

# Same Storm, Different Boats:

The Safe and  
Equitable Conditions  
For Reopening CPS  
in 2020-21



**CHICAGO  
TEACHERS  
UNION**

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We are grateful to the United Teachers of Los Angeles (UTLA) union for their amazing report, *The Same Storm, but Different Boats: The Safe and Equitable Conditions for Starting LAUSD in 2020-21*, UTLA, July 2020, [https://www.utla.net/sites/default/files/samestormdiffboats\\_final.pdf](https://www.utla.net/sites/default/files/samestormdiffboats_final.pdf) and for allowing CTU to borrow some of their structure and text in the report that follows.

Parents, students, and teachers want to go back to school in person and to do so safely. Will that be possible in September? Is there a number of educator or student deaths that we are willing to accept in order to have in-person school? Are CPS, the city, and the state willing to spend the money to make school reopening safe?

These questions are of particular concern in Chicago, where 84% of students and 50% of staff are Black, Latinx, multi-racial, or Native American.<sup>1</sup> The consequences of racist health care, discriminatory housing, and employment practices are that these students, educators, and their families are at greater risk of contracting and becoming seriously ill from COVID-19.<sup>2</sup>

Also, a large percentage of staff are at increased risk of serious illness or death from COVID-19 due to their age and/or underlying health conditions. Half of CTU's membership live in the Chicago zip codes with the highest rates of COVID-19, totaling well over 35,000 positive cases.

For capitalists and the politicians who represent them, opening up the economy is more important than saving lives: profits over people. They will not subsidize parents who need income and also need to be home with their children if schools are closed. Because of lack of childcare options, many parents cannot return to work if children are not in school. Families are being forced to choose between their health and their livelihood.

Remote learning is a poor substitute for in-person learning. On the other hand, many of the essential features of in-person learning will not be possible if strict social distancing in schools is implemented. Students will not be able to work together in small groups. Teachers will not be able to work with a student one-on-one or use proximity to help calm a troubled student. Teachers in early grades will have to disallow the physical contact and sharing among students that is a natural part of their development.

Differences in access to technology, caused by economic disparities, were evident during the recent period of remote learning. On the whole, Black and Latinx families were less likely to have sufficient devices, Wi-Fi, and at-home parents. However, prematurely returning to school is not the answer, as these same families are the ones most likely to suffer dire consequences from increased spread of the pandemic.

This document first asks, who is suffering the most and why? Next it outlines practices that must be in place to en-

sure that our most vulnerable communities are helped, not hurt, by the restart of schools. Throughout, results from our CTU member survey will provide insight into the concerns that are impacting educators, students, and their families. Finally, the document discusses how funding must be drastically improved if schools are to start safely and equitably.

## I. SAME STORM, DIFFERENT BOATS

*We're all in this together* is a common slogan during this crisis. What this platitude fails to acknowledge is that, while we may all be in the same storm, we are not all in the same boat. The United States is at an unprecedented moment of overlap between a global pandemic, deep economic recession, and an uprising for Black Lives that exposes the structural race and class fissures that have resulted in higher unemployment, exposure, infection, and death rates in Black and Brown poor communities.

### THE COLOR OF COVID-19

Unsurprisingly, the data is increasingly showing that Black and Latinx Chicagoans account for disproportionate COVID-19 cases or deaths. Latinx residents, 29% of the population, have accounted for 45% of COVID-19 cases and Black residents, 30% of the population, have accounted for 43% of the deaths.<sup>3</sup>

Black and Latinx communities are more likely to experience economic and social factors that increase risk of illness and death. Below are just some examples:

- More likely to live in high-density housing (making social distancing difficult), because of decades of residential housing segregation caused by institutional racism. There are 58,872 people who lived doubled-up in Chicago in 2018. Of those, 60% were black, 30% white, 1% multiracial, and 12% other races; 27% identified as Latinx.<sup>4</sup>
- More likely to live in multi-generational households, increasing the risk of infection of vulnerable older family members. Such living situations also make it more difficult to isolate if an individual gets sick, as space may be limited. In Chicago, 90% of all virus fatalities had underlying health conditions.<sup>5</sup>
- More likely to live further away from medical centers

"The district should take into consideration the health of all students, teachers, and staff. This year I had a student with a pacemaker. How is she supposed to return in the Fall? How are daily temperature checks going to be taken without school nurses in every building?"

Response of a Chicago educator to the CTU's end-of-year survey about reopening school buildings

and to be uninsured, leading to poorer underlying health and barriers to care, increasing the likelihood of severe illness and death from COVID-19. For example, African Americans, Latinx, and Native American individuals are more likely to have chronic illnesses such as obesity, heart disease, diabetes, and lung disease — all of which are linked to higher COVID-19 fatality.

- When employed, more likely to be required to work outside the home in “essential” jobs that place them in harm’s way for infection. For example, although Black workers make up only 12% of all employed workers, they make up 36% of all nursing, psychiatric, and home health aides.<sup>6</sup>
- More likely to have a job without paid sick leave, increasing their exposure to other workers who may be infected, and increasing the likelihood that they themselves will expose others to COVID-19. Latinx workers are less likely to have access to paid leave compared to white workers.<sup>7</sup>
- More likely to rely on public transportation, increasing the risk of viral exposure.<sup>8</sup>
- More likely to live in areas with poorer environmental and air quality, increasing the likelihood of preexisting health conditions. Chicago is considered the epicenter of asthma; 22.3% of high school students and 27% of the Black student population have been diagnosed with it.<sup>9</sup>
- Undocumented immigrants are ineligible for most governmental relief funds, and ineligible to enroll in the Affordable Care Act. More than 5 million U.S.-born children who have undocumented-immigrant parents are likely to suffer extreme poverty. As a result, they are much more likely to be uninsured and thus more likely not to receive the health care they need.<sup>10</sup>
- Close to 67,000 (19%) of CPS students are English Learners.<sup>11</sup> While many ELs are native born, they overwhelmingly come from immigrant families. In addition to similar healthcare context as undocumented immigrants, EL’s families face added difficulties in poor translation or no translation in their native language. There are approximately 183,000 undocumented immigrants living in Chicago.<sup>12</sup>

The effect on human lives is quantifiable: the disproportionate effect of coronavirus means that at least 700 Blacks, Latinx, and Asian Americans died because of structural racism that puts them more at risk compared to white people.

Restarting physical schools during the pandemic will inevitably increase the risk of infection and death for all Chicagoans, but especially for over 271,179 CPS students and families who fall into a vulnerable category because of race and/or poverty.<sup>13</sup>

## **STUDENTS WITH DISABILITIES AND OTHER HEALTH CONCERNS**

Students with disabilities make up 14.6% of the population of CPS. The shift to crisis distance learning has been especially disruptive for these students. For families of students with disabilities who are also low-income or who do not speak English, the situation becomes even more fraught. Unfortunately, research shows that people with intellectual and developmental disabilities (IDD) are more likely to be infected, and more likely to experience serious illness and death from COVID-19. Children younger than 17 years old with IDD were nearly 9 times more likely to contract COVID-19 than children without these disabilities. Initial outcomes show that people with IDD who contract COVID-19 may be 2.5 times more likely to die than those without such a disability.<sup>14</sup>

The inadequate guidance from the federal and state levels does not help districts meet the challenge of how to ensure the needs of students with disabilities are met during the pandemic era of education. Special educators are keenly aware of the challenges of distance learning for their students. Given the high risk of infection and death for vulnerable students, it is critical that we guarantee extra funding to ensure all supports are in place to meet the needs of our students with disabilities. Without targeted funding, the services offered will not outweigh the risks endemic to in-person learning.

“As they think about returning, they need to closely examine Early Childhood classes, pre-K through 1st grade especially, and consider the structures necessary for learning. In those environments, children need to closely interact and play collaboratively to learn. How is this possible 6 feet apart?”

Response of a Chicago educator to the CTU’s end-of-year survey about reopening school buildings

## **II. A SAFE AND EQUITABLE SCHOOL REOPENING**

To ensure that our most vulnerable students and families are helped, not hurt, by the starting of school, we must implement best practices to mitigate the risk of viral transmission. These practices have been gathered from many sources, including scientific guidelines set forth by the Centers for Disease Control and Prevention (CDC), the Illinois State Board of Education (ISBE), practices from other countries that have reopened schools especially in Scandinavia and Asia, practices from childcare centers in the United States that have been caring for the children of essential workers, and feedback from CTU educators.

Restarting schools safely and equitably occurs in a broader setting of community preparedness, requiring greater federal and state resources to support a strategy of physical distancing in small, isolated groups, with a strong emphasis on hygiene. Finally, all plans and practices must be responsive to the rapidly emerging epidemiology of this novel virus.



### **BROAD COMMUNITY PREPAREDNESS**

There is no safe restart of physical schools without the foundation of broad community preparedness that demonstrates a commitment to stopping the spread of the virus through objective metrics and dramatically increased funding. This includes:

- Testing of 100% of the symptomatic individuals in the community
- Clear, specific, and consistent guidance from public health officers
- Decreasing or stable infection and hospitalization rates in Cook County for 14 days and an absolute case number that indicates community spread has stopped
- Close monitoring of the transmission rate (R0 rate) to ensure it does not rise above 1
- Paid sick leave for parents to be able to keep symptomatic children home
- Clear framework to protect against personal liability, in acknowledgment of the fact that there is no way to eliminate all risk during an active pandemic
- Greatly increased federal and state funding to support physical distancing and hygiene practices

### **TESTING AND CONTACT TRACING PROTOCOLS**

- A robust, free testing and contact tracing system for the entire community that explicitly addresses access issues about Black, Brown, and low-income communities

- Assigned seating in classrooms and on buses so that contact tracers will know exactly who was sitting next to someone who is found to be infected
- Rapid response and quarantine protocols upon any active infections in students or staff<sup>15</sup>
- Upon discovery of active infections that necessitate a classroom or school closure, clear protocols and parameters for restarting at the school and district level<sup>16</sup>
- Clear procedures for confirming that members of students' household do not have the coronavirus<sup>17</sup>

### **PHYSICAL DISTANCING**

- Keeping students in small groups ("pods") with as little contact with others as possible<sup>18</sup>
- Plans that account for siblings to maintain the "pod" protections for households
- Staggered arrival, recess, lunch, and pickup times
- Drastically reduced class sizes to no more than 12 per classroom
- Specific implementation plans given each school's unique physical layout
- One-way travel in hallways, and lockers assigned by "pods" and/or the elimination of lockers to avoid mingling in hallways
- Personal protective equipment provided for staff and students
- Reduced furniture in classrooms to increase space for physical distancing and reduce surfaces needing disinfecting
- Dramatically changed transportation plans to ensure social distancing
- Increased air circulation in classrooms and buildings<sup>19</sup>
- Instruction provided in outdoor settings when possible

### **EMPHASIS ON HYGIENE**

- Frequent and thorough hand washing supported by installation of portable hand-washing stations; adjusted lesson plans to factor in time for hygiene; and considerations for additional supervision needs for younger children's hand washing regimens<sup>20</sup>
- Strict cleaning and sterilizing regimens, including ensuring schools have proper supplies (including paper towels given the likely need to eliminate hand dryers in bathrooms)
- Special attention for high-touch surfaces such as drink-

ing fountains, door handles, and faucet handles<sup>21</sup>

- Adequate supplies of Personal Protective Equipment (PPE) for all staff and students
- Self-directed symptom and temperature screening of students by parents before they leave home (and see above regarding newly added symptoms)<sup>22</sup>
- Student and staff symptom and temperature screening before entering buses or school buildings (although see above regarding the unknown role of asymptomatic transmission by children)
- Designated rooms for isolating students who exhibit symptoms<sup>23</sup>

## **PROTECTIONS FOR HIGH-RISK STUDENTS AND EMPLOYEES**

- Clear options and accommodations for staff and pupils who are at higher risk or have family members who are higher risk (and see above regarding CDC's recently added risk factors)<sup>24</sup>
- Clear guidelines for students and staff with health issues that cannot safely wear PPE or that need specialized PPE (such as deaf and hard of hearing students and staff who rely on lip reading)<sup>25</sup>
- Clear guidelines for safe service delivery of IEP- required services for students with disabilities
- Additional support for parents who have vulnerable individuals in the household to be able to stay home to reduce chances of infection and death
- Policies designed to mitigate the disproportionate risk of infection, serious illness, and death in Black and Latinx communities

## **INCREASED HEALTH, EMOTIONAL, AND ACADEMIC SUPPORTS**

In addition to taking steps to mitigate the risk of viral transmission, CPS should also take steps to provide increased supports for students, many of whom may be returning to school having experienced increased trauma from the health and economic effects of the pandemic.

- A nurse in every school, to support health outreach including:
  - Strong programs for free and widespread influenza vaccination for students and staff, given the overlap of influenza with the potential return to school buildings in the fall<sup>26</sup>

- A coordinated approach with all appropriate agencies in Chicago to ensure children receive all recommended vaccinations before return to school, given the precipitous drop in these vaccinations as a result of the pandemic (leading to increased likelihoods of simultaneous infectious disease outbreaks such as measles)<sup>27</sup>
- Explicit plans to address social emotional trauma and continued stress amidst the pandemic through increased mental health supports, including:
  - Increased staffing of counselors, psychologists, PSRPs, social workers, and substitutes. According to the CDC, even before the crisis, suicide was the second leading cause of death among youth aged 10 – 24 years.<sup>28</sup> An estimated 34.7% of Chicago Youth reported feeling depressed,<sup>29</sup> and only about 25% received treatment.<sup>30</sup>
  - Explicit plans to carry out health and safety protocols without resorting to punitive policing and punishment
  - No standardized testing infringing on instructional time<sup>31</sup>
  - Increased academic supports to address learning loss, balanced with realistic academic expectations; students and their families will likely be experiencing continued stress and trauma, and the return to school should not become an additional source
  - A commitment to a balanced curriculum with physical education, arts, and other electives to teach the whole child
  - Explicit plans to avoid marginalization of families where English is not the primary language through consistent communication and opportunities for feedback in all languages spoken in the school community
  - Compensatory services for students with disabilities, including extra supports where needed for transitioning back into the school setting
  - Policies to support staff mental health, including accommodations where needed, clear and regular communication from administrators and the district, opportunities to express concerns, and participatory decision-making processes
  - Pre-opening training and “rehearsals” so staff may adequately prepare and identify areas for improvement

### III. WELL-FUNDED SCHOOLS AND COMMUNITIES FOR WELL-BEING

To reopen schools safely nationwide, an additional \$116 to \$245 billion is needed.<sup>32</sup> To reopen CPS schools safely and address students' critical needs, it could cost anywhere from \$450 million upwards of \$1.7 billion, depending on whether schools are open in a hybrid of remote learning, or full-time with small classes and social distancing. In addition to the cost of providing expanded space for social distancing and more classroom teachers, these estimates include measures to address the increased need for mental health and social services, the educational needs of children who may have fallen behind in the shift to crisis distance learning, and regular testing of students and staff. The long-term impacts of the social costs of the pandemic, falling disproportionately on Black and Brown students in CPS, will require even more funding to address.

These estimates do not take into account measures to address the increased need for mental health and social services, the educational needs of children who may have fallen behind in the shift to crisis distance learning, regular testing of students and staff, or the long-term effects on students that will need to be addressed over multiple years. Finally, these costs do not include investments into distance learning, which will continue to be provided, either to all students under a full distance learning or hybrid model, or to a significant subset of students even under a full-time return to schools model.

Unfortunately, instead of flattening the curve, politicians and the billionaires they serve have instead flattened school budgets and our capacity to safely restart schools. The Great Recession of 2008 led to reduced state and local revenues, and most governments chose austerity in the years that followed.<sup>33</sup> In Illinois, funding for K-12 education did not recover from those cuts until 2017.<sup>34</sup> In CPS, austerity meant annual cuts of well over 1000 education personnel year after year, concentrated in Black and Brown communities, discriminating against students and staff.

Over a decade later, CPS is still paying the steep costs of austerity. Under the state's evidence-based funding formula, CPS has admitted they are \$2 billion short of adequacy, with no spending for social distancing or the Corona crisis. Meanwhile, U.S. billionaire wealth has surged by more than \$584 billion.<sup>35</sup> Over 18 of those billionaires live in Illinois. There is money to safely restart schools, if federal, state, and local governments are willing to finally prioritize pupils over plutocrats.

### FEDERAL SUPPORT

**1. Federal Bailout:** Although the CARES and HEROES Acts provided funding for K-12, both fell far short of what would be needed to rescue districts and state and local governments. And as of publication, no money has been dedicated to address the specific needs of students with disabilities, due to the federal government's failure to meet its IDEA funding promise. Many experts are calling for at least \$ billion in additional federal assistance this year, and a commitment to continue support over several years.

**2. Fully Fund Title I:** Congress has perpetually underfunded Title I, ignoring the growth in student enrollment, the increasing costs of education, and the reality that schools have become the de facto centers of their respective communities. In Illinois, specifically, last year the Title I funding gap was \$1.35 billion.<sup>36</sup> This funding is foundational to meeting the needs of our students, and Title I was persistently underfunded well before the pandemic. Congress must appropriate substantial emergency and ongoing resources through the Title I program if we are to have a solid floor in which to provide education during and after the pandemic.

**3. Fully Fund IDEA:** Since the passage of the Individuals With Disabilities Education (IDEA) Act in 1975, Congress has never come close to allocating the 40% funding promised to ensure a free and appropriate public education for students with disabilities. Instead, funding has consistently hovered around 16%.<sup>37</sup> In early May, 25 senators wrote a letter voicing their support for IDEA's full implementation at this time in conjunction with an additional appropriation

of \$12 billion in IDEA funding to ensure school districts across the country are able to meet the needs of students with disabilities. To date, that letter has been entirely ignored by the Senate Majority Leader, Mitch McConnell, and no such funding has been officially proposed or discussed in the Senate.

**4. Medicare for All:** Coronavirus shows definitively why we need Medicare For All. People fearful of crippling medical bills avoid seeking testing and treatment, leading to undetected COVID-19 cases and a likely increase in death rates thanks to people delaying medical care until they reach a critical condition. The boundless greed of the for-profit health industry, combined with this country's deeply ingrained racism, has led to

"Social worker days assigned to our school next school year have been cut. I feel it is absolutely ridiculous to take away that type of support from our students. So many students and families are facing crisis including death. It will be such a disservice to take away social/emotional support."

Response of a Chicago educator to the CTU's end-of-year survey about reopening school buildings

race-based health disparities that have resulted in excess deaths especially among Black communities long before the pandemic further widened the health gap. That same greed has resulted in Gilead Sciences pricing a five-day course of Remdesivir at \$3,120 —despite having received \$70.5 million in public funding for the development of the coronavirus drug.<sup>38</sup>

## STATE SUPPORT

Illinois maintained a “flat” state school funding appropriation even though the landmark 2017 school funding law requires an increase of \$350 million. And while a “no cuts” budget is better than a deeply austere alternative, that amount of funding is far short of what’s needed to restart safely amidst a pandemic. After the two-year Bruce Rauner budget hostage experiment,<sup>39</sup> the state has basically no rainy day fund. It is thus vital that Illinoisans vote to raise revenue from those who have it and demand that Illinois’ millionaires and billionaires finally pay their fair share.

## PASS THE FAIR TAX

Illinois voters will consider the question of establishing a fair and graduated state income tax in the November 2020 election.<sup>40</sup> This measure would raise significant revenue for schools in the 2020-21 school year (for 6 months of tax collections) and larger amounts in future school years. A majority “yes” vote in support of the question would create a sustainable revenue stream for schools while also ensuring that those most able to pay are the ones to do so.

## LOCAL SUPPORT

Although the machinations of Washington, D.C. and Springfield have received the spotlight during this crisis, many of the living and working conditions in people’s everyday lives are decided at the local level. Local policies often set the precedent for more progressive moves at the state and national level.

**1. Defund Police:** CPD out of CPS: Shift \$33 million in funds for the Chicago Police Department in our schools to instead meet students’ needs in this crisis, such as: more social workers, counselors, trauma specialists, and support staff. We must shift the astronomical amount of money devoted to policing, to education and other essential needs such as housing and public health.

**2. Retire TIF districts:** Retiring just seven Tax Increment Financing districts in or around downtown and returning their tax base to CPS and other taxing bodies, could bring in \$180 million in revenue to CPS. Instead of ensuring public entities have access to this revenue, the city is pushing in the opposite direction, to extend the life of expiring TIFs and keep the money in the slush fund to dole out to developers.<sup>41</sup>

**3. Housing Security:** There is no “safer at home” for those who do not have a home. Students need stability, and cities have the power to pass ordinances to prevent evictions and provide rental relief funds. Student mobility in 2018 was 11%, but at 25 schools it was greater than 30%, and went up to 50% at one high school. Lifting the ban on rent control would go a long way toward conquering homelessness. Sheltering the homeless community is a matter of political will, not scarce resources.

**4. Paid Sick Leave:** Parents should not have to decide between staying home with a sick child or going to work in order to be paid.

## **5. Financial Support for Undocumented Students and Families:**

Chicago’s 183,000 undocumented residents are by and large ineligible for state and federal benefits. Even if their children are US citizens, in the era of ICE raids and mass deportations, many undocumented parents are too fearful to apply for benefits for their children. Immigrant students and workers, so vital to our schools and our economy, must be supported during this crisis.

“Schools should have a connection to testing sites so that families without health insurance or those who would be nervous to go to a hospital for citizenship reasons (undocumented) would be able to get tested without hassle or fear.”

Response of a Chicago educator to the CTU’s end-of-year survey about reopening school buildings

## IN CONCLUSION: NORMAL WASN’T WORKING FOR US BEFORE. WE CAN’T GO BACK

CTU educators went on strike in 2019 demanding smaller class sizes; more nurses, librarians, and counselors because normal wasn’t working. Educators won these demands because it wasn’t just 25,000 educators in the streets demanding a new normal. Many Chicago parents and community members walked side by side with us demanding increased investments in schools and communities. No matter the scenario in September, it’s clear that it will not be a “normal” school year. But when “normal” means deep race and class fissures that result in increased infection and death rates in Black and Brown communities; when “normal” means increasing police budgets even as schools, libraries, and public health face catastrophic cuts; when “normal” means corporations receiving trillions in bailout funds as federal

commitments to support special education and high-poverty students remain unfulfilled; when “normal” means working families lining up for miles for food banks while US billionaires increased their wealth by over \$584 billion—it is clear that going back to normal is not an option. This crisis presents an opportunity to create a new normal that supports all students.

CTU educators are eager to get back to our schools where we can care for, laugh with, and most importantly, teach our students. But even more than teaching, our job in a pandemic is to keep students and communities safe. As politicians have gutted public goods, the burden on schools to be safe havens for learning has become more substantial. The eventual restarting of physical schools should be primarily about learning, not merely about opening childcare centers for workers, whose employers by and large pay minimum wage and don’t offer healthcare and paid sick leave.

Learning happens when students and educators feel safe, and safety is only possible in a broader setting of community preparedness, requiring greater federal and state resources to support a strategy of physical distancing in small, isolated groups, with a strong emphasis on hygiene. All of that is attainable, but only if schools and communities are funded appropriately. Illinois can do that if politicians are finally willing to prioritize pupils over plutocrats.

Despite an avowed interest in hastily reopening schools, American politicians, and society as a whole, have not done what is needed to safely restart—as evidenced by record-shattering infection rates, rapidly filling ICU wards, a grotesque lack of PPE for essential workers, a shameful lack of tests, an almost complete inability to contact trace new outbreaks, and dramatically disproportionate infection and death rates in Black, Brown, and high-poverty communities. The United States leads the world in the number of coronavirus cases and deaths—and not coincidentally, also leads the world in number of billionaires,<sup>42</sup> per-capita energy consumption,<sup>43</sup> prisoners,<sup>44</sup> school shootings,<sup>45</sup> and medical bankruptcy. (Medical bankruptcy is such a foreign concept outside of the United States that no other country even attempts to track it.) This is not the setting of community preparedness that serves as the foundation for safe classroom instruction amidst a pandemic.

When politicians exhort educators and other workers to “reignite the economy,” CTU educators ask: who are you planning to use as kindling? The benefits to restarting physical

schools must outweigh the risks, especially for our most vulnerable students and school communities. As it stands, the only people guaranteed to benefit from the premature physical reopening of schools amidst a rapidly accelerating pandemic are billionaires and the politicians they’ve purchased.

## ENDNOTES

- 1 CPS. *Stats and Facts*. Chicago Public Schools. Updated November 2019. [https://cps.edu/about\\_cps/at-a-glance/pages/stats\\_and\\_facts.aspx](https://cps.edu/about_cps/at-a-glance/pages/stats_and_facts.aspx)
- 2 CDC. *COVID-19 in Racial and Ethnic Minority Groups*. Centers for Disease Control and Prevention. June 25, 2020.
- 3 CDPH. *Latest Data*. Chicago Department of Public Health. July 10, 2020. <https://www.chicago.gov/city/en/sites/covid-19/home/latest-data.html>
- 4 US Census Bureau. American Communities Survey. <https://www.chicago-homeless.org/faq-studies/>
- 5 WGNTV. *COVID-19 by the Numbers: Cases, Deaths, and Hospital Capacity in Chicago and Illinois*. <https://wgntv.com/covid-19-by-the-numbers-cases-deaths-and-hospital-capacity-in-chicago-and-illinois/>
- 6 US Bureau of Labor Statistics, Report 1082, Labor force characteristics by race and ethnicity, 2018. October 2019.
- 7 US Bureau of Labor Statistics, Report 1082, Labor force characteristics by race and ethnicity, 2018. October 2019. <https://www.bls.gov/opub/reports/race-and-ethnicity/2018/home.htm>
- 8 Hill, Steven, *Ridesharing Versus Public Transit*. American Prospect, March 27, 2018.
- 9 RHA. *Persisting Racial Disparities Among Children with Asthma*. Respiratory Health Association, May 1, 2018. <https://resphhealth.org/wp-content/uploads/2018/05/Asthma-Report-Final.pdf>
- 10 *Changes in Health Coverage by Race and Ethnicity since the ACA, 2010-2018*. Kaiser Family Foundation, March 5, 2020. <https://www.kff.org/disparities-policy/issue-brief/changes-in-health-coverage-by-race-and-ethnicity-since-the-aca-2010-2018/>
- 11 CPS. Chicago Public Schools Demographics LEPSPED 2020. <https://cps.edu/SchoolData/Pages/SchoolData.aspx>
- 12 Tsao, Fred. Illinois’ Undocumented Immigrant Population: A Summary of Recent Research by Rob Paral and Associates. February 2014. [https://e2a3f-b6c-c4a7-47af-b216-39bdbe5045b9.filesusr.com/ugd/aec63a\\_4ee78f0e8f-de4de2a0b0c0f859a8855e.pdf](https://e2a3f-b6c-c4a7-47af-b216-39bdbe5045b9.filesusr.com/ugd/aec63a_4ee78f0e8f-de4de2a0b0c0f859a8855e.pdf)
- 13 Ibid. CPS.
- 14 Camero, Katie. *COVID-19 Kills Children with Intellectual Disabilities at Higher Rates. Here’s Why*. Miami Herald, June 11, 2020. <https://www.miamiherald.com/news/coronavirus/article243470691.html>.
- 15 CDC. *Considerations for Schools*. Centers for Disease Control and Prevention, May 19, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>.
- 16 Ibid.
- 17 Ibid.
- 18 Coughlan, Sean. *How England is Following Denmark’s School Safety Model*. BBC News, May 12, 2020, sec. Family & Education. <https://www.bbc.com/>

“Singing is a dangerous activity, sharing instruments, sharing art supplies, sharing equipment, gym and recess aren’t safe, sweating and heavy breathing. We have double classes at our school so there are usually 70 students in the gym or choir room.”

Response of a Chicago educator to the CTU’s end-of-year survey about reopening school buildings



- [news/education-52550470](#).
- 19 CDC. *Employer Information for Office Buildings: COVID-19*. Centers for Disease Control and Prevention, updated May 27, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/community/office-buildings.html>.
  - 20 CDC. *Guidance for Healthcare Providers about Hand Hygiene and COVID-19*. Centers for Disease Control and Prevention, updated May 17, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/hand-hygiene.html>.
  - 21 CDC. *Disinfecting Your Facility: Everyday Steps, Steps When Someone is Sick, and Considerations for Employers*. Centers for Disease Control and Prevention, updated April 28, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>
  - 22 CDC. *Symptoms [of Coronavirus]*, Centers for Disease Control and Prevention, updated May 13, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.
  - 23 CDC. *Considerations for Schools*. Centers for Disease Control and Prevention, updated May 19, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>.
  - 24 Ibid.
  - 25 CDC. *Considerations for K-12 Schools: Readiness and Planning Tool*. Centers for Disease Control and Prevention, May 19, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/downloads/community/School-Admin-K12-readiness-and-planning-tool.pdf>.
  - 26 Broadfoot, Marla. *Coronavirus and the Flu: A Looming Double Threat*. Scientific American, June 4, 2020. <https://www.scientificamerican.com/article/coronavirus-and-the-flu-a-looming-double-threat/>.
  - 27 CDC. *Effects of the COVID-19 pandemic on Routine Pediatric Vaccine Ordering and Administration*. Centers for Disease Control and Prevention, updated May 15, 2020. <https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e2.htm>.
  - 28 Curtin, Sally C and Melonie Heron. *Death Rates Due to Suicide and Homicide Among Persons Aged 10–24: United States, 2000–2017*. NCHS Data Brief, October 2019. <https://www.cdc.gov/nchs/data/databriefs/db352-h.pdf>
  - 29 Chicago Youth Atlas. *Youth Depression*. 2017. <https://www.chicagohealthatlas.org/indicators/youth-depression>
  - 30 CPS Healing Trauma Together Project Narrative. <https://www.chicagohealthatlas.org/indicators/youth-depression>
  - 31 Strauss, Valerie. *Georgia Becomes First State to Seek Waivers of Standardized Tests For 2020-2021 Because of Coronavirus*. June 18, 2020. <https://www.washingtonpost.com/education/2020/06/18/georgia-becomes-first-state-look-suspension-standardized-tests-2020-21-due-coronavirus/>.
  - 32 Camera, Lauren. *New Estimate to Reopen Schools After Coronavirus: \$116.5 Billion*. June 9, 2020. <https://www.usnews.com/news/education-news/articles/2020-06-09/new-estimate-to-reopen-schools-after-coronavirus-1165-billion>
  - 33 Strauss, Valerie. *Many Public Schools Never Recovered From the Great Recession*. April 2, 2020. <https://www.washingtonpost.com/education/2020/04/02/many-public-schools-never-recovered-great-recession-coronavirus-could-spark-new-education-crisis/>
  - 34 Leachman, Michael. *After Nearly a Decade School Investments Still Way Down in Some States*. October 20, 2016. <https://www.cbpp.org/research/state-budget-and-tax/after-nearly-a-decade-school-investments-still-way-down-in-some-states>
  - 35 Collins, Chuck. *US Billionaire Wealth Surges to \$584 Billion, or 20 Percent, Since the Beginning of the Pandemic*. Institute for Policy Studies and Americans for Tax Fairness, June 18, 2020. <https://ips-dc.org/us-billionaire-wealth-584-billion-20-percent-pandemic/>.
  - 36 National Education Association and Education Policy and Practice. *Grants to Local Educational Agencies. (ESEA Title I, Part A): Title I Funding Gap*. April 4, 2019. <http://www.nea.org/assets/docs/Title-I-Funding-Gap-by-State-FY2019.pdf>
  - 37 National Council on Disability, *Broken Promises: The Underfunding of IDEA*, IDEA Series, February 7, 2018. [https://nacd.gov/sites/default/files/NCD\\_BrokenPromises\\_508.pdf](https://nacd.gov/sites/default/files/NCD_BrokenPromises_508.pdf).
  - 38 Denham, Hannah. *Gilead Sets Price of Coronavirus Drug Remdesivir at \$3,120 as Trump Administration Secures Supply for 500,000 Patients*. The Washington Post, June 29, 2020. <https://www.washingtonpost.com/business/2020/06/29/gilead-sciences-remdesivir-cost-coronavirus/>.
  - 39 Wikipedia. *Illinois Budget Impasse*. [https://en.wikipedia.org/wiki/Illinois\\_Budget\\_Impasse](https://en.wikipedia.org/wiki/Illinois_Budget_Impasse)
  - 40 Black, Curtis. *Fair tax: the other most consequential vote Illinoisans will be making this November*. The Chicago Reporter. March 9, 2020. <https://www.chicagoreporter.com/fair-tax-the-other-most-consequential-vote-illinoisans-will-be-making-this-november/>
  - 41 Hinz, Gregg. *City Quietly Moves to Renew Huge TIF District*. June 30, 2020. <https://www.chicagobusiness.com/greg-hinz-politics/city-quietly-moves-renew-huge-tif-district>
  - 42 Jonathan Panciano. *The Countries with the Most Billionaires*. Forbes, April 8 2020: <https://www.forbes.com/sites/jonathanponciano/2020/04/08/the-countries-with-the-most-billionaires-in-2020/#1e9effbe4429>.
  - 43 International Energy Agency. *IEA: Atlas of Energy*. 2017. <http://energyatlas.iea.org/#/!tellmap/-118783123>.
  - 44 Roy Walmsley. *World Prison Population List: 12<sup>th</sup> Edition*. World Prison Brief and Institute for Criminal Policy Research, Sept. 30, 2018: [https://www.prisonstudies.org/sites/default/files/resources/downloads/wppl\\_12.pdf](https://www.prisonstudies.org/sites/default/files/resources/downloads/wppl_12.pdf).
  - 45 Chip Grabow and Lisa Rose. *The US has had 57 Times as Many School Shootings as the Other Major Industrialized Countries Combined*. CNN, May 21, 2018. <https://www.cnn.com/2018/05/21/us/school-shooting-us-versus-world-trnd/index.html>.

