OPINION

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Will COVID-19 Impact College Campuses This Fall?

Published 08/16/23 08:00 AM ET

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Colleges and universities around the nation are getting ready for a large influx of students onto their campuses. There will be freshmen arriving on campus and acclimating to dorms away from their parents and siblings. We'll have seniors returning to complete their degrees and find jobs to launch their careers. College football teams will be getting ready for another season on the gridiron.

What has received less attention this back-to-school season is COVID-19 and how it will impact campuses across the nation.

This is the fourth academic year that students have returned to college campuses since the COVID-19 pandemic began in March 2020. Cases surged, as expected, in the fall of 2020, 2021 and 2022, with some campuses moving classes online at the beginning of the semester to mitigate the spread of the virus.

COVID-19 has been remarkably quiet over the past six months, as reported by the Centers for Disease Control and Prevention (CDC). On May 11, the Biden administration ended the COVID-19 public health emergency declaration. However, a statement as such does not mean that the virus has been eradicated. To the contrary, the virus continues to circulate and mutate, with over a dozen variants now present, all within the omicron lineage.

There is good news. Research into long COVID is progressing, with a better understanding of what it entails. Hospitalizations and deaths have remained low in 2023, as immunity acquired via prior infections and vaccination have provided some population protection.

However, since late June, there has been an uptick in hospitalizations and test positivity that have raised concerns within the public health community. Wastewater data have shown a persistent presence of COVID-19 in the population across the nation over the past year. This means that COVID-19 is not going away anytime soon.

With students returning to campuses, they are certain to foment new cases as students gather indoors for classes and live in residences in close quarters. This is the reality of COVID-19, which remains highly contagious, even more so than seasonal influenza.

The individuals on campus who are at highest risk of such infections are older faculty and staff and those afflicted with any one of several_chronic conditions that can impact people of all ages.

Given that just one in six people in the population have received the bivalent booster, and that the number of infections over the past six months has waned, the amount of protection across the population is likely at its lowest level for six months or more. The growing number of reinfections affirms that long-term immunity cannot be expected. Such vulnerability provides fertile grounds for spreading the virus, with college campuses a natural setting for such transmission.

So, what can campuses do to protect themselves from such outbreaks?

Many of the same countermeasures that were used in prior periods can be revisited.

Making at-home tests available for those who develop symptoms would provide valuable information to place headwinds on the spread of the virus.

Reminding campus communities about the benefits of being up-to-date on vaccines, masking when in congested environments, physical distancing as appropriate and feasible, as well as hand-washing; these countermeasures are still part of the game plan. Small efforts as such can have tremendous population health benefits for all.

Campuses that invested in enhanced ventilation systems in campus buildings will reap measurable benefits this fall, while those that did not make such investments will likely pay the price with more infections.

What is unnecessary is canceling classes or even moving classes online. The likelihood of requiring such measures is exceedingly low. At the same time, remaining flexible and nimble as data comes in is prudent since the virus continues to exhibit behavior that, at times, may appear unpredictable.

It is also likely that a new monovalent vaccine will be available in the fall, targeting the XBB-1.5 omicron variant. People most vulnerable to severe disease and poor outcomes will be most interested in receiving it.

Like other infectious diseases, such as influenza, everyone has a role to play in reducing population and individual risk. The key is clear communication and education to ensure that every stakeholder acts in everyone's best interest.

Although cases are likely to rise on college campuses over the next several weeks, experience suggests that such bumps can be managed. Panic or extreme responses elicit more harm than good.

This is the new normal with COVID-19. Campuses around the nation will be in its crosshairs, serving as a testing ground for the impact of COVID-19 on communities this fall.

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