



Return to Normal: Expectations for In-School Learning

2021-2022 School Year

FREQUENTLY ASKED QUESTIONS

September 21, 2021

Since the start of the current school year, the Office of the Bishop has received a number of correspondences asking for clarification. Each of these has been read carefully and considered seriously. This document aims to capture the questions in summary form and, in turn, offer responses to them.

What is the basis for the adapted expectations set forth for our Catholic schools?

The expectations set forth for the start of the 2021-2022 school year are a continuation of the ongoing evaluation of the circumstances particular to our diocese and within its parishes and Catholic schools. This evaluation began in March of 2020 when the coronavirus was first believed to have arrived in South Dakota. It continues today as we learn of the advances in testing and therapies, of the risk factors that place certain individuals at greater risk, and even as scientific study discovers mutations that the virus has undergone. The continuous evaluations have been made using objective data gathered through public health offices and our own parish/Catholic school experiences. They have been informed by the results from published clinical studies and the recommendations made by a broad spectrum of medical and health experts. That the mitigation protocols have been steadily relaxed represents a balance of many factors and an ongoing invitation to all Catholics to exercise prudence when interacting with Church ministries.

What specific considerations were given when establishing the expectations?

There are multiple. They have been categorized and summarized below.

1. CHURCH TEACHING

The Church teaches that parents hold the primary responsibility for forming their children. For this reason, decisions over which mitigation protocol, preventative measures, and therapeutic care is right and proper for a child is left to their parents. For additional information, please see the Catechism of the Catholic Church paragraphs [2207-2213](#) and [2221-2229](#).

2. PUBLIC HEALTH DATA & MEDICAL RECOMMENDATIONS

The data regarding infection rates and hospitalizations is reviewed daily in the Diocesan offices. Recommendations issued by public health agencies have also been reviewed, including the multiple revisions made to them.

3. DIOCESAN EXPERIENCE

COVID has caused serious harm to a small percentage of the population, most commonly among those with underlying health conditions. Most notably, school-aged children typically do not experience severe illness when infected. Beginning with the extraordinary measures of discontinuing Mass and offering school remotely in March of 2020, prudential loosening of these

restrictions in the parishes and schools has not led to major outbreak of infection at any of our locations.

4. UNINTENDED HARDSHIPS FROM MITIGATION

Hardships have been borne by many in our communities who, according to the scientific data, are not at risk for severe disease. Parents have repeatedly pointed to the COVID-related protocols (masking, social distancing, contact tracing leading to isolation, cancellation of so many events and activities, *e.g.*) as contributors to these hardships. Unexplained fear, anxiety over concerns that are not appropriate for children of the same age, the effects of not having healthy social interactions, and challenges arising from a child's difficulty with speech or hearing are all examples of the hardships that parents, principals, and teachers have relayed.

5. AVAILABILITY OF VACCINES

Vaccines are widely available for those who are most vulnerable to serious illness arising from a COVID infection. Clinical study has shown their efficacy in lessening the severity of the illness associated with a COVID infection.

6. INCONSISTENT RESULTS IN SCIENTIFIC STUDY

As humankind learns more about COVID through research, some mitigation efforts have been found to not always have the same, desired effect of slowing the spread of infection in every clinical study conducted. Since there remains controversy in the clinical data, reasoned thinking and well formed consciences will lead to individuals arriving at different conclusions about what the data tells us.

7. OUR CATHOLIC FAITH APPLIED TO RIGHT REASON

The Good News is God is in charge and will provide for all of us spiritually and in other ways if we humbly rely on Him and not ourselves. He gives us our natural gift of reason to analyze objective data and to make prudential decisions. In issuing these expectations, Bishop DeGrood is also inviting all Catholic school families to apply the spiritual gifts God gives us. As we learn from St. Paul in his Letter to the Philippians (4:4-7)

“Rejoice in the Lord always. I shall say it again; rejoice! Your kindness should be known to all; the Lord is near. Have no anxiety at all, but in everything in prayer and petition, with thanksgiving, make your requests known to God. The peace of God that surpasses all understanding will guard your hearts and minds in Christ Jesus.”

Which information/studies/protocols assisted in decision making? Which experts have contributed to the Bishop's understanding of the scientific and clinical data?

- Centers for Disease Control
- National Institute of Health
- Food & Drug Administration
- South Dakota Departments of Health and Education
- National Catholic Bioethics Center
- United States Catholic Conference of Bishops
- The Catholic Medical Association
- Studies that support the use of mitigation efforts to control the spread of COVID. Studies whose findings call into question the true benefit of mitigation efforts
- Catholic healthcare professionals serving communities within our diocese and beyond
- Other local, national, and international agencies whose faculties include experts in medicine and public health
- Local, state, national, and international testimony along with accompanying data that evidences unintended outcomes attributed to COVID mitigation factors imposed on people which has been shown to be harmful
- Teachings of the Catholic Church

What mitigation factors are in place at our Catholic schools?

- Clear expectations that those who are symptomatic or who have reason or diagnosed with infections are to remain at home.
- The full freedom to wear masks. All who feel it is best that they do are encouraged to do so.
- Hand sanitizing & additional surface cleanings in the schools.
- Added ventilation (where possible).

How are Catholic school families to make a good discernment?

Good discernment over COVID mitigation protocols and preventative measures should consider the recommendations of qualified experts. Catholic families are encouraged to consult with their own medical providers on such matters and then pray and discern so as to develop a well informed conscience to determine what is best for themselves, and for any under their care. As Catholics, we are also taught that we must do so with proper consideration for those around us. In doing so, we remain mindful that this is an emerging health situation in which one might have different perspectives and encounter differing recommendations from professionals, including from within the same discipline of medicine or even the same healthcare system. Bishop DeGrood advises people to use well-respected and objective sources of information to make reasoned and spiritual-based decisions all the while balancing the well being of the individual with our obligations to also seek the common good. He does so while calling all Catholic school families to also exercise great fraternal charity toward others who may make decisions that differ from others within our Catholic schools.

Has the bishop taken a position on the requirement of masks and vaccinations?

At this time and for all of the reasons specified above, Bishop DeGrood has determined that the decision on whether or not to use masks or receive COVID vaccinations is best left to individuals after making a good discernment as described above.

Why doesn't our Catholic school notify us when a student tests positive?

Last year it was discovered that notices being sent home regularly created a sense that there was more COVID in our schools than there really was. And so, to guard against perpetuating fear, the schools are not sending regular notices. Instead, as with other communicable diseases, we accept that COVID is among us and a part of our daily lives.

Why don't the Catholic schools conduct contact tracing?

We have learned from experience this past school year that some children were adversely affected without cause: isolated and yet never became infected. Providing in-school learning remains the primary focus of our school administrators and teachers.

Bishop DeGrood's list of expectations for Catholic schools stated this policy would be re-evaluated. What will it take for there to be a change in the policy?

Local, national and international data on COVID is regularly monitored to determine if a change in policy should be made. If factual, non-conflicting scientific and medical evidence warrants a change, a change will be made. In monitoring the data, the Diocese is also confirming that adequate healthcare resources remain available for those who are most ill and in greatest need of care. Should resources approach full capacity for caring for COVID patients or some other serious reason arise, a change may also become merited.