding grounds for viral pathogens. It's not clear how much closing schools helps, but the pandemic suggests that it's better to be safe than sorry.

2. Guiding Principles

The development of the Orientation programme is informed by the following guiding principles:

- Schools are potential risk areas for the spread of the virus. We need to be well aware of how the virus is spread, and what precautions need to be taken in order to mitigate the risk of it spreading at school.
- The hygiene and social distancing protocols that the government has laid down are key to mitigating the spread of the virus at schools, and must be strictly adhered to.
- For each individual, the most important thing is to take responsibility for our own personal safety and the safety of others, and to be accountable for our actions. All other forms of support are welcome and necessary, but personal responsibility and accountability are pararmount.
- Educating ourselves, communicating with each other, sharing correct information and providing support to those who are infected or adversely affected by COVID-19, is what this Orientation programme is all about.

3. Purpose and Objectives

The purpose of this Orientation Guideline is to prepare schools and learners for the safe re-opening of schools for teaching and learning. It will assist teachers, non-teaching staff and learners to adjust to and become familiar with the special arrangements that apply at schools. It also provides guidelines for interaction between employees (both educator and non-educators), learners, parents and school communities.

Key areas of information covered by these Guidelines are:

- to provide information about the special arrangements for schools
- to provide correct information on COVID-19
- to provide information on how to engage with colleagues, learners and parents
- to provide information on the interaction between educators, non-educator staff, learners, parents and school communities
- to provide information on preventing the spread of COVID-19 in the classroom and ultimately in the school
- to provide information on the standard operating procedures if a suspected COVID-19 event is detected at school
- to provide information on the Department of Basic Education's curriculum recovery plan
- to provide information on a psychosocial support package for teachers and learners
- to provide links to other resources and references that may be useful for teachers and learners.
- by investing time into planning and orientation for the re-opening of schools, teachers, learners and school communities will be more empowered to undertake the demanding tasks involved in creating a safe learning and work environment.

The school calendar for 2020 will be re-organised to support a "phased-in" plan for the reopening of schools. This plan is a progressive means of managing the risk of infections.

4. Overview of the State of National Disaster Regulations and Guidelines

4.1. Declaration of a National State of Disaster

A national state of disaster was declared on 15 March 2020, in terms of the *South African Disaster Management Act 57 of 2002*. In terms of the Regulations under this Act, published on 18 March, schools were to be closed from 18 March to 15 April 2020.

4.2. State of National Disaster Regulations – Extended Lockdown

The National Disaster Regulations were amended to extend the lockdown period to 30 April 2020. The amended Regulations lay the foundation for a set of risk-adjusted measures designed to enable a phased recovery of the economy. These regulations allow the return to operation of certain sectors of the economy under strictly controlled conditions.

4.3. Level 4 Lockdown Regulations

On 29 April 2020, COGTA Minister Dr Nkosazana Dlamini Zuma published further regulations to clarify Level 4 of the lockdown. These regulations repealed the regulations published by Government Notice No 318 of 18 March 2020, amended by Government Notices No. R398 of 25 March 2020, No. R419 of 26 March 2020, No. R 446 of 2 April 2020, No. R465 of 16 April 2020, and No. R471 of 2020.

However it should be noted that, despite these repeals, any directions issued in terms of the previous regulations will continue to apply, unless they are varied, amended or withdrawn by the Minister responsible.

When it is deemed safe to do so, two grades will be admitted back to school at a time starting with Grades 12 and Grades 7

5. The 'Phased-In' Plan: re-organising the school calendar

The school calendar for 2020 will be re-organised to support a "phased-in" plan for the re-opening of schools. This plan is a progressive means of managing the risk of infections. It will help ensure that schools are able to manage smaller numbers of learners at school while in transition from the Level 5 lockdown measures.

The school holidays will be shortened, but will allow teachers and learners enough time to take a break.

The phased-in plan gives priority to the most critical grades at secondary and primary schools to return in the first phase. This approach will allow two grades being admitted to school at a time, while the situation is closely managed and monitored. The next two grades will then be brought in the next phase. This may be after a period of 1 or 2 weeks or as determined by the guiding principles of the plan (below). Additional learners must only be added after the current grades have fully adapted to the post-COVID-19 environment.

5.1. Principles of the Phased-In Plan:

- **Responsiveness to the national COVD-19 programme**: Esuring that the national regulations, programmes and protocols are strictly adhered to
- **Inclusion and equity:** Ensuring that all learners, and in particular the most vulnerable, access the planned programme
- **Targeted approach:** Recognising the unique needs of schools, phases and grades
- **Size and scope:** Ensuring that the curriculum plans are determined in a flexible way, guided by the size and the scope of the crisis, taking into account the length of the lockdown, and the implications that this will have on teaching and learning
- **Partnerships:** Promoting full participation and ownership amongst all key stakeholders
- **Safety and security:** Maintaining the safety, health and well-being of teachers, learners and support staff
- **Time management:** Recognising that time is of the essence in the recovery plan, focusing on skills, knowledge and values
- **Nationally coordinated approach**: Provision by the DBE of clear directives with regard to what is expected of each provincial education department, followed by strict monitoring of compliance to the given directives
- **Recovering lost time**: In order to recover lost time, it may be necessary for schools in consultation with their District office to increase the daily teaching time by 30 minutes in the Intermediate Phase, 45 minutes in the Senior Phase and a maximum of two hours in the FET Phase. No extension of time for learners in the Foundation Phase will be required.

Maintaining the safety, health and well-being of teachers, learners and support staff is of paramount importance.

5.2. Planning and Preparation for the phased-in return of learners to school

The phased-in approach dedicates the month of May to the transition. Table 2 below shows the Planning and Preparation for the phased-in approach by National, Provincial and District officials as well as School Management Teams and Teachers.

Date	Activity
Dates to be Confirmed	Office-based staff to return to work as per directive from the Department of Public Service and Administration
Dates to be Confirmed	School Management Teams and support staff return to work and prepare schools for the return of teachers and learners.
Dates to be Confirmed	Teachers return to work

Table 2: Planning and Preparation

The phased-in return of learners to school will occur over seven phases. Table 3 below shows the different dates when learners will go back to school, as guided by the principles governing the phased-in plan. The adjusted School Calendar will be gazetted once the administrative work has been completed.

Phased-in return of learners to schools	Grades	Dates
Phase 1	Grade 12 and 7	Date to be confirmed
Phase 2	Grade 11 and 6	To be confirmed after consulation
Phase 3	Grade 10 and 5	
Phase 4	Grade 9 and 4	
Phase 5	Grade 8 and 3	
Phase 6	Grade 2 and 1	
Phase 7	Grade R	

Table 3: Phased -in return of Learners

Dates	Activity	Responsibility
Dates to be Confirmed	1. Orientation of Provincial, District and Circuit Officials 2. Procurement of Personal Protective Equipment (PPE) and cleaning materials 3. Review of human resource capacity 4. Schedule drawn up for the cleaning and sanitisation of offices and ablution facilities 5. Finalisation of protocols for entry and exit of offices 6. Plan for the orientation of School Management Teams	• PED • District Director
Dates to be Confirmed	1. Orientation of School Management Teams and support staff 2. Orientation of School Governing Body 3. Review of human resource capacity 4. Procurement of cleaning material and Personal Protective Equipment (PPE) for teachers and learners. 5. Plan for the implementation of the National School Nutrition Programme 6. Schedule drawn up for the cleaning and sanitisation of the school premises 7. Deep cleaning and sanitisation of school buildings 8. Plan for the orientation of teachers 9. Plan for the reorganisation of the curriculum and school time table	• Circuit Manager • Principal • Subject Advisors
Dates to be Confirmed	1. Orientation of Teachers 2. Protocols finalised for entry and exit of school premises 3. Posters developed for school buildings 4. Development of re-organised school timetable, and curriculum plans for Grades 9 and 12	• School Management Team • Subject Advisors • Teachers
Dates to be Confirmed	1. Orientation of food-handlers and new staff members at school 2. Meeting with School Governing Body to present and finalise “Back to School Plan” for learners 3. Communicating with parents and learners on “Back to School” protocols	• School Management Team

Table 4: Orientation schedule for employees in provinces, districts, circuits and schools

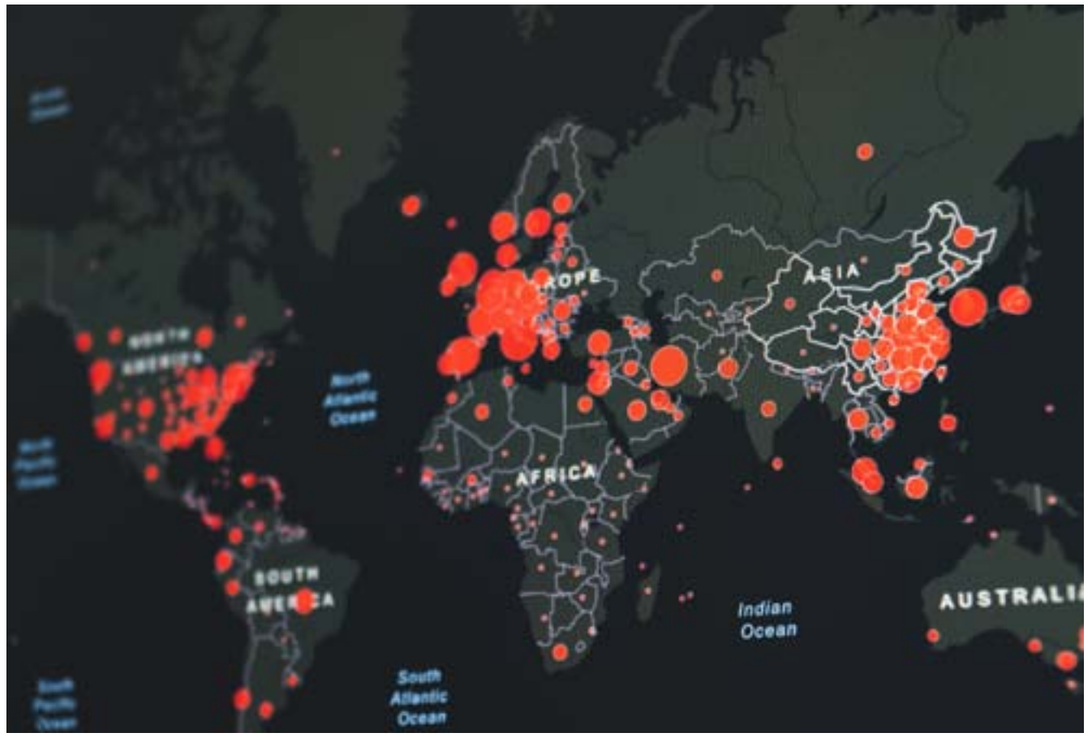
6. When and how should the Orientation Programme be conducted?

The orientation programme **should be conducted before the return of learners to schools**. The orientation of provincial and district education officials, including circuit managers, should be undertaken during the first week, while the second week should be utilised for the orientation of School Management Teams. The last two weeks will be utilised for the orientation of teachers and reorganisation of the school timetable within the curriculum recovery framework provided by the province. The orientation scheduled for provinces, districts, circuits and schools is summarised in Table 4 above.

The orientation needs to acknowledge that we are part of a unique situation facing the world. Many participants may be suffering from anxiety and information overload.

6.1. A unique situation

The orientation needs to acknowledge at the outset that we are part of a unique situation facing the world. Many participants may be suffering from anxiety and information overload. In such circumstances, collaboration with relevant stakeholders (Departments of Health, Police and Social Development, as well as Teacher Unions) is critical.



6.2. Preparation of venues and ablution facilities

The orientation venue and ablution facilities must be deep cleaned and prepared prior to the orientation. Sanitisers, water and soap must be available for the participants.

6.3. Communication of health and safety measures and social distancing protocols

These must be communicated and observed at all times during the orientation. A video, posters, leaflets and information booklets should be the key resources to deliver the orientation programme.

6.4. Social partners

Unions and other social partners should lend support to the orientation sessions.

6.5. Success factors

The following success factors will enable the delivery of a meaningful orientation programme:

- Proper organisation of the programme
- Up-to-date information resources for the programme
- Implementation of the prescribed measures for managing COVID-19
- Finalisation prior to the programme of seating arrangements, layout of furniture and equipment, and cleaning of the venue
- Procurement of necessary personal protective equipment (PPE)
- Ensuring adequate hand-washing points with soap
- Acquiring required media devices (e.g. data projector) and software
- A plan for appropriate management of participants who may show signs of illness.

The orientation needs to acknowledge that we are part of a unique situation facing the world. Many participants may be suffering from anxiety and information overload.

District officials are required to establish and maintain safe and healthy working, teaching and learning environments .

7. Leadership and supervision of the orientation programme

Each provincial education department is responsible for the COVID-19 Orientation of its office-based district officials and administrative personnel.

District officials, who are responsible for the day-to-day rollout of the programme, are key personnel in the implementation and overall success of the orientation programme. They are required to establish and maintain a safe and a healthy working, teaching and learning environment for all.

7.1. Responsibilities of district officials

To effectively meet their responsibilities, district officials must be trained in the following areas:

- Establishing and sustaining safety precautions across all schools in the district
- Techniques of effective supervision and instruction, including motivation and communication on COVID-19
- Investigation of incidents, cases of illness, or a virus outbreak in a school community
- Remedial and preventive action to be taken in the event of suspected infection
- Monitoring and evaluation in collaboration with stakeholders (parents, health and social workers, police, etc) in the community.

District officials are responsible for the day-to-day rollout of the programme and are key to the implementation and overall success of the orientation programme

7.2. The role of the School Management Team and the Principal

The School Management Team and the Principal put the measures in place for hygiene control and social distancing and keep parents informed of the plans to be implemented.

- Put measures in place for hygiene control and social distancing prior to the return of teachers and learners.
- Make logistical arrangements for the orientation sessions.
- Engage in the orientation of all staff, school governing body members and food handlers at the school.
- Provide the necessary support to staff members and learners who show signs of illness or are on sick leave.
- Keep parents informed of the plans to be implemented, as well as and any changes to these plans.
- Safeguard the health, safety and wellbeing of learners, teachers and support staff.
- Monitor social distancing protocols.
- Monitor staff attendance.
- Provide safe and healthy teaching and learning environments.
- Ensure that the necessary personal protective equipment items (e.g. face masks) are in place.
- Keep parents and learners informed of virtual/ online learning, TV, radio and other similar opportunities that are available for learners, especially those who have not yet returned to school.

- Encourage parents to make sure that teaching and learning continue in the home while learners are still awaiting their phased return to the classroom.
- Create an awareness of the risks associated with social media platforms (e.g. cyberbullying, fearmongering etc.).
- Protect the value of classroom teaching and learning and the invaluable face-to-face interaction between the teacher and learners.
- Promote the protection, motivation and support of vulnerable learners.
- Collaborate with the district office for the provision of psycho-social support, where necessary, including counselling services to learners, teachers and support personnel to ensure their well-being.
- Investigate all cases of absenteeism of learners.

Circuit Managers are responsible for coordinating and monitoring the orientation programmes at schools

7.3. The role of the Circuit Manager

The Circuit Manager has the overall responsibility for:

- Coordination of the orientation programme at schools
- Monitoring and support of the re-opening of schools.
- Monitoring that schools are deep-cleaned before the arrival of teachers
- Ensuring that a compliance officer is appointed at each school
- Monitoring training by the National Department of Health (NDOH) of a designated officer on how to screen learners and staff members before they enter school premises.
- Maintaining a database of orientation sessions conducted at schools
- Providing the necessary support to schools, as requested
- Keeping all principals up to date with any management decisions and action plans through periodic brief meetings, memos and internal e-mail, to minimise uncertainty and related stress and anxiety
- Monitoring reasons provided for any absence of learners and staff
- Intervening in any unsafe actions or deviations by schools in accordance with proper remedial procedures for the safety of learners, staff members and parents
- Reporting to the District Director on progress made by schools falling under the District Manager's jurisdiction, as well as any issues of safety that might compromise the recovery plan.

8. Topics to be covered by the Orientation Programme

What is COVID-19?

8.1. What is COVID-19?

On 31 December 2019, the World Health Organization (WHO) China country office reported a cluster of pneumonia cases in Wuhan City, Hubei Province in China. Severe acute respiratory syndrome associated with a novel coronavirus was confirmed. The virus has been named "SARS-CoV-2" and the disease it causes is "coronavirus disease 2019", or COVID-19.

COVID-19 is highly contagious and is spread when fluid droplets carrying the COVID-19 virus are transmitted from one person to another. When a person coughs, sneezes or shouts, droplets containing virus particles are released into the air and fall onto surfaces. If a person touches their eyes, nose or mouth after having touched other peoples hands or objects or surfaces on which droplets containing the virus are lying, they can then 'catch' the virus and become infected.

The virus can survive in the air for a short period of time, so it can be inhaled directly from droplets in the air. The virus can also survive on hard surfaces such as plastic or steel for as long as 72 hours, if not removed with regular cleaning, and therefore all surfaces, as well as cash, credit cards, books, stationery, door handles and supermarket counters and products, are potentially risky.

Because COVID-19 has an incubation period of approximately one week, the disease can be spread by people not yet experiencing any symptoms. Researchers estimate that about 44% of infections are caught from people who do not show any symptoms (i.e. are asymptomatic).

COVID-19 patients remain infectious during their illness and for a short time after they feel better.

Because Coronavirus is a new virus, there is currently no vaccine available. However, many of the symptoms can be treated.

See National Department of Health: Directorate: Communicable Diseases: 30 January 2020: *Standard Operating Procedures for Preparedness, Detection and Response to a Coronavirus (2019-nCov) Outbreak in South Africa*.

What must be done at home?

8.2. What must done at home?

Parents and guardians must ensure that learners are provided with accurate, age-appropriate information regarding COVID-19. It is up to parents and guardians to ensure that learners are taught The 6 Golden Rules about how to stay safe from COVID-19. Parents and guardians must make sure that they model this behaviour for their children to observe and follow.

These are The 6 Golden Rules:[1]

1. Wash your hands often with soap and water for at least 20 seconds each time. If soap and water is not available, use an alcohol-based hand sanitiser with at least 60% alcohol content. Make sure that all parts of your hands including in between fingers, wrists and palms are thoroughly washed or covered in hand sanitiser.
2. Avoid touching your eyes, nose, and mouth with your hands or gloves.
3. Avoid close contact with people who are sick and keep at least a metre distance away from others.
4. Stay at home when you are sick and try and keep a distance from others at home. Keep your eating utensils separate from the rest of the household.
5. Cover your cough or sneeze with a flexed elbow or a tissue, then throw the tissue in a bin with a lid.
6. Regularly clean and disinfect all objects and surfaces that are frequently touched.

Department of Basic Education (NECT): Draft *Advice to Parents: Supporting your children through the COVID-19 Lockdown*

8.3. What must be done on the way to school?

Transport facilities are not only an enabler of economic activity and access to social amenities, but are also capable of spreading the COVID-19 virus far and wide. Whether learners and staff are travelling to school in a bus, a taxi or a car, their parents, guardians and learners themselves have a responsibility to ensure their safety and the safety of other passengers.

Public transport: According to the Regulations, all public transport operators must put measures in place to adhere to social distancing, to ensure that transport is sanitised before and after use, and to observe the new prescribed passenger capacity regulations. Parents, guardians and learners themselves should monitor service providers who transport learners to school to make sure that they adhere at all times to the Regulations issued in terms of the Disaster Management Act 2002 (Act no 57 of 2002). Learners who are using public transport also have a responsibility to practice social distancing and good hygiene to prevent or reduce the possibility of infection.

Sharing transport: In the case of lift clubs or when private transport is shared between colleagues or friends, it is important to adhere to the same measures as are required of public transport services.

Walking to school: If learners walk to school, it is important that they practice social distancing and good hygiene to prevent becoming infected by COVID-19 droplets carried in the air. Close proximity to an infected person is risky and it is therefore recommended that walkers keep at least 1.5 metres apart from each other.

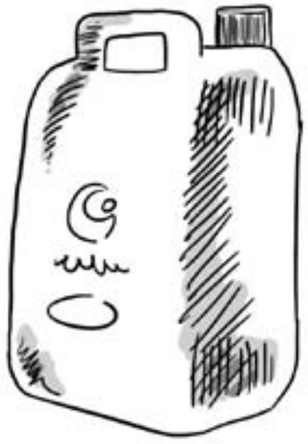
What must be done on the way to school?

Everyone must wear a mask including drivers and learners

The Do's and Dont's for Transport operators

- All operators of vehicles that transport learners must on regular intervals provide adequate sanitisers, hygiene dispensers or disinfection equipment for learners.
- All operators must ensure that public transport vehicles are sanitised before picking up and after dropping off learners. These sanitisers must have a minimum of 60% alcohol content.
- All operators must adhere to the regulations that apply to public transport.
- All operators must ensure that all door and window handles, armrests etc. are sanitised before picking up learners and after dropping them off.
- All operators must ensure that vehicles used to transport learners are clean and tidy.
- All operators must provide information materials about safety and disinfection procedures.
- Everyone must wear a mask including drivers and learners.
- Bus services, taxi services and e-hailing services shall not carry more than 50% of the licensed capacity.
- Private vehicles shall not carry more than 60% of the licensed capacity.

Preparing your school for re-opening



8.4. How must schools be prepared for re-opening

IIt is envisaged that Provincial Education Departments will make available a **minimum health and hygiene package** to all schools. The minimum package will consist of the following:

- **Handwashing soap (bar or liquid);**
- **Alcohol-based hand sanitiser per classroom;**
- **Disinfectant;**
- **Masks (the wearing of masks will be compulsory for learners and teachers);**
- **Digital Thermometer (2 per school); and**
- **Heavy duty cleaning gloves, disposable aprons and goggles/visors for cleaning staff.**

The School Management Team (SMT), teachers and non-teaching staff must arrive at school before the learners in order to make necessary preparations for the learners' arrival. Please note that SMT members, teachers and non-teaching staff above the age of 60, as well as those with comorbidities (e.g. Hypertension, Diabetes, Asthma, Heart Diseases, etc.) identified by the Department of Health should be allowed to remain on leave with full pay. It is important to practice social distancing and good hygiene at school to prevent becoming infected. It is recommended that you keep at least 1.5 meter distance between yourself and another person.

The following key activities will take place on Day 1 for all school staff:

- Orientation of the SMT, teachers and non-teaching staff on the management of COVID-19 at school.
- The Department of Basic Education developed *Guidelines for Schools on maintaining hygiene during the COVID-19 pandemic*. It is essential to have a copy of these Guidelines available during the orientation of the SMT, teachers and non-teaching staff. These Guidelines provide recommendations on the essential cleaning and use of Personal Protective Equipment (PPE). See Annexure D on page 53 of this Guide.
- **Agree on safety and hygiene procedures at school.** (see box)
- Orientation of the SMT and teachers on the management of the revised curriculum.
- Re-organisation of the school time-table in line with the phased-in return of learners.
- The School Governing Body (SGB) and SMT must decide, in accordance with the Regulations issued in terms of *Disaster Management Act 2002 (Act no 57 of 2002)* and all directives set out in the schedule to address and contain the spread of COVID-19, on what happens with other entities that use the school facilities e.g. church groups, etc.

Important other activities for non-teaching staff on Day 1:

1. Ensure the offices, classrooms, bathrooms and kitchen are cleaned and sanitised, and relevant equipment is available for people entering these offices.
2. Ensure that there is water with soap in the bathrooms.
3. Sanitisers and water for hand-washing are placed at accessible spots for anyone who needs to wash hands.
4. Strict access control measures to ensure compliance with the measures to contain the spread of COVID-19 and ensure that there are sanitisers at the security gates, for anyone coming into the school premises.
5. Ensure that Volunteer Food Handlers (kitchen staff) sanitise the kitchen daily, receive and wipe-down food deliveries and check availability of stock for school meals. Volunteer Food Handlers must use protective gear during preparation, cooking and serving of meals (head-cover, apron, safety gloves), always use face masks and wash all surfaces constantly with disinfectant cleaner to observe high standards of general cleanliness.
6. Volunteer Food Handlers must receive food deliveries under hygienic conditions, use gloves and masks in handling food supplies, wipe-down groceries with disinfectant and wash and rinse fruit and vegetables thoroughly.

The following key activities will take place on Day 2 of the arrival of the SMT and teachers:

- The SMT and teachers prepare for the opening of the new school term in line with departmental directives.
- Teachers prepare revised lessons, assessments, resources and plans for extra tuition classes.
- The SMT and teachers agree on a strategy to create new class lists to make provision for smaller classes. [graphic of layout of classroom showing physical distancing]
- The SGB and SMT must decide on a schedule for awareness sessions with parents, communities, Local Chiefs and the Municipality.

8.5. Learners arriving at school

The SMT and non-teaching staff must ensure that handwashing basins and/or sanitisers are placed at the entrance of every classroom and at other strategic points. The phased-in approach for the return of learners prescribe that Grade 12 and Grade 7 learners will be the first to return to school. It is important to practice social distancing and good hygiene at school to prevent becoming infected. All learners in Grade 12 and Grade 7 (except those who are ill) must report to schools.

The following key activities will take place on arrival of learners:

- The principal and teachers conduct the orientation of learners on the management of COVID-19 at school.
- Agree on **Safety And Hygiene Procedures** at school. Learners must wash hands before and after school-meals, be served meals in classrooms and observe social distancing during meals, while seated. Discuss hygiene in the bathrooms and toilets. Ensure sanitiser at the exit and entrances.
- Orientate learners on the curriculum recovery plan, including what access they can get to extra tuition classes and home learning resources.
- Introduce the re-organised school time-table, new class lists and the sub-division of classes.
- Brief learners on social distancing at school and travelling to and from school.
- Motivate learners on their return to school.

8.6. How do I engage with my colleagues and with my learners in the classroom?

Everyone needs to know and understand why social distancing and good hygiene is of critical importance to avoid 'catching the virus' at school and spreading the disease.

COVID-19 is a droplet infection that can spread to those who are in close proximity of an infected person.

It is recommended that movement of learners between classes are limited and that the clustering of desks in the classroom are avoided. Explain and practice the safety and hygiene procedures with the learners in your classroom.

SAFETY AND HYGIENE PROCEDURES FOR EVERYONE

1. Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitiser.
2. Avoid touching your eyes, nose, and mouth with unwashed hands.
3. Avoid close contact with people who are sick.
4. Stay at home when you are sick.
5. Keep a distance of 1.5 metres from other people at all times.
6. Cover your cough or sneeze with a flexed elbow or a tissue, then throw the tissue in the bin.
7. Clean and disinfect frequently touched objects and surfaces.
8. Wear a cloth mask.

8.7. What must I do to prevent the spread of COVID-19 in my classroom?

Prevent direct contact with persons that are sick. Teachers and learners are requested to only attend school if healthy. **SMT members, teachers and non-teaching staff above the age of 60, as well as those with comorbidities identified by the Department of Health should be allowed to remain on leave with full pay.** Follow the Guidelines for the containment/ management of COVID-19 for childcare facilities, schools and school communities in this regard (Annexure A).

Agree on the **Safety And Hygiene Procedures** with the learners in your classroom and include:

- **Proper ventilation and fresh flow of air through the classroom** will limit the airborne transmission of the virus so ensure that windows and doors are open during class.
- **Clean and disinfect frequently touched objects and surfaces** e.g. toilet surfaces, door handles, etc. They should be cleaned with diluted bleach disinfectant (20 ml bleach per litre water) hourly when in use, or less frequently depending on the circumstance. (***Department of Basic Education: Draft 24 April 2020 – Guidelines for schools on maintaining hygiene during COVID-19***). See page 53, Annexure D.

8.8 What are the guidelines if a suspected COVID–19 case is detected?

Refer to Department of Basic Education ***Circular 1 of 2020 (Annexure A – Guidance for childcare facilities and schools on COVID-19) and Guidelines for schools on maintaining hygiene during the COVID-19 pandemic*** (Annexure A on page 35 of this Guide).

9. Mitigating Stigma and Fear about COVID-19

It is important for teachers, non-teaching staff and learners to acknowledge that words matter. South Africa learned from the HIV and Ebola epidemics how catastrophic fear, stigma and misinformation can be - this is also very true for COVID-19.

Stigma and fear can isolate people. It can prevent them from seeking medical care or adopting healthy behaviours. Stigma and fear rob people of necessary support during a difficult time. There is a great deal of easy things that teachers, non-teaching staff and learners can do to help tackle stigma associated with COVID-19.

9.1 Providing Emotional Support to Teachers, Non-Teaching Staff and Learners

The WHO indicates that a major epidemic implies a psychosocial disturbance that can exceed the affected population's capacity to handle the situation. The COVID-19 pandemic is such a state. The most common reactions include anxiety, distress and depression. These may result from the fear of contracting the illness, recovering from the illness and even experiencing a death/ deaths of family members, colleagues or classmates.

It is likely that you may experience any of the above conditions in your school/s. Therefore, leaners, teachers and school management have a responsibility to care for themselves and each other as safely as possible. This section addresses some of the practices that you need to promote in your school to prevent loneliness, and to support those experiencing distress, anxiety and/ or depression.

The "Dos and Don'ts" when talking about COVID-19 have been adapted from a *https://www.unaids.og/sites/default/files/media_asset/JC2118_terminology-guidelines_en_1.pdf* and *https://www.who.int/docs/default-source/coronaviruse/covid19-stigma-guide.pdf* as well as a World Vision publication (Annexure E).

The Do's and Dont's for handling anxiety and fear

- **Don't:** Do not feel bad that you cannot touch someone or sit very closely to them while you provide emotional support.
- **Do:** Maintain social distancing and explain that you are both required to do so for both your safety.
- **Do:** While providing social and/ or emotional support to learners or staff you need to adhere to the social distancing as prescribed by the Department of Health.
- **Do:** While a learner or teacher is still recovering at home, please provide support by calling them at least once a week where possible (identify someone to call them, do not overwhelm them with many phone calls as resting is part of recovery). Please find out if they have a caregiver at home, or whether they need the school to contact any organisation or Department on their behalf, etc.

Whole school approaches may include:

- Mass communication on the emotional effects of COVID-19.
- Teach each class about identifying and interpreting emotions; how to handle or react to fear, anxiety and to identify when they might be at risk of depression; or to inform a teacher when they identify a classmate or friend that is experiencing any of the above.
- Teach and encourage positive self-talk.
- Provide material support as these may be some of the reasons creating worry especially for children whose families are directly affected.
- Provide counselling for the school and at-risk groups; and
- Refer specialised services for those who need it.

Self-care for teachers and non-teaching staff

- Avoid excessive exposure to COVID-19 media and social media coverage, especially negative ones, to avoid mental health effects.
- Maintain a healthy diet and positive lifestyle, and reach out to others for comfort and consolation that the situation will eventually be contained.
- Maintain a sense of positive thinking and hope.
- Take personal or group time to unwind and remind oneself that the intense feelings of fear, panic, and anxiety will fade. Remember to practice social distancing when in groups.

What are the signs that someone needs help?

- Persistent fear, worry and anxiousness;
- Persistent sadness, hopelessnes and other overwhelming emotions;
- Withdrawal from others (the kind that is different from the social distancing prescribed by the Department of Health);
- Loss of interest in personal appearance and unusual lack of energy;
- Expressing rage or anger at the world;
- Missing work or classes; and
- Use of or increased use of drugs or alcohol.
- (It is important to note that the above list does not constitute the complete list of possible signs.)

Sources of Psychological Support

In addition to health professionals, the Employee Assistance Programme in your Department is available to provide psychological support. The South African Depression and Anxiety Group (SADAG) helpline is 0800567567 or send a SMS to 31393. Further contact details of support are indicated on the poster below:

9.2 Sport and other after school programmes

School Sport and other mass based gathering events such as the South African Schools Choral Eisteddfod remain suspended in schools.

This is in line with the directive given by the Minister on 16 March 2020. The directive will remain in force until further guidance is received from the Department of Health and Covid-19 Command Council.

Where sport equipment must be used during Life Orientation lessons, these must sanitised and social distancing must be maintained at all times.

When the ban on sport events is lifted, promotion of good hygiene and safe handling of sport equipment and other related objects must be promoted.

School based enrichment and other cultural activities must be kept to a minimum to allow schools to recover the lost teaching and learning time.

In the Foundation Phase, where play and recreation activities are part of the teaching and learning process, vigilant supervision must be maintained at all times and teachers and practitioners must ensure that all equipment and teaching aids are sanitised and the washing of hands is done regularly.

10. Overview of the Curriculum Recovery Plan

In order to counter the effects of a prolonged stay at home, the Department of Basic Education (DBE) has worked with Provincial Education Departments (PEDs) to develop a standard comprehensive Framework for Curriculum Recovery. The Framework for Curriculum Recovery serves as a guideline to PEDs and schools as to how the lost time could be recovered.

Provinces must customise the guideline to suit their provincial contexts. This framework will provide the minimum of what needs to be done and PEDs can go beyond the minimum that is outlined in the Framework. PEDs and schools should be guided by the following principles, when actioning the Framework for Curriculum Recovery:

10.1 Responsiveness to the National COVID-19 Programme

The Framework strictly adheres to the national regulations and protocols of the National COVID-19 Programme.

10.2 Inclusion and Equity

Inclusion and equity are guiding principles of education programmes in South Africa. This is in line with the international mandates including the Sustainable Development Goals (SDG), which promote inclusive and equitable quality education for all (United Nations, 2015) and motivate for a strong focus on the most disadvantaged. Inclusion must be the overriding principle for all interventions. Inclusion is premised on the notion that all children should access and enjoy the benefits of education regardless of ability, gender, geography and socio-economic status.

It is a well-established fact that disaster events often impact the marginalised more than other groups. The programme use a context sensitive approach – it takes cognisance of diverse contexts where schools are located (urban and rural); socio-economic factors (quintiles) and unique circumstances (multi-grade teaching schools and farm schools) to develop targeted planned activities based on these categorisations.

10.3 Guided Approach

The programme promotes the notion that the needs of the schools are unique and are guided by performance and therefore require not one size fits all but tailored-made solutions. The programme takes cognisance of low, medium and high-risk schools. More attention is given to high-risk schools. Consequently, consideration is given to the demands and needs of each phases of the schooling system i.e. Foundation, Intermediate, Senior and Further Education and Training Phases. Grades within each Phase will be considered independently as having different needs which require special support.

10.4 Size and Scope

Successful schools emphasize not just the quantity of lessons but also the quality of education provided. Striving for quality is important in a crisis as it is in any context.

In a crisis where there was a loss of days and few weeks, a Short-Term Recovery Plan is adopted. This would include: Adjustment of teaching schedules and timetables (e.g. morning lessons, afternoon lessons, and holiday tuition). If there was a loss of weeks and months, a Long-Term Recovery Plan is adopted which include: Re-evaluating the curriculum (e.g. curriculum trimming).

While re-organising the curriculum might be an option in other Grades, support to Grade 12 will adopt the adjustment of teaching schedules and timetables. This is determined by the nature of the NSC Examination and the fact that Grade 12 represents a final year of schooling and prepares learners for higher education.

10.5 Partnerships

Recovering efforts should involve expanding support through partnerships. The success of salvaging the rest of the academic year partially rests in collaborating with education stakeholders and role-players.

10.6 Safety and Security

Creating safe, orderly and welcoming environments is critical to educating and preparing youth to achieve their highest potential. There is a need to balance physical and psychological safety but at the same time avoid overly restrictive measures that can undermine the learning environment and instead combine reasonable physical security measures with efforts to enhance school climate. Efforts should be made to address school safety and climate which reinforces positive behaviours.

10.7 Time Management

Time is of the essence in the recovery plan. Hence time must be strictly managed at school level.

10.8 Quality

The priority must be quality teaching and learning. There should also be a focus on skills, knowledge and values.

10.9 A nationally co-ordinated approach

The Department of Basic Education will provide clear directives of what is expected of each provincial education department and compliance with these directives will be monitored.

The Framework for Curriculum Recovery was presented to the different stakeholders and social partners, including School Governing Bodies Associations, Principals Associations and representatives of Teacher Unions.

Teaching resources, references and links

11. COVID-education resources

11.1 The Department of Basic Education

The DBE, in collaboration with Provincial Education Departments PEDs) and various organisation has coordinated education resources and support programmes. The resources are available on-line, through various portals, applications, radio and television broadcast lessons. The lessons target learners and teachers across all the grades. Various online support programmes were deployed to provide or guide learners, teachers, education officials as well as parents and care givers and they are available for different subjects across the grades.

Some publishing companies such as Via Afrika and Shuters have availed their e-books for free. A comprehensive list of on-line learner support programmes, what they offer is available (Annexure B).

11.2 The National Education Collaboration Trust

The National Education Collaboration Trust (NECT) has been working with the Department of Basic Education in formulating a national response programme to mitigate the effects of COVID-19 outbreak, especially during the national lockdown announced by President Cyril Ramaphosa. The NECT naturally works as a facilitator of collaboration among several stakeholders to generate synergies, which optimise the use of resources.

ORGANISATION	CONTACT DETAILS
National Institute for Communicable Diseases (NICD)	www.nicd.ac.za
COVID-19 Learners Support	www.education.gov.za
COVID-19 information	www.sacoronavirus.co.za
Coronavirus 24-hour Hotline	0800 029 999
Coronavirus WhatsApp	060 012 3456
Official Government Regulations and Guidelines on COVID-19	www.gov.za/coronavirus/guidelines
World Health Organisation	www.who.int
United Nations' Children Fund (UNICEF)	www.unicef.org
National Association of Social Change Entities in Education (NASCEE)	https://nascee.org.za/
Heartlines	https://heartlines.org.za
DG Murray Trust	www.dgmt.co.za
PILO	www.pilo.co.za
Zenex Foundation	www.zenexfoundation.org.za
JET Education Services	www.jet.org.za

Useful information

12. Distribution of the orientation programme, including roles and responsibilities

12.1 Role of the Department of Basic Education

The Department of Basic Education has a responsibility to ensure that the orientation programme is made available through different channels and platforms. The following are some of the programme can be accessed:

- Television and Radio Broadcasts;
- Video Clips on YouTube, WhatsApp and other social media platforms;
- Social media platforms; and
- Websites of DBE, Provincial Education Departments, Partners, etc.

The DBE will also collate reports from Provinces on the distribution, application as well as the general compliance with the provisions of the programme.

12.2 Role of the Department of Provincial Education Departments

1. Provincial Education Departments have a responsibility to ensure that all Districts receive the programme and are thoroughly trained on the programme.
2. Provinces may develop additional materials in line with the programme to compliment and expand the distribution of the information.
3. Provinces have to deploy officials in different Districts to monitor compliance and prepare reports for the DBE.
4. Provinces have to put measures in place to ensure that they are able to detect problem areas and be on alert to respond at short notice.

12.3 Role of the Districts

1. Districts have to ensure that all schools are alerted to the programme, and are trained adequately
2. Districts have to monitor schools to ensure that there in compliance.
3. Districts have to report to any incidents of suspected infection or non-compliance to the relevant authorities and the Province.
4. All efforts must be taken by the Districts to address and resolve challenges as they arise.

12.4 Role of schools

1. Schools have to access and familiarise themselves with the programme.
2. Principals have to ensure that the provisions of this programme are complied with.
3. Any suspicions of infection should immediately be reported to the relevant authorities who will give directives in terms of how the situation should be handled.
4. Schools must compile reports and submit to Districts.
5. Schools have to keep parents informed about the programme and ensure that they also comply accordingly.

13. Frequently Asked Questions

CATEGORIES	QUESTIONS	ANSWERS
General information about Coronavirus	What is COVID-19?	• Coronaviruses belong to a large family of viruses causing a wide spectrum of illness, ranging from very mild to severe. Some cause illness in people; numerous other coronaviruses circulate among animals, including camels and some bat species. Rarely, some animal coronaviruses can evolve to cause illness in people. Sometimes coronaviruses may develop the ability to spread from person to person, for example the Middle East respiratory syndrome coronavirus (MERS-CoV), first reported from Saudi Arabia in 2012, and the severe acute respiratory syndrome coronavirus (SARS-CoV), first recognized in China in 2002. • On 7 January 2020, 'Severe Acute Respiratory Syndrome Coronavirus 2' (SARS-CoV-2) was confirmed as the causative agent of 'Coronavirus Disease 2019' or COVID-19. Most of the case-patients initially identified were dealers and vendors at a seafood, poultry and live wildlife market in China. Since then, the virus has spread to more than 100 countries, including South Africa.
	Who named COVID-19	• The World Health Organisation. On 7 January 2020, 'Severe Acute Respiratory Syndrome Coronavirus 2' (SARS-CoV-2) was confirmed as the causative agent of 'Coronavirus Disease 2019' or COVID-19
	How is the Corona virus transmitted?	• COVID-19 is a droplet infection that can spread to those who are in close proximity with an infected person. • It is thought to happen mainly via respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory pathogens spread. • It is recommended that you keep at least 1.5 meter distance between yourself and another person.
	What is social distancing?	• Social distancing, also called physical distancing, is a set of non-pharmaceutical interventions or measures taken to prevent the spread of a contagious disease by maintaining a physical distance between people and reducing the number of times people come into close contact with each other. • The declaration of a national state of disaster has placed South Africa in lockdown. This means all South Africans (except a list of Government approved essential services) must Stay at Home. Only go outside for food, health reasons or you are performing work listed as an essential service. Wash your hands as soon as you get home. • Social distancing must also be applied when schooling resumes or in other circumstances.

	Why is social distancing necessary?	• To prevent the spread of a contagious disease such as COVID-19. COVID-19 is a droplet infection that can spread to those who are in close proximity with an infected person.
	What are the signs and symptoms of COVID-19 infection?	• Symptoms reported for patients with COVID-19 have included mild to severe respiratory illness with cough, sore throat, shortness of breath or fever [≥ 38°C (measured) or history of fever (subjective). • The complete clinical picture with regard to COVID-19 is still not fully clear. • Reported illnesses have ranged from infected people with little to no symptoms to people being severely ill and dying.
	Can CoVID-19 be caught from a person who has no symptoms?	• The main way the disease spreads is through respiratory droplets expelled by someone who is coughing. However, many people with COVID-19 experience only mild symptoms. This is particularly true at the early stages of the disease. It is therefore possible to catch COVID-19 from someone who has, for example, just a mild cough and does not feel ill.
	How likely I am to catch COVID-19?	• The risk depends on where you live or where you have travelled recently. The risk of infection is higher in areas where a number people have been diagnosed with COVID-19. • The risk in South Africa is currently rising; it important to be aware of the situation and preparedness efforts in your area.
	Should I be worried about COVID-19?	• In the light of the rising number of infections in South Africa, there is need to be concerned about COVID-19. • It is a good idea to get the facts, to help you accurately determine your risks so that you can take reasonable precautions. Regular information provided by the government at www.gov.za/coronavirus/guidelines is very useful in this regard. • It is very important, though, to be aware of fake news that also do the rounds. • It is important to be informed of the situation where you live and take appropriate measures to protect yourself. • Although for most people COVID-19 causes only mild illness, it can make some people very ill. More rarely, the disease can be fatal. • Older people, and those with pre-existing medical conditions (such as high blood pressure, heart problems or diabetes) appear to be more vulnerable.

	How is COVID-19 diagnosed?	• Department of Health officials are currently performing screening and testing. • The COVID-19 is diagnosed by a laboratory test, polymerase chain reaction (PCR) molecular test, on a respiratory tract sample (e.g. sample from nose, throat or chest). • For specific guidance on sample collection and transport please visit the NICD's website: www.nicd.ac.za.
	How is the COVID-19 treated?	• Treatment is supportive (e.g. provide oxygen for patients with shortness of breath or treatment for fever). • There is no specific antiviral treatment available. Antibiotics do not treat viral infections. • However, antibiotics may be required if a bacterial secondary infection develops.
	How can COVID-19 infection be prevented?	Currently, there is no vaccine for COVID-19. There are no specific measures currently recommended to prevent COVID-19 but the following can provide protection against infection with coronaviruses and many other viruses that are more common in South Africa: • Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitiser. • Avoid touching your eyes, nose, and mouth with unwashed hands. • Avoid close contact with people who are sick. • Stay at home when you are sick and try and keep distance from others at home. • Cover your cough or sneeze with a flexed elbow or a tissue, then throw the tissue in the bin. • Clean and disinfect frequently touched objects and surfaces.
	Why should we constantly wash hands with water and soap or clean our hands with hand sanitiser?	• Handwashing with soap or cleaning our hands with hand sanitiser removes germs from hands. This helps prevent spreading COVID-19 because: People frequently touch their eyes, nose, and mouth without even realizing it. Germs can get into the body through the eyes, nose and mouth and make us sick.

	Why is wearing a mask important?	• Wearing a mask when in public places, especially crowded places, can help slow the spread of COVID-19. Even when wearing a mask, hand-washing and social distancing remain the most important interventions to reduce the spread of COVID-19. • The purpose of the mask is to reduce droplets that come out of the mouth or nose during speaking, coughing and sneezing. • Avoid touching the mask or your face while you're out and when you get back home, wash the mask with soap and water immediately without using chemicals and wash your hands again. • You should not share your mask with anybody else, and it is preferable if every person has two masks so they can be interchanged during washes.
	Why should we not drink alcohol?	• The use of liquor "reduces a person's ability to exercise the social distancing and personal hygiene required" to limit the spread of the virus from person to person.
	Why should we not smoke?	• While smoking and exposure to second-hand smoke, does not cause COVID-19, your risk increases if you are a smoker and suffer another health condition such as cardio-vascular disease, cancer, diabetes, respiratory illness, TB and so on.
	Who can I contact for more information?	• The Coronavirus 24-hour Hotline: 0800 029 999 • The Department of Health's Coronavirus WhatsApp: 060 012 3456 • Official Government Regulations and Guidelines on COVID-19 at www.gov.za/coronavirus/guidelines. • National Institute for Communicable Diseases (NICD) at www.nicd.ac.za • The World Health Organisation at www.who.int
COVID-19 questions regarding education	What is the plan of the Department of Basic Education?	• Information on the plans of the Department of Basic Education is available at www.education.gov.za.

	What will happen if all learners come back after the lockdown is lifted	• The phased-in approach for the return of learners prescribe that Grade 12 and Grade 7 learners will be the first to return to school. • The other Grades will come later.
	What if some learners / teachers are found to be infected on arrival	• The school will be contacted by the relevant public health officials to discuss the case, identify people who have been in contact with them and advise on any actions or precautions that should be taken. If you have not yet been contacted please contact the public hotline 0800 029 999 who will refer you to the relevant contact. An assessment of the school will be undertaken by the public health officials with relevant staff. Advice on the management of learners and staff will be based on this assessment. If there is a confirmed case, a risk assessment will be undertaken by the educational establishment with advice from the public health officials. In most cases, closure of the school will be unnecessary. This decision will be school specific, based on various factors such as establishment size and pupil mixing.
	How will Curriculum catch-up plan unfold?	• To address lost teaching time, the Curriculum Recovery Plan suggests the deconstruction of three concepts, namely curriculum trimming, curriculum re-organisation and accelerated learning programmes with an intention of exploring methodologies, approaches and strategies for the sector's attempts to address the challenge of loss of teaching and learning time, as a result of COVID-19.

Annexures

- Annexure A: Guidance for childcare facilities and schools on COVID-19
- Annexure B: Comprehensive list of on-line learner support programmes
- Annexure C: Updated Recommended Guidelines for Fabric Face Masks (24 April 2020)
- Annexure D: Guidelines for schools on maintaining hygiene during the COVID-19 pandemic
- Annexure E: Mitigating Stigmatisation

basic education
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Date: 11 March 2020

TO: HEADS OF EDUCATION DEPARTMENTS
HEADS OF COMMUNICATION DEPARTMENTS
HEADS OF PROVINCIAL GOVERNANCE
DISTRICT DIRECTORS
SCHOOL GOVERNING BODIES
TEACHER UNIONS
ALL SOUTH AFRICAN SCHOOLS
GOVERNING BODY ASSOCIATIONS

CONTAINMENT/MANAGEMENT OF COVID 19 FOR SCHOOLS AND SCHOOL COMMUNITIES

CIRCULAR NO. 1 OF 2020

Guidance for childcare facilities and schools on COVID-19

This guidance is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19). Guidance will be updated as new information emerges. Please check the National Institute for Communicable Diseases (NICD) website (www.nicd.ac.za) for updated guidance.

Schools can play an important role in efforts to control the spread of COVID-19. Schools can take steps to circulate information about the disease and its potential transmission within their school community. Schools can prepare to take steps to prevent the spread of COVID-19 among their learners and staff should health officials identify such a need.

School plans should be designed to minimise disruption to teaching and learning and protect learners and staff from social stigma and discrimination. Plans can build on everyday practices (e.g. encouraging hand hygiene, monitoring absenteeism and communicating routinely).

Who is this guidance for?

This interim guidance is intended to help administrators of childcare facilities and primary and high schools (hereafter referred to as schools) prevent the spread of COVID-19 among learners and staff.

Why is this guidance being issued?

Information provided should help schools understand how to help prevent the transmission of COVID-19 within school communities and facilities. It also aims to help schools react quickly should a case be identified. The guidance includes considerations to help administrators plan for the continuity of teaching and learning if there is a need to quarantine learners or staff within schools or close schools as a result of the spread of COVID-19.

What is the role of schools in responding to COVID-19?

COVID-19 is a respiratory illness caused by a novel (new) virus, and we are learning more about it every day. There is currently no vaccine to protect against COVID-19. At this point, the best way to prevent infection is to avoid being exposed to the virus that causes it. Stopping transmission (spread) of the virus through everyday practices is the best way to keep people healthy. More information on COVID-19 is available here www.nicd.ac.za; www.health.gov.za and www.education.gov.za.

Schools, working together with local health departments, have an important role in slowing the spread of diseases to help ensure learners have safe and healthy learning environments.

To prepare for possible community transmission of COVID-19, the most important thing for schools to do now is **plan and prepare**. As the global outbreak evolves, schools should prepare for the possibility of community-level outbreaks as well as possible recommendations from health officials for learners, staff or whole classes or grades to be quarantined at home. School dismissal could be recommended in certain circumstances. Decisions about appropriate public health interventions should always be made in discussion with public health officials who have access to all the relevant information. These decisions include:

1. Whether learners or educators should remain home from school for a period of time; and
2. Whether learners in sections of a school or a whole school should be dismissed.

Keeping learners at home from school or closing schools is a serious decision which may restrict the learners' ability to acquire education as well as have knock-on effects in terms of the need for childcare. All decisions for learners to stay home from school based on possible exposure to or infection with COVID-19 should be justified by available scientific evidence.

Schools want to **be ready** if COVID-19 does appear in their communities.

School administrators can take steps to help stop or slow the spread of respiratory infectious diseases, including COVID-19:

- **Make sure that everyone in the school has up to date information on how to prevent the spread of COVID-19 (link to NICD, www.nicd.ac.za, guidance on handwashing etc.)**
- **Monitor and plan for absenteeism**
  - Review attendance and sick leave policies. Encourage learners and staff to stay home when sick. Use flexibility, when possible, to allow staff to stay home to care for sick family members.
  - Discourage the use of perfect attendance awards and incentives as these may encourage people to come to school sick.
  - Identify critical job functions and positions, and plan for alternative coverage by cross-training staff.
  - Determine what level of absenteeism will disrupt continuity of teaching and learning.
- **Establish procedures for learners and staff who are sick at school**
  - Establish procedures to follow when learners and staff become sick at school or arrive at school sick, as they should be sent home as soon as possible.
  - Keep sick learners and staff separate from well learners and staff until they can leave.
  - Remember that schools are not expected to screen learners or staff to identify cases of COVID-19. The majority of respiratory illnesses are not COVID-19. If

a community (or more specifically, a school) has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps.
  - Share resources with the school community to help families understand when to keep learners at home.
- **Create communication plans for use with the school community.**
  - Include strategies for sharing information with staff, learners, and their families.
  - Include information about steps being taken by the school or childcare facility to prepare, and how additional information will be shared.

School administrators can also support their school community by sharing resources with staff, families and, age-appropriately, with learners. Consider sharing the following fact sheets and information sources found on the NICD website www.nicd.ac.za and the DBE website www.education.gov.za such as the Frequently asked Questions on COVID-19.

Learners who plan to travel, or have recently traveled, to areas with community spread of COVID-19. South Africa has not implemented any specific travel restrictions. While the risks of contracting COVID-19 infection are generally low and the consequences in most cases are mild, there are other associated risks of international travel. This includes cancelled flights, new travel restrictions and/or airport closures and possible quarantine in the event you come into contact with a suspected case. The risk of travel disruptions or acquiring COVID-19 in a foreign location varies by location and the risk situation is rapidly evolving. It is not possible to predict the level of risk in any location in the future. If members of school communities become infected during travel, they could potentially introduce COVID-19 into the community on return. The NICD has developed guidance on quarantine including guidance on appropriate precautions to take when returning from travel in affected countries and these should be followed (www.nicd.ac.za). In light of this, staff and learners who will be travelling internationally (including school tours) in the next months should reconsider the benefits and risks of undertaking such travel. Schools may need to postpone or cancel trips that could expose learners and staff to potential community spread of COVID-19. Learners returning from travel to areas with community spread of COVID-19 must follow guidance on the NICD website. **Schools can also consult with local health officials or call the NICD community hotline to discuss travel concerns 0800 029 999.**

Learners who may have been exposed to a suspected case of COVID-19. If anyone has been in contact with a suspected case in a childcare facility or school, no restrictions or special control measures are required while laboratory test results for COVID-19 are awaited. There is no need to close the setting or send other learners or staff home. As a precautionary measure, the NICD are currently testing a very large number of people who have travelled back from affected countries, the vast majority of whom test negative. Therefore, until the outcome of test results is known there is no action that staff members need to take.

Learners who may have been exposed to a confirmed case of COVID-19. All close contacts of a confirmed COVID-19 case are required to self-quarantine at home for 14 days while being monitored for symptoms. They may not attend school. Learners who are not contacts of a confirmed case should not be prevented from attending school. Family and friends who have not had close contact with the original confirmed case do not need to take any precautions or make any changes to their own activities such as attending childcare or educational settings or work, unless they become unwell. Specifically learners who have interacted with a healthy contact of a confirmed case should not be excluded from school. The reason for this is that asymptomatic spread of COVID-19, if it occurs is likely very uncommon. Meaning, for a person who comes into contact with a healthy contact of a case, it is very unlikely to result in transmission. All case contacts who become symptomatic will be immediately screened for COVID-19 and if found to be a case, active contact tracing and self-quarantine of all contacts will be implemented.

Action to be taken when a case of COVID-19 (Learner or staff) is confirmed in your childcare facility or school

- The childcare or educational institution will be contacted by the relevant public health officials to discuss the case, identify people who have been in contact with them and advise on any actions or precautions that should be taken. If you have not yet been contacted please contact the public hotline 0800 029 999 who will refer you to the relevant contact.
- An assessment of each childcare or education institution will be undertaken by the public health officials with relevant staff. Advice on the management of learners and staff will be based on this assessment.
- If there is a confirmed case, a risk assessment will be undertaken by the educational establishment with advice from the public health officials. In most cases, closure of the facility or school will be unnecessary. This decision will be facility or school specific, based on various factors such as establishment size and pupil mixing.

Prepare for possible school dismissal. This should only be considered following recommendations from a public health official.

Temporarily closing schools is a possible strategy to stop or slow the further spread of COVID-19 in communities. School administrators should work in close collaboration and coordination with health officials to make dismissal and large event cancellation decisions. Schools are not expected to make decisions about dismissal or canceling events on their own. Schools can seek specific guidance from health officials to determine if, when, and for how long to take these steps. Large event cancellations or school dismissals may be recommended for 14 days, or possibly longer if advised by local health officials. The nature of these actions (e.g., scope, duration) may change as the local situation evolves.

During school dismissals, childcare programmes and schools may stay open for staff members (unless ill) while learners stay home. Keeping facilities open will allow educators to develop and deliver lessons and materials remotely, thus maintaining continuity of teaching and learning. Furthermore, it would allow other staff members to continue to provide services and help with additional response efforts.

If schools are dismissed, schools can consider the following steps:

- **Temporarily cancel extracurricular group activities and large events.**
  - Cancel or postpone events such as field trips, and sporting events.
- **Discourage learners and staff from gathering or socialising anywhere.**
  - Discourage gatherings at places like a friend's house, a favourite restaurant, or the local shopping mall.
- **Ensure continuity of education.**
  - Review continuity plans, including plans for the continuity of teaching and learning. Implement e-learning plans, including digital and distance learning options as feasible and appropriate.
  - If necessary, determine, in consultation with school district officials or other relevant state or local partners:
    - How to convert face-to-face lessons into online lessons and how to train educators to do so;
    - How to triage technical issues if faced with limited IT support and staff;
    - How to encourage appropriate adult supervision while learners are using distance learning approaches; and
    - How to deal with the potential lack of learners' access to computers and the Internet at home.

  - **Ensure continuity of meal programmes, if applicable.**
    - Consider ways to distribute food to learners through the National School Nutrition Programme (NSNP); and
    - If there is community spread of COVID-19, design strategies to avoid distribution in settings where people might gather in a group or crowd. Consider options such as "grab-and-go" bagged lunches or meal delivery.

How to clean educational establishments where there were learners, staff or others with suspected or confirmed cases of COVID-19

Coronavirus symptoms are similar to a flu-like illness and include cough, fever, or shortness of breath. Once symptomatic, all surfaces that the suspected case has come into contact with must be cleaned using disposable cloths and household detergents.

These include:

- all surfaces and objects which are visibly contaminated with body fluids; and
- all potentially contaminated high-contact areas such as toilets, door handles, telephones, etc.

Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids do not need to be specially cleaned and disinfected. If a person becomes ill in a shared space, these should be cleaned as detailed above.

What to do with rubbish in the educational establishment, including tissues, if learners, staff or others within the institution become unwell with suspected COVID-19

All waste that has been in contact with the individual, including used tissues, and masks if used, should be put in a plastic rubbish bag and tied when full. The plastic bag should then be placed in a second bin bag and tied. It can then be put in the normal waste.

Below follows the contact details of the Provincial Health Department Communicable Diseases Directorates:

Provincial Communicable Disease Control Directorate			
Eastern Cape	Thomas Dlamini Nosimphiwo Mgobo	thomas.dlamini@echealth.gov.za Nosiphiwo.Mgobo@echealth.gov.za	083 378 0189 060 579 9027
Free State	Dikeledi Baleni Babsy Nyokong	balenid@fshealth.gov.za nyokongb@fshealth.gov.za	083 757 8217 082 463 7499
Gauteng	Chika Asomugha Caroline Kesebilwe	Chika.Asomugha@gauteng.gov.za Caroline.kesebilwe@gauteng.gov.za	082 330 1490 083 490 8165
KwaZulu-Natal	Premi Govender	premi.govender@kznhealth.gov.za	071 609 2505
Limpopo	Marlene Freda Ngobeni Mashudu P. Mudau	Marlene.Ngobeni@dhsd.limpopo.gov.za Prudance.Mudau@dhsd.limpopo.gov.za	079 491 1909 071 678 3864
Mpumalanga	Mandla Zwane Hluphi Mpangane	MandlaZw@mpuhealth.gov.za hluphim@mpuhealth.gov.za	082 229 8893 076 522 8511 / 013 766 3411
North West	Chriseldah Lebeko	clebeko@nwpg.gov.za	082 421 7985
Northern Cape	Gloria Hottie	hottieg@webmail.co.za	072 391 3345 / 053 830 0529
Western Cape	Charlene Jacobs	Charlene.Jacobs@westerncape.gov.za	072 356 5146 / 021 483 9964
Port Health and Environmental Health			
Central Region (Gauteng, Free State, Northern Cape)	Funeka Bongweni	Funeka.Bongweni@health.gov.za	012 395 9728 060 993 0107
Northern Region (Limpopo, Mpumalanga, North West)	Ockert Jacobs	Ockert.Jacobs@health.gov.za	012 395 9417 082 372 0556
Coastal Region (KwaZulu-Natal, Northern Cape, Western Cape)	Antoinette Hargreaves	Antoinette.Hargreaves@health.gov.za	031 301 0381 083 460 0935

Annexure A: Guidance for childcare facilities and schools on Covid-19

It is imperative that school communities are aware of the basic health and safety precautions as mentioned throughout the circular. This circular must be implemented immediately within all South African schools and applies to all entities and individuals that may come within the school premises.

Provincial Education Departments are obliged to ensure compliance as well as that resources are made available to secure schools and protect the health of school communities.

Yours sincerely

MR HM MWELI
DIRECTOR-GENERAL
DATE: 11/03/2020

Annexure B: List of on-line Learner Support Programmes

Websites	Portals, Apps and Virtual Classrooms	Broadcast Television and Radio
https://www/education.gov.za	https://www.vodacom.co.za/vodacom/services/vodacom-e-school	https://learn.mindset.africa/
https://dbecontent.bhelela.com	https://www.digitalclassroom.co.za/digitalclassroom/	https://www.youtube.com/user/MindsetLearn/videos
https://www.2enable.org/Dashboard.aspx	https://wcedeportal.co.za/	e-Media Investments
https://siyavula.com	https://2simple.com/free-access/	e-Media Investments
https://www.africanstorybook.org/	https://xander.co.za/	Open view HD platform channel 122
https://bbc.co.uk/bitesize	https://phet.colorado.edu/	SABC Regional Radio Stations and Community Radio Stations
www.africateen.geeks.co.za	Eastern Cape Virtual Classroom	
www.viaafrika.com	Digi-campus	
www.shuter.co.za	WorksheetCloud	

trade, industry & competition

Department:
Trade, Industry and Competition
REPUBLIC OF SOUTH AFRICA

Recommended Guidelines – updated

Fabric Face Masks
Manufactured by South Africa's
Clothing and Textile Manufacturing Industry for General Public Use

Friday, 24 April 2020

Annexure C: Updated Recommended Guidelines for Fabric Face Masks

Table of Contents

1 Overview

A 'fabric/cloth' face mask (non-medical mask) for the general public is only part of a broader solution to curb the spread of COVID-19[1] and it must always be used in combination with other hygienic methods of prevention[2]. Such masks are not a replacement for other recommended precautionary measures. They should not provide a false sense of protection that lead to a lapse in the application of proper preventative measures like personal hand hygiene, respiratory hygiene and physical (social) distancing. Furthermore the design of fabric masks should be mindful of the thermo-physiological properties of fabrics which, if wrongly chosen, can lead to problems like skin irritation, the build-up of heat or moisture, or the incubation of bacteria etc, and may cause wearers to take off masks in situations when they should otherwise be wearing them. There has been much debate globally about the use of face masks for non-Health Care Professionals (non-HCP) during the Covid-19 pandemic. There is agreement in the recommendations that symptomatic individuals and those in healthcare settings should use face masks. But discrepancies and mixed messages exist in relation to the wearing of masks by the general public. By refining some of the lessons from various sources, it is possible to arrive at a set of interim guidelines for the use of masks by the general public in South Africa.

It is the intention of this document to distil these guidelines into a set of recommendations for the South African clothing and textile industry when making masks for use by the general public. These recommendations serve as suggested guidelines. They have been developed through engagements with publicly available research and recommendations from authorities like the World Health Organisation[3] (WHO) as well as through insights provided by colleagues from the University of Stellenbosch[4] (Dept of Chemistry and Polymer Science), University of Witwatersrand[5] (School of Public Health, Industry Specialists[6], the Southern African Clothing Textile and Workers Union[7] (SACTWU), staff at the National Department of Health[8] and the Department of Trade, Industry, and Competition[9].

[1] https://www.nicd.ac.za/diseases-a-z-index/covid-19/frequently-asked-questions/
[2] https://www.nicd.ac.za/diseases-a-z-index/covid-19/covid-19-prevention/
[3] https://www.who.int/
[4] Ms. Adine Gericke, Department of Chemistry and Polymer Science, University of Stellenbosch: http://academic.sun.ac.za/polymer/agcv.html
[5] Dr. Moreshnee Govender, https://www.wits.ac.za/staff/academic-a-z-listing/g/moreshneegovenderwitsacza/ : the School of Public Health, University of the Witwatersrand
[6] Sma Ngcamu-Tukulula, Mr. Rob Stewart and Mr. Kyle Ballard.
[7] www.sactwu.org.za
[8] http://www.health.gov.za/
[9] http://www.dti.gov.za/

Annexure C: Updated Recommended Guidelines for Fabric Face Masks

Fabric or 'cloth masks' do not fall in the same category as surgical or medical masks. Fabric/Cloth masks cannot prevent the risk of contracting the virus in aerosol form (as found in a contaminated atmosphere) since this requires the presence of very fine and highly specialised filters capable of trapping microscopic viral particles. **The shortage of medical grade masks globally and in South Africa means members of the public should not use these critical resources at the expense of frontline health workers.** In this context, and given that evidence indicates that the virus appears to largely exit through the mouth of an infected individual in droplet form (during talking, coughing or sneezing) it is believed that if the fabrics and filters used in the manufacture of cloth masks are chosen suitably and designed to fit users accordingly, these masks can play an important role in reducing the community transmission of the virus and offer some degree of protection for the user. They further appear to lower the risk of contracting the virus from contaminated surfaces by acting as a barrier to touching one's face. The function of such public masks may be enhanced or impeded by the usability of the design and the combination of products, although it is also believed that any mask may be better than not wearing a mask.

2 SA's Localisation Objectives

⇒ In line with the Republic of South Africa's Industrial Policy Acton Plan[10] (IPAP) and the Clothing, Textile, Footwear and Leather (CTFL) Master Plan's policy objectives it is highly recommended that manufacturers source textiles made locally, by local manufacturers, when making fabric/cloth face masks.

⇒ All textile/fabric quality recommendations for making fabric face masks, found within this document, are qualities found in textiles that are locally made in the Republic of South Africa.

⇒ It is imperative that fabric/cloth face mask manufacturers ensure that efforts to manufacturer masks are done within the boarder context of supporting South Africa's Clothing and Textile Industry, and our government's efforts to ensure localisation of value-chains and boarder economic prosperity – in keeping with our country's developmental objectives and Industrial Policy.

⇒ A list of local textile manufacturers is found in the Appendix A of this document.

[10] http://www.dti.gov.za/industrial_development/industrial_development.jsp

3 Basic Performance Requirements of Fabric/Cloth Face Masks

a) The performance of fabric/cloth face masks varies greatly with the shape and fit of the mask[11] as well as the fabric structural properties and number of layers.[12]

b) The objective of a fabric face mask is to act as a physical barrier to extremely small droplets generally upwards of **5 microns in size** secreted during talking, sneezing or coughing (WHO 29/4/2020).

c) The higher the performance of the mask with regard to barrier efficiency the better.

d) Masks must be breathable.

   i. Should the mask prevent one from breathing easily, this will present a serious danger to the health of the wearer - not only from becoming oxygen deprived but also because the mask will promote risky behavior like the need to touch the face and remove or adjust the mask during wear, increasing the risk of transmission of the virus.

e) Masks must be designed to fit properly and be comfortable to wear.

   i. Mask style and design features will contribute to user fit which should follow closely the contours of the face especially around the nose bridge and under the chin to reduce leakage out and into the mask.

f) Mask style and design features will contribute to user fit which should follow closely the contours of the face especially around the nose bridge and under the chin to reduce leakage out and into the mask.

g) Cleaning and disinfection of all the components should be easy to carry out at home.

h) All components should be durable and should maintain their integrity during the full expected life span of the product or components.

i) All masks should be accompanied by instructions clearly explaining how it should be worn and cared for what the limitations of a mask are and when the mask or its components must be replaced.

[11] Shakya, Kabindra M.; Noyes, Alyssa; Kallin, Randa; Peltier, Richard E. (May 1, 2017). "Evaluating the efficacy of cloth facemasks in reducing particulate matter exposure"(PDF). Journal of Exposure Science & Environmental Epidemiology.

[12] Chughtai, Abrar Ahmad; Seale, Holly; MacIntyre, Chandini Raina (June 19, 2013). "Use of cloth masks in the practice of infection control – evidence and policy gaps". International Journal of Infection Control.

4 Fabric Selection for Fabric Masks

a) Tests have shown that at **least two layers** of fabric is are sufficient for balancing performance and comfort (as indicated above).

b) An increase in the number of layers will improve the barrier efficiency, but have the opposite effect on breathability.

c) Using three layers, selecting a non-woven (or similar) fabric with strong filtering capability (barrier efficiency) as the middle layer (with the accompanying inner and outer layers providing comfort, structure, and some additional protection) is recommended.

a) Ideally this middle layer (filter) should be inserted into the mask (or removed) via an 'envelope' style design to allow for improved cleaning and easy replacement filters when worn out.

b) It is recommended that the pocket into which it fits be at least 120 mm by 100 mm to ensure compatibility between multiple masks and filters in production domestically.

c) Clear markings or design options must be used to distinguish between the outside of the mask and the inside of the mask.

4.1 Guidelines for Fabric Selection

4.1.1 Inner Layer (next to face)

a) The main purpose of this layer is to provide a smooth, soft, pleasant feel against the skin.

b) The fabric should not irritate the skin in any way or allow the build-up of moisture or excessive heat in between the skin and the mask.

c) Avoid water repellent fabric that inhibit the absorption of droplets. It must not wet easily or accumulate excessive moisture with breathing.

d) The fabric should have very high air permeability and should not restrict normal breathing.

e) Synthetic fibres are recommended for quick drying properties.

f) If cotton, poly-cotton or viscose are used, care should be taken as these fabrics can be highly water absorbent and might become wet against the skin. They can also impact on heat generation, potential fibre/fluff shedding and drying time after washing.

g) Options: Plain weaves (lightweight, low count), warp knit polyester 'mesh'; lightweight single jersey, spunbond nonwovens (providing air permeability is high and fabric is washable)

4.1.2 Middle Layer (optional filter layer)

a) The primary function of this layer is to trap or stop particles 5 micron and larger.

b) It should have a **barrier efficiency of at least 75%.**

c) Filter fabric should not restrict air permeability or impede on the air permeability of the completed mask.

d) It is suggested that the filter fabric should not block > 25 % of airflow through the fabric.

e) Filter fabric should not shed fibres or disintegrate with use in any way, causing potential of fibre inhalation or failure to filter.

f) It should not add or create unnecessary heat load.

g) Filter should be replaceable via a pouch between inner and outer layer of mask (envelope).

h) It must be possible to disinfect filter daily or wash with hot water [Minimum filter size 100mm x 120mmm]

i) Ideal product – non-woven or similarly performing fabric that meets the recommended requirements.

4.1.3 Outer Layer (faces outwards)

a) This layer can be woven, warp- knitted or made from a suitable nonwoven fabric.

b) Fabrics should not allow liquids to move through them.

c) Hydrophobic or water repellent properties are recommended to prevent wetting from external sources and improve soil repellence.

d) Fabrics should not restrict normal breathing.

e) Care should be taken that this layer does not ruin the breathability of the mask

f) Fabric choice should be suitable for the design of the mask - some designs may require a firmer fabric while others may require fabrics with more drape.

g) A firm finish will prevent the mask from collapsing with breathing.

h) Outer and inner layers can potentially be of the same fabric.

4.1.4 General Remarks

a) Fabrics should not contain any toxic chemicals or excessive lint (especially the inner layer).

b) The outward facing and inward facing of the mask must be clearly distinguished.

c) A new prototype can be easily tested for comfort by wearing it for at least 30 minutes.

d) Disinfection of all the components should be easy to carry out at home and components must not deteriorate with use/cleaning.

e) Fabrics should be able to resist washing in hot water – not easily damaged.

f) Components that are not removable should be resistant to at least 100 wash cycles.

g) It must be ensured that proper airflow is achieved when all the layers are combined.

h) One component with poor air permeability can cause a total failure in breathability

i) NOTE: If a filter layer is not used, the combination of the two layers must provide a 5 micron particle barrier efficiency of at least 75%.

5 Designs for Fabric Masks

a) Mask style and design features will contribute to user fit and should follow closely the contours of the face especially around the nose bridge and under the chin to reduce leakage out and into the mask.

b) A wire insert, in middle of the mask that sits over the nose bridge area of mask, will allow the user to mould the shape of the mask around the nose bridge for a closer fit.

c) Comfortable elastic bands/or cloth tie-straps of adequate size and shape for attachment either around the ears or the head should **facilitate comfortable fit.**

d) Further adjustments to the dimension of this elastic/cloth tie-straps will enhance fit for more users permitting flexibility in the adjustment.

e) The ties or elastics used to fit the mask to the face should not be designed to require that the wearer touches the front of the mask at all.

f) Masks should be comfortable to wear. Fabrics selection should consider performance properties such as moisture management and thermal discomfort (guideline for fabric selection 4.1 above).

g) Discomfort will undermine one's health by promoting the need to touch the face and remove or adjust the mask during wear.

h) Bearing in mind that different fabric constructions and innovations allow for different properties and functions, there is merit in a mask designed from at **least two layers of**

suitable fabric or three layers of such fabric (two layers plus an extra third barrier/filtration layer in the centre).

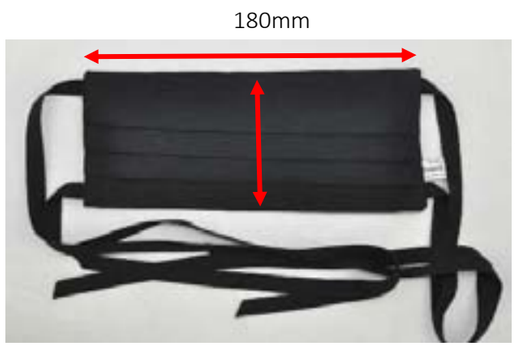
i) Masks must be designed to fit properly, ideally covering at least 50% of the length of the nose and fit to 25mm under the chin.
   a. A guideline for the adult size of pleated mask designs is 180mm for the width and 160mm for the length (maximum unpeated length).

j) Additionally, manufacturers should indicate sizing of masks:
   i. Adults: S/M/L/XL
   ii. Children: S/M/L

k) Children sizes can be considered by downsizing the adult sizes until further anthropometric data is available to guide a more informed decision.

l) The suggested size for the removable filter is 120 x 100 mm.

m) The dimension for a simple pleated masks design is illustrated below:



j) It is useful to provide markings or features that help the wearer to distinguish between the inner layer and outer layer of the mask in order to prevent wearers from placing the wrong side against their faces.

k) **Special needs may arise within some groups of society** (such as hearing-impaired individuals who rely on lip reading) whose needs should also be considered when making masks.

l) Other users such as children and those wearing spectacles should also be considered.

m) Fabric Face Masks for different seasons and climates must also be considered.

n) When adjusting to climate and seasonal needs, the fabric used should follow recommended guidelines – adjustments must not compromise fabric functionality as described in the guidelines.

6 Instructions for Using Fabric Masks

a) Clear instructions should be provided to consumers about the capabilities and limitations of masks.

b) At the very least guidance should be given that when re-usable fabric masks are worn:

c) They do not constitute medical PPE nor are they a replacement for normal precautionary hygienic measures such as handwashing, not touching one's face, coughing or sneezing into a tissue or elbow and keeping a proper social distance of 1,5m from other people.

d) The wearer should ensure the masks have been appropriately washed and disinfected before use

e) Clear instructions must be provided around the proper protocol for wearing masks, including at a minimum that wearers should avoid touching the mask during use and that when putting on or taking off the mask, one's hands must have been cleansed after practicing appropriate hand hygiene;

f) That re-usable masks or the components used within the masks may need to be replaced if they are damaged or worn out, or if they have exceeded their lifespans or use; and

g) **That children should be supervised at all times when using a cloth mask**, and they are not recommended for infants who may struggle to breathe with a mask or even choke if they put parts in their mouths.

h) A user-guide MUST be supplied with a mask on how to wear and how to care for it.

i) A fabric face masks should generally not to be used by Health workers, working in a health care environment.

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7 Appendix A: Reference List of Local Textile Manufacturers.

Reference list of local manufacturers of nonwoven and woven textiles and elastics for inputs for fabric face masks for the public[13].

7.1 Manufacturers of Nonwoven Textiles

Company	Key contacts	Province	Category/ ies	Product/s that your company can offer clothing manufacturers for making masks, and practical description of how your product/s assist in protection
Beier Envirotec	Posh Moodley: 083 708 5378 pmoodley@beier.co.za	KZN	Fabrics	Manufacturer of: needle punched nonwovens. Can be used as the outer layer of masks. Their nonwovens provide dust loading capacity, comfort and a level of filtration and mouldability.
Brits Nonwovens	Dicky Coetzee: 082 901 4117 dicky.coetzee@brits.co.za	KZN	Filters	Manufacturer of: Polypropylene/ polyester combination filters. Can be used as filter in the middle of two layers of fabric. Can produce 50m per month
Feltex Nonwovens	Robert Gooch: 082 905 9958 robertg@feltex.co.za John Mauer: 082 909 4402 Johnm@feltex.co.za	KZN	Fabrics	Manufacturer of: needle punched nonwovens. Could be used as inner or outer layer of masks. At the moment they do not supply products outside of the automotive industry, but they would be happy to work with mask manufacturers to try and meet the standards required for face masks.
Fibertex	Sefton Fripp: 082 903 6714 SEFR@fibertex.com Clive Hitchcock: 076 413 0899 cahi@fibertex.com	KZN	Filters	Manufacturer or: nonwovens and nanofiber treated products. Can be used as inner or middle (filter) fabrics and media. Functions include moulding support, particulate efficiency layers and barriers. Their adhetex product is made from PET/ PVDF fine fibres is a nano material most commonly used in High-Energy Particulate Arresting (HEPA) filters for masks, A/C units, automotive components and domestic filters i.e. vacuum cleaners. Their breathetex product is made from polyester and is one of the

[13] This list is subject to available information and will be updated regularly. Please monitor the DTIC's website periodically for updates.

				components in FFP1 & 2 masks where it is used to mould and shape the masks. It sits adjacent to the melt-blown and outer spunbond layer
Filtafelt	Anil Chandran: 076 170 0702 Anil@iffgroup.com	Gauteng	Fabrics & Filters	Manufacturer of: nonwovens that can be used as outer and inner layer of masks, and filters. Their 200 gram/m2 weight, 300 gram/m2 weight and 400 gram/m2 weight Polypropylene nonwoven may be used to manufacture masks.
Freudenberg Nonwovens	Fiona Shaw: 083 658 4095 Fiona.Shaw@freudenberg-pm.com	W. Cape	Fabrics & Filters	Manufacturer of: nonwovens that can be used as outer and inner layer of masks, and filters. They can produce a dense polyester nonwoven filter layer, as well as hydrophobic and hydrophilic nonwovens as necessary.
Inno Textiles	Oliver Wilhelm: 082 440 7021 oliver@innotextiles.co.za	KZN	Filters	Manufacturer of: nonwoven fabric for outer or inner layer of mask and middle filter. They produce needled and heat-set or calendered filter media manufactured from 100% polyester in weight ranges from 120g/m² and up. Their producs can be moulded, sewn or welded to make masks. Media could be used as the middle layer of a three layer mask, or if they produce a slightly heavier media at about 200g/m², this might be used for manufacturing a single layer mask. Can produce 5000m per day if required.
Romatex Home Textiles	Helmut Höck, +27 (82) 566 7522 , +27 (21) 933 9800, helmuth@romatex.co.za	KZN & Western Cape		Manufacturer of: nonwoven fabric that can be used as the filler (middle layer) or the outer layer in a multi-layered mask. They manufacture 100% polyester non-allergenic non-woven fabric.

Spunchem	Gary Sweeney: 082 652 0463 garys@spunchem.co.za Thokozani Mbhamali thokozanim@spunchem.co.za Sandy Stewart: 074 999 7009 sandys@spunchem.co.za	KZN	Fabrics & Filters	Manufacturer of: nonwoven fabrics. Can be used as inner and outer layers, as well as middle filter. Spunbond can be produced to any gsm and can be used as a highly breathable outer and inner layer. Standard meltblown is produced to 25gsm to 50gsm and can be used as a middle layer filter. It has medium bacterial filtration properties and is breathable. They are in the process of developing electrostatic meltblown which can be used as a middle layer and forms a viable anti-viral filter.
Vitafoam	Aldrin John: 083 795 1085 aldrin.john@vitafoam.co.za Loren van Jaarsveld loren.vanjaarsveldt@vitafoam.co.za Johan Booysen johan.booysen@vitafoam.co.za	Gauteng	Fabrics & Filters	Manufacturer of: nonwoven fabric and nonwoven filters. Can be used for inner or outer layer (highly breathable hydrophobic spunbond of any gsm), and middle filter (presently running tests of whether their flexible polyurethane foam 4mm low density can be used as a filter)

7.2 Manufacturers of Woven Textiles

ompany	Key contacts	Province	Category/ ies	Product/s that your company can offer clothing manufacturers for making masks, and practical description of how your product/s assist in protection
nde Tap	Sean Kennedy: 083 615 0298 sean.kennedy@aunde.co.za	KZN	Fabrics	Manufacturer of: Woven and warpknit 100% polyester fabrics. Can be used as the outer layers for masks.
Gama xtiles	Kelvyn Breetzke: 083 297 1485 kbreetzke@cowie.co.za	E. Cape	Fabrics	Manufacturer of: cotton and polycotton woven fabrics. Can be utilised as the inner and outer layer of the mask Specfically supply: (1) CC484 (P48): 100% cotton sheeting, tight weave and can withstand high temp wash; (2) PCS7: 50/50 poly/cott sheeting , tight weave and can withstand high temp wash; (3) FT3: 100% cotton winter sheeting Flannel , comfort and tight weave; and (4) CJ54 (J54): 100% cotton twill excellent for outside layers , strong and tightly woven, would be able to last many washes
slee attex	Michael Borcherds 082 441 7305 michaelb@desleemattex.co.za Larry Unterhalter 082 447 4091 larryu@desleemattex.co.za	W. Cape	Fabrics	Manufacturer of: Woven fabrics of Polyester, Polypropylene, Viscose and cotton. Their fabric can be utilized as both the inner and outer layers of the mask. Fabrics have the following properties: hydrophobic; breathable; washable; and do not contain toxic chemicals. Utilize high density yarns and can customize the fabrics pick count to ensure a pore size of 5 micron or less as per the guidelines. Capable of applying an antimicrobial and antibacterial finish to the woven fabrics which would also assist in reducing infection.. Able to produce 21 000 meters of woven fabric per day. .
lam xtiles	Janice Roberts: 084 083 0404 jroberts@finlamtechnical.com	KZN	Fabrics	Manufacturer of: woven polyester fabrics, circular knitted polyester fabrics, specialised lamination (breathable hydrophilic membranes, PU membranes, PVC films etc, and coating, dyeing and finishing of woven fabrics. Can be used as outer and inner layers of mask

Gelvenor Textiles	Thomas Adlam: 082 774 0758 tadlam@gelvenor.co.za Steve Fitzjohn: 066 264 4581 sfitzjohn@gelvenor.co.za	KZN	Fabrics	Manufacturer of: Woven polyester fabric. Can be used for outer and inner layers of masks. Produce hydrophobic finish, breathable to FFP rated mask standards – with option to do anti-bacterial/ microbial finish. The fabric is durable and has been tested to keep its functionality for up to 40 washes under specific conditions equivalent to a basic disposable face mask
Imraan Textiles	Imraan Bux : 083 325 3243 ibux@itmkzn.co.za Andrew Broughton: 083 3006535 bwerdna@tiscali.co.za	KZN	Fabrics	Manufacturer of: woven polyester as wel as poly-viscose fabrics. Can be used as inner and outer layer of masks. Customisable colours; minimised linting; can be easily washed without changing fabric properties. Materials and capacity for large volume production.
Korteks Textiles	Zayd Tayob: 082 900 5786 zayd@zaydtex.com Khabir Tayob khabir@zaydtex.com	Gauteng	Fabrics	Manufacturer of: 100% polyester woven and warpknit fabrics. Can be used for outer and inner layer of a mask. The warpknit could be used as a filter They have equipment to treat the fabric so that it is water resistant. The warp knitted fabric is a high density net like fabric which could be used as a filter fabric and can be washed and reused easily. It has no stretch.
Nu-Mym Textiles	Farhaad Vally 081 352 2225 Numymtex@telkomsa.net	KZN	Fabrics	Manufacturer of: 1. We can polyester, poly-cotton, cotton and poly-viscose fabrics. Can be used for inner or outer layers of mask. They produce 100% polyester, 65/35 poly-viscose, 100% cotton and 65/ 35 poly-cotton. They can add a blood guard, antibacterial agent and a water repellent finish
Suntex	Eddy Sun 082 333 3888 esun@suntex.co.za	E. Cape	Fabrics	Manufacturer of: woven fabrics. Can be used for outer layer and inner layer Outer layer can be +- 200 gsm woven fabrics in 100% texturized polyester yarns with water repellent finish. Iinner layer can be +- 70 gsm 100% texturized or non texturized polyester yarns
Svenmill	Brent Greenblatt: 083 995 8600 the_mill@svenmill.co.za	W. Cape	Fabrics	Manufacturer of: woven fabrics Can be used for inner and outer layers. Can supply 280cm wide fabrics, a mixture of polycotton (50:50) or 100% cotton. Fabric can be treated with anti-bacterial nanotechnology silver proven to kill 99.99% of bacteria. Awaiting anti-viral results currently in lab testing.
Umzinto Textiles	Muhammad Paruk: 0827862623 mparuk45@outlook.com	KZN	Fabrics	Manufacturer of: woven fabrics Capable of weaving fabrics. Can do specialized finishes such as anti-microbial and anti-bacterial breathable finishes to various textiles up to a max width of 220cm .
Winelands Textiles	Peter Gaal: 082 441 2938 pgaal@winetex.co.za Juanita Wilkinson (Hextex office) jwilkinson@winetex.co.za Karen Bouwer (WC, EC) kbouwer@winetex.co.za Arif Cassim (GAUT) acassim@winetex.co.za Andrew Guy (KZN) McNair.Guy@telkomsa.net	W. Cape	Fabrics	Manufacturer of: woven fabrics. Can be used for inner or outer layer. Can supply range of polyester viscose, poly-cotton and cottons. Able to finish products with fluid resistant finshes

IMPLEMENTING EXTRAORDINARY/ DRASTIC MEASURES AGAINST COVID -19

Guidelines for schools on maintaining hygiene during the COVID-19 pandemic

PURPOSE

These guidelines provide recommendations on the essential cleaning and use of Personal Protective Equipment (PPE) based on risk exposure for schools against exposure to the COVID-19.

COVID-19 is spread by fluid droplets when coughing, sneezing or shouting and can be spread by a person who has been infected **before symptoms occur**, during illness and for a short period of time after they feel better. Researchers estimate that around 44% of infections are passed-on by people who are not showing any symptoms.

Virus particles can survive in the air for a short period of time and can remain on hard surfaces such as plastic or steel for a few days, if not removed with regular cleaning. COVID-19 is spread by contaminated hands touching the hands of others and touching things such as money, credit cards, door handles and counters. When you then touch your eyes, nose and mouth after you have touched other people's hands and things with COVID-19 on it, then you can get infected.

A. PRINCIPLES OF INFECTION PREVENTION AND CONTROL

A safe environment can be achieved through elimination of infectious particles in the air and on surfaces by **always adhering to the Golden Rules:**

1. **Prevent direct contact with persons that are sick.** Educators and learners are requested to only attend school if healthy. Kindly follow the ***Guidelines for the containment/management of COVID-19 for childcare facilities, schools and school communities*** in this regard.
2. **Control measures** include personal protective equipment (PPE) and risk reduction methods as discussed below, e.g. cleaning surfaces with disinfectant to kill the virus.
3. Keep a distance of 1m between persons in any circumstance.
4. Wash hands with soap and water for 20 seconds, or use alcohol-based hand sanitiser after contact with any person or after contact with frequently touched surfaces i.e. phones, door handles etc.
5. Avoid touching your eyes, mouth, or nose with unwashed hands.
6. **Airborne transmission** should be limited by allowing ventilation in classrooms.
7. Cough in the fold of the bent elbow and sneeze in a tissue which you discard and wash your hands.
8. Surfaces that are frequently touched, e.g. toilet door handles, etc, should be cleaned with diluted bleach disinfectant (20 ml bleach per litre water) hourly, or less frequently depending on the circumstance.
9. Avoid places where crowding exists.
10. Comply with the National Lockdown rules.

Annexure D: Guidelines for schools on maintaining hygiene during the COVID-19 Pandemic

B. RISK REDUCTION METHODS FOR SCHOOLS

- Each person (parent, teacher, learner or visitor) that enters or leave a school must wash hands or sanitise their hands at the entrance/gate utilizing hand hygiene stations, equipped with soap (bar or liquid) and water or sanitise (with 70 % alcohol base).
- Take the temperature of each person (parent, teacher, learner or visitor) that enters a school with a Digital thermometer scanner as follows:
  - Remove the protective scanner cap
  - Switch it on and wait for '00' reading
  - Scan the forehead
  - A reading of 37.5 and above indicate possible fever
  - Visitors and staff with a fever are not allowed on the school grounds
  - Learners with a fever must to be kept separate from others until they can return home. Parents/caregivers should be contacted without undue delay
- The installation, supervision, and regular refilling of the stock / equipment is the responsibility of the principal, delegated to the factotum / cleaners.
- Principals must ensure:
  - The rapid procurement / delivery of adequate quantities of products in the ***Basic and Essential Sanitation and Hygiene Package for Each School*** by timely ordering and filling up on stock.
  - Ensure refresher hand hygiene training and reminders to learners
  - Communication to parents about the importance of hand hygiene in preventing the spread of the COVID-19 virus.

Some examples of handwashing stations

C. RISK REDUCTION METHODS FOR CLASSROOMS/OFFICES

Each classroom must have access to:

- A portable handwashing station, handwashing soap (bar or liquid) or hand sanitizer with at least 60 % alcohol base
- A litter bin with lid, lined with a bin liner in which all tissues, paper towels and possible contaminated waste must be discarded

- Paper towels to dry hands or wipe surfaces. Used paper towels must be discarded safely in the litter bin with a lid.
- Face masks[1] (cloth masks) and/or visors
  Note: N95 masks are reserved for use by clinicians treating or looking after COVID-19 suspected or positive patients

- Advocacy material on handwashing must be available. Information messages should also include:
  - Avoid touching eyes, nose and mouth.
  - Follow good respiratory hygiene: covering your mouth and nose with your bent elbow or tissue when coughing or sneezing, then dispose of the used tissue in a bin with a lid.
  - Maintain at least one and a half meter distance between yourself and others.

Hand Hygiene Procedures:

- Frequent hand hygiene must be part of the routine of everyday life in schools. Every person that enters a classroom must wash their hands with soap (bar or liquid) and water or sanitise (with at least 60 % alcohol base) their hands and again when leaving the classroom.

- Surfaces that are frequently touched, e.g. the doorknobs, must be cleaned hourly with a 20 ml bleach per litre water, or disinfectant wipes.
- Utensils like pens and pencils must not be shared amongst learners or teachers. .
- Classrooms must be well ventilated. Coughing (in the bent elbow) and sneezing etiquette (in a tissue) must be adhered to.
- Social distance of 1.5m must be adhered to at all times.

[1] Only effective if used with regular handwashing. Cloth masks to be washed and ironed daily

- Classrooms must be cleaned at least twice a day with a disinfectant.

D. RISK REDUCTION FOR EACH TOILET/BATHROOM

A portable handwashing station, handwashing soap (bar or liquid) or hand sanitizer with at least 60% alcohol base should be within 5m of toilets, for handwashing after using the toilet.

Disinfectant cleaner (Recommend sodium hypochlorite 0.5% (biocide sachets) **or** Bleach mixture of 250ml of bleach to 5 litres of water) must be utilised for daily cleaning of all surfaces.

Surfaces that are regularly touched, e.g. taps, doorknobs and toilet handles must be wiped down hourly with 20 ml bleach per liter water or disinfectant wipes.

E. FOOD PREPARATION AREAS (SCHOOLS WITH NSNP)

Volunteer Food Handlers must wash their hands thoroughly before preparing food. Head gear, face masks and disposable plastic aprons must be worn to prevent droplet transmission.
All surfaces must be cleaned daily with Disinfectant cleaner (recommend sodium hypochlorite 0.5% (biocide sachets) **or** Bleach mixture of 250ml of bleach to 5 litres of water).

Surfaces must be cleaned with at least 60% ethyl alcohol cleaner for wiping down in-between daily cleaning.

F. DAILY DUTIES OF CLEANERS

Daily duties of cleaners include:

1. Clean all surfaces e.g. floors, bathrooms desks daily with Disinfectant cleaner (recommend sodium hypochlorite 0.5% (biocide sachets) **or** Bleach mixture of 250ml of bleach to 5 litres of water).
2. Surfaces that are frequently touched, e.g. taps, doorknobs at classrooms and toilets, toilet flush, must be cleaned hourly with 20 ml bleach per liter water.
3. Collect all the bags with possible contaminated waste in bins in classrooms and offices. Ty the bags and put it in big refuse bags. Ty the refuse bags again.
4. Wear protective gear as discussed below.

G. PERSONAL PROTECTIVE EQUIPMENT (PPE) FOR CLEANING

PPE usage is based on the risk assessment of each situation and is **ONLY NEEDED** where staff are exposed to or the occupation that poses risk of exposure to COVID -19 infected individuals. PPE is classified into categories: **eye and face protection** (goggles, visor, plastic shields), **hand protection** (various types of gloves), **body protection** (apron, coats) and **respiratory protection** (depending on risk – various types of masks). All education

officials and visitors must adhere to The Golden Rules c
discussed above.

In addition, it is recommended that cleaners should have acces
- Heavy duty gloves
- Face masks
- Disposable plastic aprons
- Protective eye gear
- Closed shoes

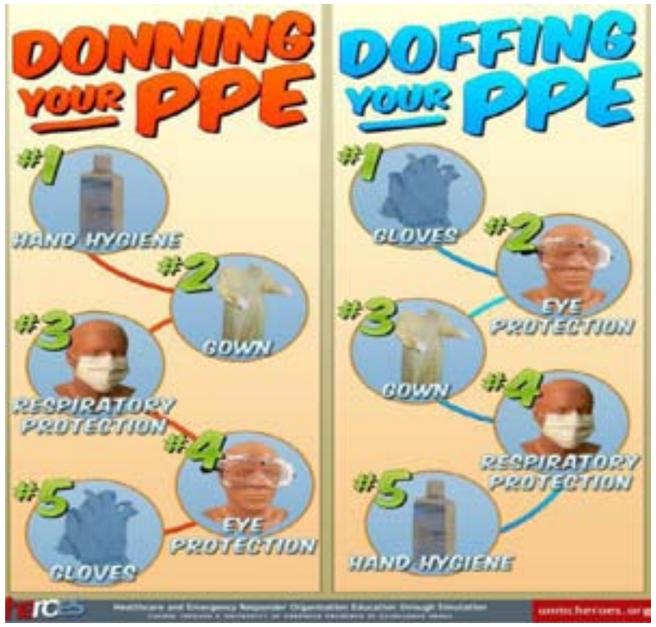
Correct use, necessary hygiene practices and proper dispo
important to avoid cross contamination from PPE to the us
clothes. Cleaners should perform hand hygiene using the pro
before putting on protective gear for cleaning and after rem
changing gloves or after any contact with waste material.

The procedure to put on protective gear (see left side of picture
1. Wash hands with soap and water
2. Put on the plastic apron
3. Put on the face mask
4. Put on the eye protection
5. Put on the gloves

The procedure to take off protective gear (see right side of pictu
1. Wash the gloves with disinfectant and dry with a paper to paper towel in a bin.
2. Remove the gloves and put it on a disinfected surface.
3. Remove the eye protection.
4. Remove the plastic apron and place it in a bin with a liner.

Remove the face mask and place it in a bin with a lid and b
bags).

5. Wash your hands with soap and water.



H. HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK

Note: Masks are only effective when used in combination with the other Golden Rules of prevention listed above.

Cloth masks need to be washed with warm soapy water and dried in the sunlight and/or ironed.
- Before touching the mask, clean hands with an alcohol-based hand rub or soap and water.
- Take the mask and inspect it for tears or holes.
- Orient which side is the top side (where the metal strip is).
- Ensure the proper side of the mask faces outwards (the coloured side).
- Place the mask to your face. Pinch the metal strip or stiff edge of the mask so it moulds to the shape of your nose.
- Pull down the mask's bottom so it covers your mouth and your chin.
- After use, take off the mask by removing the elastic loops from behind the ears while keeping the mask away from your face and clothes, to avoid touching potentially contaminated surfaces of the mask.
- Discard the mask in a closed bin immediately after use.
- Perform hand hygiene after touching or discarding the mask – Use alcohol-based hand rub or wash your hands with soap and water.

I. LEARNER TRANSPORT

All commuter transport services including passenger bus services, taxi services, and private cars transporting learners to school must adhere to the Regulations issued in terms of Disaster Management Act 2002 (Act no 57 of 2002) and all directives set out in the schedule to address and contain the spread of COVID-19 including:

Loading capacity of learner transport: Regulation 11C as amended by the substitution Regulation by a; b and c below:

(a) All Minibuses must reduce seating capacity by capacity to mitigate the spread of the virus.
(b) Bus services, taxi services and e- hailing services shall not carry more than 50% of the licensed capacity; and
(c) Private vehicles shall not carry more than 60% of the licensed capacity, and that all directions in respect of hygienic conditions and the limitation of exposure of persons to COVID -19, are adhered to.

Provision of improved access and hygiene, disinfection control on learner transport.

All operators of learner transport facilities must on regular intervals provide adequate sanitisers or other hygiene dispenser for washing of hands and disinfection equipment for learners.

Embarkation of learners in the vehicles

- All operators must ensure that public transport vehicles are sanitised before picking up and after dropping off learners.
- Operators must ensure that all learner transport vehicles door and window handles, armrest and handrails are sanitised before picking up and dropping off learners.
- Operators must ensure that all learner transport vehicles are clean and tidy.
- All learner transport operators must provide disinfection information materials and procedures.
- All drivers and learners must wear a mask.
- The sanitisers used to sanitise all learner transport vehicles must have a minimum of 60% alcohol content.

The “Dos and Don’ts” when talking about COVID-19

Below are some “dos” and “don'ts” on language when talking about COVID-19:

✔ **DO** talk about the new coronavirus disease (COVID-19). The official name for the disease was deliberately chosen to avoid stigmatisation - the “co” stands for Corona, “vi” for virus and “d” for disease, 19 is because the disease emerged in 2019.

× **Don’t** attach geographic locations or ethnicity to the disease to express contempt or disapproval. When this happens at school or in the classroom, it needs to be discouraged immediately. Teachers themselves should guard against passing jokes and comments linking COVID-19 to a particular ethnic or geographic origin.

✔ **DO** talk about “people who have/may have COVID-19”, “people who are being treated for COVID-19”, “people who are recovering from COVID-19” or “people who died after contracting COVID-19.”

× **Don’t** refer to people with the disease as “COVID-19 suspects,” “COVID-19 cases” or “victims”, which are ways to devalue and disrespect individuals.

✔ **DO** talk about people “acquiring” or “contracting” COVID-19.

× **Don’t** talk about people “transmitting COVID-19” “infecting others” or “spreading the virus” as it implies intentional transmission and assigns blame.

✔ **DO** speak accurately about COVID-19 risks, based on scientific data and the latest official health advice. Know your facts to be able to correct information when needed. Share only facts and information confirmed by official health sources (See WHO myth-busters: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters). If a teachers is unable to respond and correct, the teacher can promise the class to return with fuller information.

× **Don’t** use hyperbolic language designed to generate fear like “plague” or “apocalypse”. “Illness” or “disease” are still OK terms to use.

✔ **DO** emphasise the effectiveness of prevention and treatment measures. There are simple steps we can each take to keep ourselves, our loved ones and the most vulnerable safe.

× **Don’t** share “funny” clips or photos with stigmatising messages.

✔ **DO** honour the scientific and health guidance from the government to stop the spread of COVID-19 in line with the Bill of Responsibilities upheld in the Basic Education Sector. We are guided by the Constitution that is regarded as the supreme law, as well as COVID-19 Regulations. We need to model hope, the truth, rights and responsibilities to keep the most vulnerable among us safe and not promote threats or fear.

× **Don't** emphasise or dwell on the negative or threatening messages that drive fear.

✔ **DO** speak to learners in an age-appropriate way about COVID-19. Help parents learn how to speak to children about the regulations and COVID-19. Encourage learners and their families to have fun and stay cohesive during this time.

× **Don't** hide facts or use technical terms. Be sensitive to what learners see and hear.

✔ **DO** support fellow teachers, families and caregivers of learners affected by COVID-19 with love and compassion without putting yourself or anyone else at risk. Find innovative ways to "meet" with them without physically being in the same place!

✔ **DO** take physical distancing seriously. Follow the guidelines in the regulations and other support materials and publications of the Department of Health. Continued social interaction, however, remains essential in this time.

× **Don't** stigmatise learners and fellow teachers who recovered from COVID-19. They cannot infect anyone else further.

✔ **DO** offer compassionate support to those who are sick or impacted while physically distancing.

× **Don't** allow social isolation. Those impacted need your compassionate support while maintaining physical distance.

✔ **DO** celebrate and promote nationhood during times of crisis. Share messages of hope and unity.

× **Don't** use theological or religious language that fuels fear like "punishment from God" or "curse." The COVID-19 is not a punishment from God or a curse. As a people of the nation of South Africa, we have the responsibility to show love and compassion in the face of pain and suffering.

✔ **DO** encourage those who pray to pray, and those who meditate to meditate or any other form, without infringing on the rights of others who do not follow these practices. They must

be encouraged to do this for healing, wisdom for scientists, insight for public health officials and politicians, for compassionate responses, for protection of children, for a speedy end to the crisis and for generosity in the face of a global economic crisis to ensure that the most vulnerable are supported.

× **Don't** apply religion and spirituality out of context or in a random manner to make a point about COVID-19.

✔ **Do** talk to bereaved families of learners about creative ways to exercise spiritual and religious rituals and apply safe burial practices while still following public health advice.

× **Don't** encourage unadapted religious practices that cause more infections and possible death.

✔ **And finally – above all: DO** love and care for one another.

ASSURE

✔ Correct scientific information is being shared.

✔ Mental health and psychosocial support are provided for learners and families impacted.

✔ Child protection mechanisms continue despite lockdown and social distancing practices.

✔ Families that opt for spiritual support can do so while complying to public health guidance.

✔ Community and social engagement opportunities through virtual methods must be encouraged.

✔ Advocacy for essential health services, ongoing child protection services and response to secondary needs (economic, livelihoods, etc.).

✔ Special additional care and support for the learners with special needs should be ensured.

✔ Learners from child-headed household may require support beyond the school and classroom.

Sources:

https://www.unaids.og/sites/default/files/media_asset/JC2118_terminology-guidelines_en_1.pdf

https://www.who.int/docs/default-source/coronaviruse/covid19-stigma-guide.pdf

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