Reopening of Schools of Public Health – Rapid Review Survey
Phase 2 Report, January 2021

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Introduction
The COVID-19 pandemic has significantly altered the education environment. Institutions have been tasked with implementing rapid responses that allow for a continuity of education, effective course provision, and ongoing support services for students, all while keeping students, faculty, and staff healthy and safe (WHO, 2020). The ever-changing health environment makes this increasingly difficult, necessitating the constant modification of health and safety protocols. This is exacerbated by the lack of available research on best practices. Schools continue to receive regularly changing guidelines, and many institutions have gone through iterations of opening and closing to varying degrees. As the pandemic enters its second year, its toll is becoming clearer, with a multitude of adverse effects impeding the continuity of quality education (Onyema et al, 2020). Therefore, ASPHER is committed to reinforce and coordinate the efforts of our over 100 member schools of public health (SPH) across the European region and beyond (Middleton et al., 2020).

This study was initiated in the summer of 2020, approximately six months into the pandemic. The goal of the study was, and remains, to gather information about the planning and preparedness of SPH in the European Region for reopening campuses after closure due to the COVID-19 pandemic. The research was inspired by the member schools of ASPHER, the Association of Schools of Public Health in the European Region, who felt as though they were unaware of and had difficulty accessing other institutions’ strategies for reopening. This lack of communication and information sharing may increase the feelings of uncertainty and isolation caused by the pandemic, and creates a limited evidence base for future plans.

The research uses an exploratory sequential design with connected integration. In the first phase, conducted in the summer of 2020, digital questionnaires with open-ended questions were sent to all ASPHER member schools and affiliates. The qualitative component was thematically analysed (ASPHER, 2020) and the themes presented, along with feedback from respondents, guided the content of the follow-up survey, an internet-based survey with closed-ended questions. The qualitative research was conducted to generate a better understanding of the study context and gain insights into relevant themes to develop the second survey. This report presents primarily the secondary quantitative component.
Combined with the summer 2020 survey, it will provide both a record of the reactions and allow for quantitative and qualitative analysis of the different paths and rationale present amongst the schools of public health included. By prompting dialogue, SPH can better design and enact policies and recommendations relevant to them. Both in July 2020 and now, in January 2021, few national authorities have launched specific guidance for reopening higher education campuses. SPH could play a critical role in policy and guideline development.

Methods

Phase 1 (previously reported, ASPHER, 2020): The review was conducted via email with initial contact made by Robert Otok and follow-up done by the Young Professionals (YPs) during the week of July 22-29. Using purposive sampling and depending on availability, SPH were recruited from the ASPHER network. Of the 59 schools contacte, 32 responded. Data collection was conducted through questionnaires with open-ended questions. Schools were asked about their plans for teaching and exam methods, equipment and infrastructure development, new recruitment and international policies, budget and contingency planning, whether or not they felt safe returning to campus, and if decisions in general were evidence-based. Analysis of the qualitative data was carried out following thematic analysis. The researchers identified codes in the questionnaires to start sorting out data. Then, repeated concepts were sorted into themes. Additionally, a simple statistical analysis was conducted. These patterns were used to guide the second stage.

Phase 2: The internet-based survey was conducted via Google Forms and disseminated via email. Initial conduct and follow-up took place from from October to December 2020. The follow-up period was extended to make sure the surveys to reflect the policy changes owing to the rapidly worsening pandemic situation across Europe. All ASPHER member and affiliate schools were invited to participate, with 51 responses representing 50 member and affiliate schools. Schools were again asked about general plans, teaching and assessment methods, prevention measures, and policy plans. The questions (see Annex 1) were closed-ended, with the potential answers based off of the initial survey. By asking closed questions, the research provides more opportunities for comparability and referencing between schools.

Results

The first survey’s results are summarized in Table 1. The survey found that, while the majority of schools are implementing broad changes, the specific details of implementation and provision are not yet known, nor have many of the recommendations been put into practice in higher education scenarios. Discrepancies and potential limitations to feasibility needed to be carefully considered as students return to campuses and various methods of learning in fall.
Table 1. Summary of results from Phase 1 (July), the scoping qualitative survey (ASPHER, 2020).

<table>
<thead>
<tr>
<th>Key Topics</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form of teaching</td>
<td>65% hybrid, with some schools still aiming for variations on face-to-face learning; 23% of schools conducting online-only; 6% of schools continued with only face-to-face teaching.</td>
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<tr>
<td>Certainty in plan</td>
<td>High levels of uncertainty, with seven schools (of 32) reporting no plans</td>
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<td>Educational infrastructure</td>
<td>All schools incorporated some new technology or training to accommodate the situation</td>
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<tr>
<td>Prevention measures</td>
<td>All schools planned some prevention measures, such as reduced class sizes, plexiglass barriers, and masking</td>
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<tr>
<td>Evidence-based decision making</td>
<td>19/32 felt as though decisions were evidence based, with 6 unsure and 6 stating that the school's decisions were not evidence-based</td>
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| Key themes                      | ■ Uncertainty and constant change  
■ Increased workload  
■ Previous online programming was an advantage |

When the second survey was conducted, two thirds of the respondents had already been impacted by staff, student, or faculty COVID-19 cases. Thus, additional elucidation on the key themes from the first survey was expected through the second survey.

Teaching method

45% of the responding schools were teaching completely online, 51% were hybrid. No schools were teaching exclusively face-to-face. For half of the schools, the teaching format was dependent on class size. Two thirds of schools have adjusted their teaching methods to account for Zoom fatigue and other complications tied to digital learning; however, ten schools had made no adjustments. Moreover, assessment methods have been adjusted at 75% of schools.

78% required live attendance at lectures, and just over half provided recordings of the lectures. However, 42% of schools made no attendance adjustments for international students. Despite these changes, tuition has remained the same for 80% of schools and only 9 schools have experienced budget cuts.

Prevention measures and infrastructure

All schools have initiated prevention measures, with many, such as masking, distancing, sanitizers, and ventilation being utilized by over two thirds of the respondents. In addition, 60% of schools reported having adequate infrastructure to test and trace COVID-19 cases. Despite prevention measures, only half of the respondents felt safe returning to their campuses.
Over two thirds of the respondents had both invested in additional infrastructure and provided additional training for staff to adopt to online/hybrid teaching; however, 84% still faced an increased workload.

For students, half of the schools provided technology for those needing it, and almost all SPH provided access to online library resources. However, only 14 schools were allowing their students to return to campus, and only 10 schools were still providing extracurricular activities on campus.

**Planning and policy**

80% of schools had contingency plans in place to ensure continuity and quality of education. Of those schools with face-to-face aspects in their teaching, three quarters anticipated going online in 2021. Conversely, half of the online/hybrid schools were considering transition to face-to-face in 2021.

This transition to online or hybrid learning had no impact on the accreditation of the majority of programmes at the surveyed SPH. In terms of decision-making, a variety of bodies are guiding the SPH health and safety protocols, as shown in Figure 2.
Discussion

The results of this follow-up rapid review provide a scoping, general idea of what various European SPH have implemented during their fall 2020 semesters. The survey did not ask for detailed plans nor explanations for the plans, acknowledging that (i) many details are not yet known; (ii) the survey was intended to elicit short, rapid responses; and (iii) the convenience sampling methodology using ASPHER members meant that each respondent could not be held accountable to know, explain, and agree with their schools’ current plan. There is no correct or incorrect plan amongst the responses, and it is crucial to consider that the survey did not ask for epidemiological information from each school’s region. Additionally, it should be noted that the situation in early 2021 is vastly different and may not be reflected in these survey results.

Contrary to plans in the summer, no schools are offering only in-person teaching; there is a fairly equal split between offering hybrid or online-only. With this new change has come increased flexibility: teaching formats and assessments have adapted. However, as online/hybrid teaching was present in a higher rate than expected in the summer survey, it demonstrates that schools may not have been prepared for nor building the capacity to teach fully online. While significant effort and investment has been put into training, equipment, and other infrastructure, the workload has subsequently increased for the vast majority of respondents. This increased workload may also be tied to a further lack of time to address future plans and students with increased needs.

Following this, questions of accessibility, especially for international students, have not yet been fully answered, as can be seen in the significant proportion of schools that require live attendance of online teaching (and do not all offer recordings of lectures).

At the point of survey (some results were collected before vaccine dissemination began), very few SPH are anticipating face-to-face teaching; however, the students and staff have minimal influence on the opening and closing measures. This poses an interesting question regarding agency and valuing of expert voices, in which schools of public health are not able to contribute their own expertise nor opinions regarding safety in terms of their educational plans. While the common prevention measures of distancing and masking have high uptake, other measures that may be tied to combatting the virus have not been incorporated. For example, there is very limited regular COVID-19 testing. Many universities in the USA are using randomised tests and pooled testing to ensure safety of students and identify cases quickly.

Finally, it is important to note the gravity of the fact that ⅔ of respondents have been impacted by COVID-19 cases at this point. This is a marker of just how far the pandemic has come.
Conclusion

As the pandemic enters its second year, filled with the potential for more waves and more virus variants, educational institutions such as SPH, while having applied stricter and increased prevention measures, remain in similar situations as they were in the summer of 2020. They are waiting on further government guidelines and thus have been unable to implement long-term strategy plans. This lack of national guidance has the potential to perpetuate inequalities among students with varying levels of access, international students, and students who find digital learning difficult. It also has the potential to - and is negatively impacting faculty and staff.

Governments must do more to ensure that schools receive adequate guidance and support. They must begin to incorporate the opinions of educational institutions, students, faculty, and staff into their guidance – nothing for us, without us. Only by addressing our needs, governments can ensure the continuity of quality education and research without any further disruptions. With the promise of widespread vaccination in many European countries during the upcoming months, schools will again face new demands and challenges, and undoubtedly, plans will continue to change. ASPHER will continue to support schools and provide a platform for communication and collaboration surrounding best practices.

References


Annex 1

Reopening of Schools of Public Health – Second Survey Questions
(yes/no questions if not otherwise indicated)

1. General Questions

- Will teaching be face-to-face, online or hybrid?
  1. Face-to-Face
  2. Online
  3. Hybrid
- Do you have different teaching formats depending on class-size?
- Have you changed your assessment methods?
- Have you been impacted by student, staff, or faculty COVID-19 cases?

2. Prevention measures

- For face-to-face/hybrid teaching, what are the preventive measures planned for classes:
  1. Mask requirement
  2. Distance measures in classroom settings
  3. Plexiglass barriers
  4. Providing sanitizers
  5. Proper ventilation
  6. Increased location sanitization (physical space)
  7. Educational material for students on COVID-prevention
  8. Contact tracing (through apps, attendance, etc)
  9. Regular COVID testing
  10. Temperature/health checks

3. Online/hybrid teaching

- Has your school previously offered online education?
- Has the school adapted its teaching methodology in response to the online/hybrid setting? (e.g. has the school adjusted its timetable to account for “Zoom fatigue”)
- Is live attendance of online/hybrid courses required?
- Are online/hybrid lectures recorded?
- Did the school invest in new technological equipment and infrastructure to adapt to online/hybrid teaching?
- Have lecturers received training in online/hybrid teaching?
- Has online/hybrid teaching impacted your workload?
• Does the school have technology available to students without the devices required for online/hybrid courses?
• Do students have access to online libraries?

4. Campus Life
• Are students required to return to campus in the first semester?
• Are there attendance exceptions for international students?
• Are extracurricular activities still occurring on campus?
• Do you feel safe returning back to campus?

5. Planning and Policy
• Does your school have contingency plans for renewed outbreaks, quarantines and shutdowns?
• If opening, do you anticipate closing/going online at any point during the semester?
• If currently online/hybrid, are you considering transitioning to face-to-face teaching in 2021?
• Will the changes in instruction impact the accreditation of your programme?
• Which bodies are guiding the opening and closing measures: public health department, federal government, school administration, student opinion, staff opinion
• Does your school have the adequate infrastructure, either on its own or in collaboration with the government, non-profits, etc, to test, trace, and treat potential COVID-19 cases?

6. Finances
• Have fees or tuition changed due to the pandemic?
• Did your school experience budget cuts due to the pandemic?