

My name is Sheila Colla. I am an Assistant Professor and York University Research Chair in Interdisciplinary Conservation Science. I have a PhD in Biology and have done research on zoonotic disease outbreaks among wildlife.

My children are ages 3 and 6 and entering JK and Gr. 2 at St. Brigid's this fall.

My husband is a Music teacher at St. Michael's Choir School.

My mother is close to retirement and is a Grade 1 teacher at St. Barnabas.

My sister is a Phys Ed & ESL teacher at St. Monica's.

My brother is an itinerant music teacher at multiple schools including St. Teresa Shrine and Holy Name.

Some of you may know my father who recently retired and was a music teacher with the board for decades and who now helps care for my 3 year old.

The people I have just listed here are essentially all of my immediate family members. And as of September, they all will each have direct and indirect contact with between 20 and 100s of children in JK to Gr 3.

The science is clear that COVID19 is primarily transmitted via inhalation of viral particles of droplets in the air, expelled from a symptomatic or *importantly* an asymptomatic person's nose or mouth. Recommendations to minimize the spread of COVID19 include good ventilation, preferably in outdoor settings, physical distancing of 2 metres, minimizing the size of indoor gatherings and wearing face coverings. Countries and other jurisdictions which have done these things have been able to keep COVID19 cases low, and this includes the City of Toronto which has mandated masks for people indoors from ages 2 and up.

While all of these measures are important to explore for a safe re-opening, I'm here to specifically encourage the board to support Toronto Public Health directives for mandatory face coverings indoors, especially where there is not good ventilation and where distancing for 2m is not possible (i.e. most of our classrooms).

In the past week, I have seen parents raise concerns about this, particularly for JK & SK kids. I understand how daunting this must feel for kids so young, like my 3 year old, but I am worried about some of the statements I've seen which ignore the science and the totality of what is at stake- the lives & long-term health of teachers, staff and children. While death rates are low, the chronic health implications for adults who have had this horrific illness are significant. I would like to remind everyone that since this virus has only been studied for less than a year, we have absolutely no idea what the long-term health consequences will be for children who are exposed and recover.

My 3 year old wears a mask or face shield often. Just like we have a bin at the doorway for hats and mitts in the winter, we have a bin for masks and face shields. She understands in a very matter-of-fact way that we need to wear it when we go to stores to help stop the spread of Coronavirus which has drastically changed her life. It is her new reality and she is willing to do it if it means she can go places. Yes, she touches her face and adjusts her mask, but the value of the face covering is to capture droplets before they get into the air. Fomite transfer via objects with your hands is not considered a primary mode of transfer and is more easily dealt with via hand washing and sanitizing. My 6 year old complains a bit more, but he also does it. They both know what's at stake, which includes the ability to see both sets of grandparents who they adore.

I will also add that one of the key ways my kids will wear masks is if they get to choose the fun print. I am also requesting that face coverings, like shoes, be exempt from uniform requirements. Making them uniform would enormously add to the challenge of access for families and getting younger kids to comply.

While the Ministry has relied heavily on the stamp of approval by the province's Chief Medical Officer, Dr. Williams, I would like to remind everyone that last spring, he went against the best available evidence and stated health workers in long term care facilities did not need PPE and as a result, hundreds of our elders died horrible and lonely deaths. His mishandling of the Opioid crisis has also led to 1000s of avoidable deaths of loved ones. He does not have a good track record of valuing lives or basing recommendations on best available evidence or the precautionary principle in the absence of scientific information.

In closing, I'd like to encourage every single trustee, teacher, staff member and parent to help spread the word that mandatory face coverings for kids in JK to Gr 3 is *literally* an important layer of protection, given the limited resources we have been given by the province to keep our community safe. While they may be uncomfortable and an additional challenge to deal with, the costs of not using them far outweigh the costs of using them. While there are valid medical reasons for some children not being able to wear them, there is no reason most children shouldn't be able to tolerate them while indoors and not eating. Especially if outdoor mask-free breaks are given. I also encourage the board to put together a fact sheet to counter some of the anti-mask sentiment (including ableist and discriminatory language that I recently saw in a facebook group) and pseudo-science that has been circulating in our communities.

We are all in this together and we need to lead with evidence-based decision-making and the precautionary principle as the health & safety risks are far too high to not mandate face coverings in these classrooms. Wearing a mask shows others you care about their health and well-being enough to put aside your own personal comfort. That is an important lesson we have

the ability to teach our youngest members of society right now, and I hope we seize the opportunity.