



May 20, 2021

Miguel Cardona  
Secretary, U.S. Department of Education  
400 Maryland Ave. S.W.  
Washington, DC 20202

Rochelle Walensky  
Director, Centers for Disease Control and Prevention  
395 E St. S.W.  
Washington, DC 20024

Dear Dr. Cardona and Dr. Walensky:

On behalf of the 1.7 million members of the American Federation of Teachers, I write regarding the Centers for Disease Control and Prevention's [May 13 announcement](#) that masks would no longer be recommended indoors or outdoors for vaccinated individuals.

Earlier that day, I gave a speech calling for us to "[Return, Recover and Reimagine](#)" to spark a renaissance in America's public schools. I made clear that our nation's public schools must be open for in-person learning this fall and must stay open. I expressed my wholehearted belief that nothing less than the future of our children—and our country—rests upon meeting that challenge.

Today, with the help of the resources provided by the American Rescue Plan, educators and school staff across the country are hard at work preparing for our students' academic recovery and identifying the social and emotional supports they need. Our mission is to ensure safe in-person learning from prekindergarten through higher education and the safe delivery of healthcare and public services. AFT members are committed to serving their communities. At the same time, they are an exhausted and sometimes scapegoated workforce, one that must grapple with multiple variables—including the changing dynamics of the pandemic and its effects on the community—as they try to plan for summer school and starting a new school year in the fall.

As you can imagine, while this change in masking guidance makes clear the effectiveness of vaccines, it has also raised questions about how to apply it in all the environments in which our members serve: education, healthcare and public service. As I have said, it is going to take a minute.

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The **American Federation of Teachers** is a union of professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

American Federation  
of Teachers, AFL-CIO

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AFT Teachers  
AFT PSRP  
AFT Higher Education  
AFT Public Employees  
AFT Nurses and Health  
Professionals

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For those entrusted with the welfare of children—and those already navigating other aspects of recovery from this pandemic, including its effects on mental health, school readiness, and social and emotional well-being—any change or ambiguity in guidance triggers a significant impact on planning and classroom management. For those frontline healthcare workers who see the toll of COVID-19 denial or lax practices firsthand, the guidance change portends a potential surge of the virus.

With the school year ending within weeks, we had hoped to have the time this summer to prepare and incorporate any new COVID-19 guidance into our back-to-school plans. Many members were heartened by the Education Department's and the CDC's public statements suggesting changes to masking protocols in schools would wait until the summer. Unfortunately, certain states rushed to act, such as Texas, which totally eliminated its mask mandates, regardless of age, even though vaccines are yet to be approved for those under the age of 12 and fewer than 50 percent of the U.S. population are fully vaccinated.

To successfully return to school next fall, we must build broad-based confidence among educators, parents and our students, which can form the foundation of a safe and welcoming environment for all. It is in that spirit that we seek to work with you in a way that ensures that the guidance and recommendations are anchored in the science and reflect the reality on the ground.

As you know, the AFT's work uniquely positions us to provide real-world examples of where approaches are working and where challenges remain. The following are a sample of questions we have received for which we seek your guidance:

1. The CDC has strongly advocated for layered mitigation strategies indoors—leading with masking—to protect everyone. With the change in masking guidance, will the CDC still recommend layered mitigation strategies in schools that include 3 feet physical distancing, surveillance testing, occupancy, ventilation and filtration? Assuming there are changes, will the timing commence this summer or fall?
2. For schools with children age 12 and older, what strategies and protocols will the Education Department and the CDC recommend on verification of vaccination status? In school settings for children under 12, where no vaccines are yet available for children, will the mask guidance continue, and if so, will it be limited to indoors or apply both indoors and outdoors? In school settings serving a mixed cohort of students, which guidance will apply?
3. Our members have expressed concern about being assigned the role of “mask police” at a time when they want to build trust and confidence with their students. Will the guidance include recommendations or protocols about mask enforcement and accountability?
4. What will the CDC and the Education Department specifically do to build trust in the safety of returning to schools for families and communities that were already hesitant about safety? What resources or interventions, including vaccine clinics and enhanced outreach initiatives, will be incorporated in communities to address critical health disparities and intense polarization? Will there be a structured planning rubric for school systems wrestling with unique

sets of factors in terms of vaccination rates, vaccination hesitancy and the reasons behind each? Will there be designated resources or engagement sessions for those communities with high polarization and low vaccination rates to build trust and confidence within the community?

5. The CDC made an exception for airplanes, buses, homeless shelters and healthcare facilities—crowded places where people spend significant blocks of time. What was the basis for continuing those mask mandates? Was it ventilation issues, distancing issues or other issues, and should any of the same criteria affect schools and/or classrooms, hallways and other tight school quarters?

6. Will specific guidance be developed for schools and classrooms that include a mixed cohort of students, including children who are ineligible for the vaccine for health or age reasons? How will schools mitigate risk for those under the age of 12, immunocompromised or religiously exempt, for example? Will staff and students be required to continue to wear masks in these situations? How will these vulnerable individuals be protected?

7. As the number of vaccinated people continues to rise, will the CDC adjust its recommendations about who should still receive accommodations due to health conditions that prevent them from returning to the workplace?

8. With the number of conflicting policies about masks and vaccination across states, localities and facilities, is the CDC (and/or other agencies) acting with other government agencies so there is a common standard for workplace safety and labor protections, including shielding from retribution workers who choose to remain masked or who decline to work in close proximity to individuals who are both unmasked and unvaccinated?

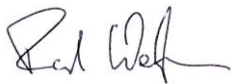
9. With variants like B.1.617 affecting younger children at higher incidence and severity than other mutations, are there special precautions that should be taken in schools this fall?

10. The CDC's guidance to colleges and universities was last updated in December 2020. When will this guidance be updated?

As always, the AFT stands ready to work with the CDC and the Education Department to help our country emerge strong from this pandemic, with public confidence in the safety of our schools intact. I look forward to your responses.

Thank you.

Sincerely,



Randi Weingarten  
President

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