



**Texas House Public Education Committee
House Bill 141 by Rep. Jeff Leach
Testimony by Kimberly Avila Edwards, MD**

Aug. 30, 2021

Chair Dutton, Vice-Chair Lozano, and Committee Members,

My name is Dr. Kimberly Avila Edwards. I am a general pediatrician practicing here in Austin. It is my honor to testify today on behalf of myself as an individual physician and on behalf nearly every major stakeholder representing the Texas health care sector:

- Texas Medical Association
- Texas Pediatric Society
- Texas Hospital Association
- Texas Public Health Coalition
- Texas Osteopathic Medical Association
- Texas Academy of Family Physicians
- Texas Nurses Association
- Texas Chapter of the American College of Physicians Services
- Texas Association of Neurological Surgeons
- American College of Obstetricians and Gynecologists – District XI
- American College of Cardiology – Texas Chapter

We strongly urge you to oppose House Bill 141 and allow local school districts to implement evidence-based public health interventions to protect Texas’ most precious resource – our children.

Simply put, the COVID-19 pandemic is, unfortunately, not over. I understand, we, as Texans, may be tired. We may be exhausted and frustrated with following recommended guidance. We may want our previous, normal lives back. But SARS-CoV-2, the virus responsible for COVID-19, is not tired, exhausted, or done with us. It does not rest, and it thrives on mutating, creating variants, and challenging our resolve. Texas is in the middle of another wave of infections, which is more accurately characterized as the first wave of the unvaccinated, with cases and hospitalizations continuing to rise. More individuals under 50 are being admitted than at any point during the pandemic.¹ As of Aug. 25, 13,932 Texans were hospitalized, 1,200 more than the previous week.² These numbers include children. The delta variant is more prevalent in children, and capacity at our children’s hospitals is being challenged. According to Texas Department of State Health Services data, during the week ending on Aug. 22, an average of 46 children were hospitalized each day.³ The highly transmissible delta variant is driving this increase and putting a strain on our entire health care system. Texas physicians and nurses are fatigued and stressed after battling this virus for 17 months, and the toll on our health care heroes is very real. Our hospitals have significant staff shortages.

¹ www.texastribune.org/2021/08/27/texas-covid-19-hospitalizations-age/

² https://apps.texastribune.org/features/2020/texas-coronavirus-cases-map/?_ga=2.16068982.115473438.1627338854-900606501.1623766104

³ www.texastribune.org/2021/08/27/texas-covid-19-hospitalizations-age/

Even in these circumstances, we prioritize children being back in classrooms because we recognize the significant toll the COVID-19 pandemic has had on children. Remote learning has highlighted inequities in education. There have been gaps in educational attainment for some students, and the mental, emotional, and physical health of Texas children has suffered. We need a multilayered approach to safely accomplish in-person schooling for all students, teachers, and staff. Schools must have the freedom to utilize and layer every mitigation strategy they deem necessary to protect all children, teachers, and staff: vaccination for everyone who is eligible, masking in school, proper ventilation, physical distancing, handwashing, symptom reporting, and isolation of students who test positive for SARS-CoV-2.

According to the Centers for Disease Control and Prevention (CDC), vaccination is the leading public health prevention strategy to end the COVID-19 pandemic, and we urge all who are eligible to be vaccinated to protect against COVID-19. This latest surge truly is a surge of the unvaccinated, and a significant portion of the student population is not yet eligible for vaccination. Face coverings are proven to reduce transmission of the virus and to protect those who are not vaccinated. CDC and the American Academy of Pediatrics⁴ advise all students older than 2 years old and all school staff to wear face masks while in school, regardless of vaccination status, unless medical or developmental conditions prohibit their use. Data clearly show wearing of masks slows the spread of COVID-19. Masks work when worn by everyone. When worn correctly, face masks create a barrier that reduces the spread of an individual's respiratory droplets that can carry the virus locally and aerosolized mist, which has the potential to circulate much more broadly. Because masks help reduce an individual's spread of droplets to people around them, it is important that all students wear masks to protect their classmates. This is essential because asymptomatic individuals can transmit COVID-19 and bring the disease home to their loved ones who may be vulnerable – the elderly, the unvaccinated, and those with compromised immune systems or other health conditions that can complicate COVID-19.

Prohibiting known, effective public health interventions such as masking in schools, or in any other congregated area, sets a precedent for future public health disaster responses that is problematic. We owe it to each other, our fellow Texans, to allow local decisions about public health. We relied on this when north Texas was dealing with Ebola. We rely on public health mitigation efforts to protect us from food-borne illness such as listeria. Yes, seat belts, car seats, and traffic lights are sometimes personally inconvenient, but they save lives. State statute prohibiting an evidence-based mitigation strategy, such as mask-wearing in schools, removes our ability to protect each other, and protecting each other is every Texan's patriotic duty. What if the next variant or the next pandemic involves an even more contagious infectious disease? Why tie the hands of local decisionmakers to do what is right for the families in their communities?

We strongly oppose a one-size-fits-all, big-government state mandate on our schools and localities. Instead, we support local officials and school districts making decisions in consultation with their local public health departments to stop the spread of COVID-19. Our children need to return to school safely where they can thrive, and schools need the ability to implement best practice public health policies to make this a reality.

Thank you for the opportunity to testify against House Bill 141. For any questions or follow-up, please contact Clayton Travis, director of advocacy and health policy with the Texas Pediatric Society, at Clayton.Travis@txpeds.org.

⁴ American Academy of Pediatrics. COVID-19 Guidance for Safe Schools. Retrieved from: www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/