Statement on Face Covering Effectiveness for K-12 Schools

Updated July 28, 2023

Oregon returned responsibility for masking in schools back to local decision makers on March 12, 2022. The Center for Disease Control and Prevention (CDC), OHA and ODE continue to strongly advise the universal use of face coverings in schools in order to reduce the spread of respiratory viruses and minimize the lost time learning in school due to illness when community transmission is high. At all levels of community transmission, individuals may choose to mask based on their individual risk assessment (e.g., increased risk for severe disease or family or community members at increased risk for severe disease). **Schools that choose to implement universal masking during periods of high transmission will experience less respiratory virus transmission and fewer absences.**

Universal and correct use of face coverings keeps kids learning in-person
In-person school is crucial in supporting the social-emotional health of students and their families.[1] Face coverings increase the likelihood that students will be able to stay in school by reducing the risk of exposure to and transmission of respiratory viruses, including COVID-19.

Face coverings help prevent the spread of COVID-19 and other respiratory viruses in schools
The CDC presents a collection of studies that illustrate the effectiveness of face coverings at preventing COVID-19 transmission in multiple settings, including schools.[2] Several different studies in schools have found that with the implementation of comprehensive preventive strategies, including the universal use of face coverings, there is very low COVID-19 transmission in schools even with high levels of transmission in the community.[3][4][5] In Oregon, widespread school reopening with universal masking in place was not associated with an increase in the trajectory of COVID-19 infections in children.

The virus that causes COVID-19 is mainly spread through respiratory droplets and aerosols that float and hang in the air. These droplets are generated when someone with COVID-19 coughs, sneezes, sings, talks, shouts, or breathes. Individuals with COVID-19 who feel well and do not have symptoms can transmit enough virus-laden respiratory droplets to infect others. Over half of COVID-19 transmissions are estimated to be caused by individuals who are asymptomatic or pre-symptomatic and do not know they are spreading COVID-19.

While some studies questioned the effectiveness of face coverings for reducing the spread of

[1] https://www.cdc.gov/mmwr/volumes/70/wr/mm7011a1.htm
[2] https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/masking-science-sars-cov2.html
[3] https://www.cdc.gov/mmwr/volumes/70/wr/mm7012e3.htm
[4] https://www.cdc.gov/mmwr/volumes/70/wr/mm7012e2.htm
[5] https://www.cdc.gov/mmwr/volumes/70/wr/mm7011a2.htm
[6] https://wwwnc.cdc.gov/eid/article/29/8/23-0471_article

COVID-19, they have since been retracted[7] or their findings discounted due to serious methodological flaws.[8][9]

Face coverings protect the wearer, and those around them

Face coverings protect the wearer from both getting and giving COVID-19. Well-fitted face coverings do a great deal to limit the release of droplets and aerosols, when worn properly over the nose and mouth. Simulations have demonstrated that well-fitted face coverings can prevent exposure to 95% of infectious respiratory particles when worn by both individuals.[10]

Face coverings made from cloth with high thread counts and materials that generate static electricity, such as polypropylene, are the most effective at filtering out droplets and aerosols. In addition, improving the fit of the face covering by using mask fitters, nylon hosiery sleeves, layering a medical mask under a cloth face covering, and knotting-and-tucking ear loops can increase protection.

Face coverings are safe for people of all ages

Face coverings have been demonstrated to be safe for people of all ages, including those with chronic lung disease. Studies have shown that individuals who wear face coverings both when at rest or when physically active experience no significant physiological changes, including no change in oxygen[11] or carbon dioxide levels[12], even if they have underlying chronic lung disease.[13] There is no evidence that face coverings increase the chance of transmitting or contracting COVID-19.

Face coverings prevent COVID-19 infections, hospitalizations and deaths

A meta-analysis of 21 studies demonstrated that mask use was associated with an 80% reduced risk of respiratory viral infection.[14] A meta-analysis of 44 studies similarly found mask use to be associated with a 66-85% reduced risk of COVID-19 infection specifically.[15]

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[7] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7680614/
[8] https://www.acpjournals.org/doi/10.7326/M20-6817
[9] https://bmjopen.bmj.com/content/5/4/e006577
[10] https://www.cdc.gov/mmwr/volumes/70/wr/mm7007e1.htm
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