



Save the Children

**SCHOOL REOPENING ASSESSMENT
REPORT SYNTHESIS**

MOZAMBIQUE, AUGUST 2020



CONTEXT

In response to the global COVID-19 pandemic, the Government of Mozambique declared a national, level 3 State of Emergency at the end of March, 2020, which, among other things, ordered the closure of all educational institutions. In response, the Ministry of Education and Human Development (MINEDH) established an online and distance learning platform so that children could continue their education. Five months later, the COVID-19 infection rates continue to rise. While officially still in a State of Emergency, the government has declared that restrictions will gradually be relaxed in a phased approach, and which will soon include the reopening of schools. It is against this backdrop that Save the Children (SCI), as a strategic partner of MINEDH, decided to carry out the assessment in schools in the seven provinces where SCI operates to highlight the possible risks to children and teachers in relation to school reopening and to provide recommendations on measures that should be taken to ensure a safe school reopening process

ASSESSMENT METHODOLOGY

The assessment randomly selected 192 schools (177 primary, 14 secondary schools and 1 preschool) from 7 provinces and interviewed their respective School Councils in focus group discussions (FGDs), in addition to conducting a visual review of the school and boarding facilities using a observational checklists.

Table 1: Schools assessed by province

Table with 5 columns: Province, Primary level, Secondary Level, Preschool, Total. Rows include Cabo Delgado, Gaza, Manica, Nampula, Sofala, Tete, Zambezia, and Grand Total.

School Councils (SC), were comprised of teachers, community members, children and community leadership. In total 192 School Councils participated in the assessment, which included 1,437 adults (604 female and 833 male) and 211 children (99 girls and 112 boys). The FGDs were mixed and members were selected randomly. SCI field staff administered the FGD questions and led the discussions. The data collection tool was developed based on the Government's protocol for school reopening as well as the GEC Safe School Reopening Guide for Practitioners.

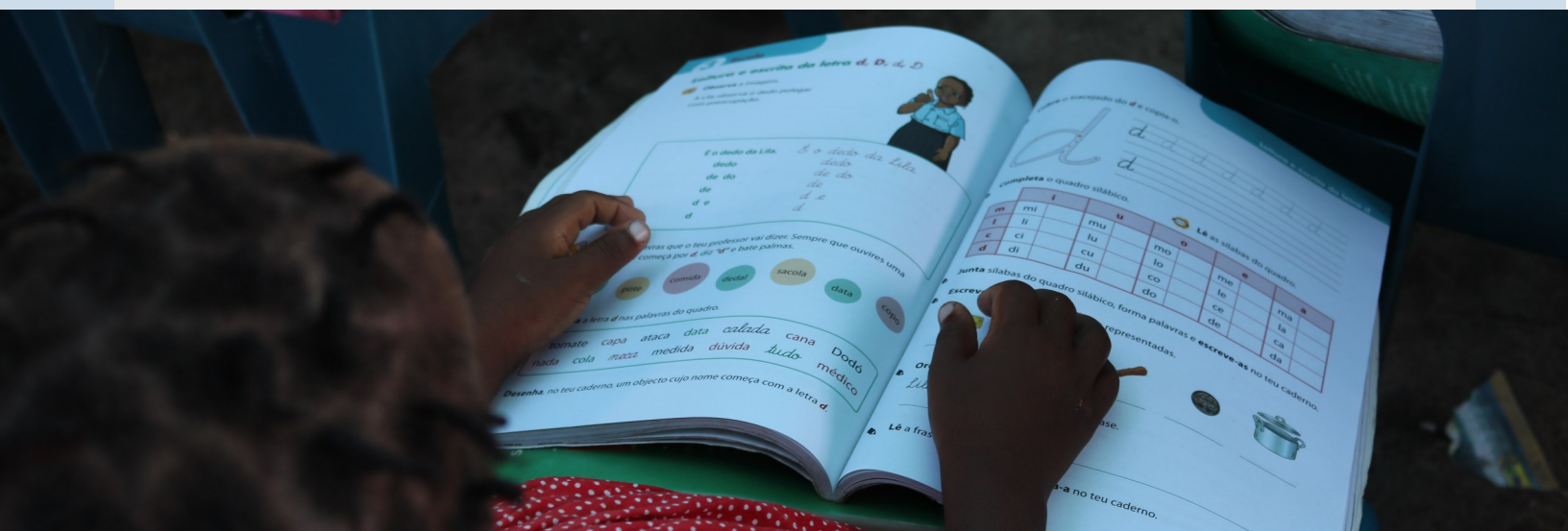
Studentes in Classrooms

Over half (52%) of the School Councils stated that their schools were overcrowded, and have over 50 students per classroom.

Table 2: Number of Children per classroom

Table with 5 columns: Province, Below 30, Between 30 and 50, More than 50, Total. Rows include Cabo Delgado, Gaza, Manica, Nampula, Sofala, Tete, Zambezia, and Grand Total.

More than half of the SC members (69%) stated that their schools would not be able to accommodate all the children in their classrooms if they were to space the desks by 1.5 metres as per government requirements, and noted that up to 30 desks could be accommodated given the spacing, meaning that this would be the maximum number of children that could be present in a classroom at any one time in 89% in the schools.



Access to water & Soap

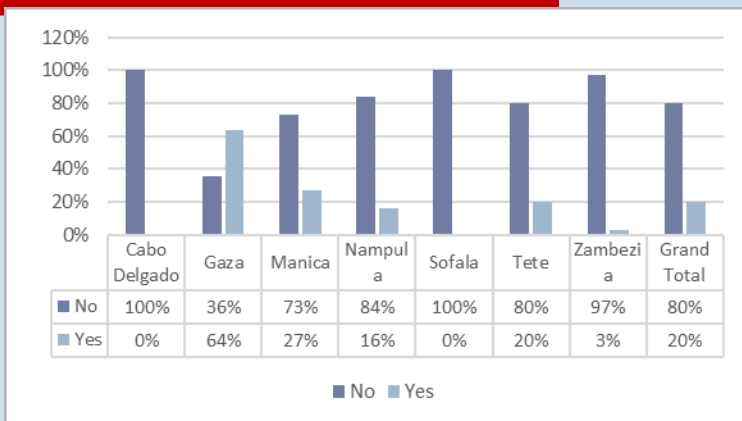
Only 20% of the schools have water taps in the schoolyard. More than half of the schools (55%), use boreholes as a source of water and have access to water all day; the remainder have water at some point during the day. Of the schools that are using boreholes, 63% of the boreholes are either on the school grounds or children have to walk 100 to 2 250 m to the borehole to get water. The remainder have to walk between 250 m to 500m or more to reach the closest borehole. In the schools that do not have boreholes, 38% stated they could store over 350 litres, 53% can store up to 100 litres; and 9% stated that their storage capacity was between 100 and 250 litres. These results show that there are significant water access limitations in many schools which can compromise frequent handwashing.

About 45% of the schools have no soap available for children and teachers to wash their hands, and only 31% of the schools said that they could afford to buy soap a few days per month. Almost half of the SCs (46%) stated that there was no soap available in their schools whilst 32% had soap up to the middle of the month. Only 23% of the SCs mentioned that there was soap available in their school for the next 30 days.

Table 3: Water access in schools

Province	All day access	Access early in the morning when activities	Access during a specific period of the day	Total
Cabo Delgado	20%	0%	80%	100%
Gaza	79%	14%	7%	100%
Manica	59%	27%	14%	100%
Nampula	47%	20%	32%	100%
Sofala	80%	0%	20%	100%
Tete	60%	0%	40%	100%
Zambezia	57%	17%	27%	100%
Grand Total	55%	20%	25%	100%

Figure 1: Schools with taps in their schoolyards



Access to face masks

Regarding the availability of reusable face masks for purchase at the community level, 63% of the School Council members stated that supply is weak, and few people sell masks. In terms of the price, more than half of (56%) mentioned that the price is up to MZN 30 (0.42 USD) per mask. There were concerning reports which suggested that due to the weak supply and/or the cost of the face masks, mothers and children borrowed masks from others when going to health facilities.

Risks of COVID-19 transmission for children going to school and while in school

Around 77% of School Council members confirmed that children travel between 0 to 6 km to reach school and the majority (81%) go on foot, 16% ride bicycles, and 3% use public transportation. Despite the fact that most of the children have to travel long distances to school on foot, from a COVID-19 risk perspective, it is positive that very few children use public transportation. However, there is still a risk of contamination while walking to school as children may be in contact with infected surfaces or if physical distancing is not observed.

70% of School Council members stated that they believed that their schools could not provide the conditions to allow children to play without the risk of gathering in large groups, and 30% believed that it would be possible to apply measures to control children and keep them from gathering in groups, thereby reducing the risk of pupil-to-pupil COVID-19 contamination.

Referral mechanisms for schools

According to MINEDH, in the case of suspected COVID-19, children and teachers should be referred to the closest health facility to be assessed by a qualified health professional. Almost half of the SC members (49%) reported that the distance was over 6 km (Figure 4), whilst for the rest it was between 0-6km. This shows that health services are somewhat distant for almost half the schools which may pose access challenges for ensuring the referrals are successful.

Of the assessed schools, 61% do not have established referral mechanisms, and 56% of the schools do not have the phone contact of a health care professional or of their closest health facility. It was also found that 83% of schools have school sanitation groups. These groups can be trained to play a key role for ensuring that the schools uphold minimum sanitation standards, particularly in the context of COVID-19 prevention.

Conclusions

1. There is overcrowding in 52% of the schools, and 69% of the schools do not have the infrastructural capacity to reduce overcrowding while keeping the same number of students in the school, considering the 1.5m spacing requirements.
2. More than half of the schools have access to water through boreholes and a little more than a third have these boreholes in the schoolyard. However, water storage capacity is still challenging as most are able to store less than 100 litres.
3. Almost 80% of the schools do not have taps in the schoolyard, meaning that school reopening will be risky unless significant investment in WASH infrastructures can take place, as the availability of water for hand washing in the schools will be crucial.
4. Almost half of the schools do not have soap available for hand washing
5. 79% of schools do not have specific entrances into the school yard. This will make the process of screening and the disinfection of children and teachers on entry difficult.
6. There is a significant risk of transmission among the children through physical contact because the majority of teachers use methodologies that require physical contact and exchange of learning material between teachers and children as well as among the children which will increase the risk of transmission from pupil to pupil.
7. Access to reusable face masks is low because few people are making and selling them in the communities and recommending their use will be difficult for the children and teachers. It will also be difficult to recommend that each child have 2 masks for hygiene purposes and the practice of sharing masks will increase, which will exacerbate the risk of contamination.

School Infrastructures Observation

A large proportion of the schools (79%) do not have specific entrances for the establishment as disinfection points for children and teachers when they arrive at school. Schools that have multiple unmonitored entry points will have difficulty screening teachers and students for basic symptoms and to enforce hand sanitation on every entry, whereby potentially increasing the risk of infected people entering the school yard.

It was found that 87% of the observed classrooms have windows and good ventilation. When the visit was conducted, 81% of the classrooms were clean although 65% of the toilets did not have soap. When the School Council members were asked about what needed to be improved in order to ensure safe school reopening, they placed the most emphasis on classroom rehabilitation and construction (44%), while a few spoke of ensuring the availability of water, and the provision of school fencing to increase security and reduce uncontrolled access to the school premises.

Table 4: Schools that have a single entrances to school yard

Cabo Delgado	20%	80%	100%
Gaza	58%	42%	100%
Manica	88%	13%	100%
Nampula	87%	13%	100%
Sofala	80%	20%	100%
Tete	80%	20%	100%
Zambezia	81%	19%	100%
Grand Total	79%	21%	100%

RECOMMENDATIONS

- School Councils should be trained in the school reopening protocols and requirements circulated by the government so that they are in a position to work with parents and fully support the safe school reopening process.
- Because the construction of classrooms is expensive and might not be a short-term solution, recommendations include considering a reduction in the time students stay at school and having more smaller classes per day, and holding lessons outside of the classroom when it is not raining or there is no strong wind.
- Local and more sustainable mechanisms should be prioritized and adopted to ensure the availability of water and hand washing stations (use of Tippy-Taps, as an example).
- Buckets and 200 litre water drums should be provided to schools in order to ensure the constant availability of water for hand washing throughout the day. School Councils should mobilize the community members to ensure that schools have a constant supply of water.
- Schools should establish one school entry point where temperature taking and sanitization for children and teachers can take place before entry into the school. Acquiring, distributing and training teachers and school guards on the correct use of infrared thermometers should help to improve the screening of COVID-19 among teachers and pupils.
- Training teachers on how children and themselves should behave in and out of school, to avoid contact with the virus. Awareness raising should be done with children to ensure they are aware of the need to practice social distancing and frequent handwashing, particularly during the breaks. Child friendly approaches will need to be put in place in the schools to ensure that children refrain from physical contact during play and avoid forming large groups.
- The government and its partners should communicate with community members and children to promote the use of local disinfection material such as ash as an alternative if soap is not available for every day use in schools.
- Support capacity building for reusable facemask production in order to increase the supply of facemasks at cheaper prices in the communities.
- Clear referral mechanisms should be established between schools and health facilities.

