



INTERIM PUBLIC HEALTH ADVICE FOR MPOX-RELATED PREVENTION AND CONTROL MEASURES IN SCHOOL SETTINGS



September 2024

PURPOSE OF THIS DOCUMENT

The Interim public health advice for mpox-related prevention and control measures in school settings provides public health advice on the prevention and control of mpox in the school setting and the care and isolation of a student or staff member suspected of having mpox. Advice also includes how to provide appropriate information about mpox to parents/guardians and students. The target audience for this document is emergency responders, national and local education authorities, school faculty and staff, and local health authorities (health and care workers, public health officers or community health workers).

General information about mpox

What this section is about: This section provides an overview of mpox, how it is spread and what the signs and symptoms are.

Why this section is important: This section builds a foundational awareness of key general knowledge on mpox that allows for an understanding of how advice in this document was developed.

Where more information can be found: <https://www.who.int/news-room/fact-sheets/detail/mpox#:~:text=Mpox%20is%20a%20viral%20illness%20caused%20by%20the>

Mpox often begins with a rash (sometimes beginning on the face) that spreads to the rest of the body. Other common signs and symptoms include an acute fever, sore throat, headache, muscle aches, or body pain, fatigue, and swollen lymph nodes. Due to the number of other causes of rash in children and adults, such as allergic reactions and varicella zoster, individuals with signs and symptoms of mpox should always be seen by a local healthcare provider to determine if they are infected with mpox or a different disease.

Mpox is primarily spread through close contact with the body fluids, mucous membranes, and broken skin or skin lesions of a person infected with the virus. It can also be spread through contact with materials that are contaminated by an individual infected with the virus, such as utensils and cups. It can also be spread through respiratory droplets; however, this is currently understood to not be the primary way the virus infects others. The virus can also spread from some animals, such as rats, mice, squirrels, and monkeys. If a person has symptomatic mpox on school premises, properly and thoroughly following infection prevention and control measures helps to mitigate onward transmission to others. An mpox infection can range from mild to severe, but most people fully recover. Any person that might have mpox should be seen by a healthcare provider so that the required supportive care can be provided.



Screening at schools in geographic areas experiencing an mpox outbreak

What this section is about: This section provides information on promoting self-monitoring of symptoms and signs and key messages that should be shared with the school community for school environments geographically situated in a mpox outbreak to promote this ongoing self-monitoring.

Why this section is important: The information listed here provides actions that can be taken to promote awareness of mpox without fear and stigma.

Where can more information be found: <https://www.who.int/emergencies/outbreak-toolkit/disease-outbreak-toolboxes/mpox-outbreak-toolbox#:~:text=Learn%20how%20WHO%20defines%20and%20classifies>

- **Active mpox screening in schools in areas experiencing an outbreak is currently not advised.**
 - Encourage the ongoing monitoring and self-monitoring of mpox signs and symptoms by all students and staff.
 - Anyone showing signs or symptoms of mpox should be asked not to attend school and should be referred to local health authorities (health and care workers, public health officers or community health workers) and isolate, even when symptoms are mild. Guidance is outlined below for anyone showing signs or symptoms of mpox on the school premises.
- **School staff (including school medical clinic staff, if relevant) need to be briefed on mpox and should post clear signage, to include:**
 - How mpox spreads (modes of transmission)
 - Clinical presentation (e.g., rash, fever)
 - Importance of prevention and control measures
 - Procedures for contacting local public health authorities to support the care of a student or staff member suspected to have mpox in a discrete and respectful manner
 - Ways in which they can work to prevent stigma and discrimination
- **Resources for the above briefings and signage can be found at the below links:**
 - <https://www.who.int/news-room/fact-sheets/detail/mpox>
 - <https://www.who.int/emergencies/outbreak-toolkit/disease-outbreak-toolboxes/mpox-outbreak-toolbox>
- **Teachers can assist in safely supporting students who present with mpox signs and symptoms, ensuring they are referred to local health authorities for appropriate follow up and care.**

IPC measures to implement at schools in areas experiencing an mpox outbreak

What this section is about: This section provides information on routine practices for schools to maintain to ensure a healthy and safe learning environment as well as considerations and actions for school environments geographically situated in a mpox outbreak.

Why this section is important: The information listed here is important for implementation because it ensures a healthy and safe learning environment for students and staff.

Where can more information be found: See links below

Generally, infection prevention and control at schools in areas experiencing an mpox outbreak involves the consistent and thorough implementation of standard, best practices that would normally take place regardless of the presence of an outbreak. This includes advocating for, and providing, resources for hand washing and the promotion of good cough etiquette, for example. Some of the measures below are not specific to mpox (e.g., promoting good ventilation in classrooms) but are nevertheless best practice to mitigate the spread of other communicable diseases. Enhanced measures to be put in place when a student or staff member is determined to have signs and symptoms of mpox on the school premises are outlined separately below.

- **Utilize the Three Star Approach for Schools.**
 - **Français:** https://globalhandwashing.org/wp-content/uploads/2015/03/L_Approche_Trois_Etoiles.pdf
 - **English:** https://globalhandwashing.org/wp-content/uploads/2015/03/UNICEF_Field_Guide-3_Star-Guide1.pdf
- Ensure functional hand washing stations with soap and clean water (or alcohol-based hand rub) are in place and encourage frequent hand washing after coughing or sneezing, after using the toilet, right before eating, after touching the broken skin or body fluids of any individual, and when hands are visibly dirty.
- Minimize physical contact and sharing of materials/ personal items of students and staff whenever possible.
 - Students and staff are encouraged to bring their own utensils and reusable drinking bottles whenever possible.
- **Keep classrooms and school spaces well-ventilated.**
 - For more information on ventilation in schools see the Ventilation in Schools and Childcare Programs website: https://archive.cdc.gov/www_cdc_gov/coronavirus/2019-ncov/community/schools-childcare/ventilation.html

- Ensure personal protective equipment and cleaning materials are in place and of sufficient quantity in case an individual is identified on school premises with signs and symptoms of mpox.
 - ✓ Medical mask for individual with signs and symptoms of mpox: If an individual with signs and symptoms of mpox is identified on the school premises, they should put on a well-fitting medical mask (additional actions outlined below).
 - ✓ Gloves and medical mask for school staff: If a school staff member must provide direct support (temporary interim care) to an individual with signs and symptoms of mpox, a well-fitting medical mask and gloves should be worn.
 - ✓ Gloves, medical mask and dedicated, close-toed shoes for cleaning staff: If an individual with signs and symptoms of mpox interacts with the school environment, gloves, a well-fitting medical mask and dedicated, closed-toed shoes should be worn while cleaning the environment.
- Perform environmental cleaning: Clean surfaces daily using hot/warm soapy water or detergent and then wipe with a clean wet cloth to remove the soap.
 - Ensure frequently touched surfaces (desks, chairs, doors, etc.) are thoroughly cleaned as well.
 - Always start with cleaning the cleanest areas first and finish cleaning the dirtiest areas last, such as the toilets.
- Promote cough etiquette and proper waste disposal measures.
- Ensure careful handling and thorough cooking of meal containing animal parts and prevent live animals from entering the school property; avoid dead and/or sick animals, and wash hands after touching animals or birds.

Communicate regularly with students, parents and staff

What this section is about: This section outlines what key risk communication and community engagement measures to put into place and who to engage in these efforts.

Why this section is important: The information listed here provides communication strategies that can be implemented to promote awareness of mpox without fear and stigma.

Where can more information be found:

- <https://www.who.int/emergencies/outbreak-toolkit/disease-outbreak-toolboxes/mpox-outbreak-toolbox#:~:text=Learn%20how%20WHO%20defines%20and%20classifies>
- https://cdn.who.int/media/docs/default-source/documents/emergencies/final-rcce-interim-guidance-on-using-inclusive-language-to-address-stigma-and-discrimination-1-september-2022.pdf?sfvrsn=b5749547_13

- Use risk communication and public information messages and materials that provide evidence-based information to:
 - Communicate risk and increase awareness of mpox among staff, teachers, students and parents. Utilize health and care workers and community health workers as feasible to support these risk communication efforts.
 - Provide a clear understanding of mpox signs and symptoms and what to do if someone is suspected of having mpox at the school (highlighting the importance of prompt isolation) or has been in contact with someone suspected to have mpox (highlighting the importance to self-monitor while continuing education).
 - Provide information about preventing the spread of mpox and actions for

preventing infection at school (and home). Adapt the information to the audience, pretesting the messages as possible and contextualizing to specific school setting. For example:

- Make information for children child friendly.
 - Deliver fun and engaging activities to help children understand what mpox is, how mpox virus spreads and how to prevent getting infected to help combat fear of disease.
 - Demonstrate how to perform hand washing with soap and water (or alcohol-based hand rub) effectively.
- Proactively address any possible stigma or discrimination associated with mpox infection, including when staff or students return to work/ school.
 - Provide regular updates and communication from school leadership to students and staff, especially as new information becomes available or if the risk of mpox infection changes.
 - Regularly reinforce proper hand washing techniques with all students and staff.

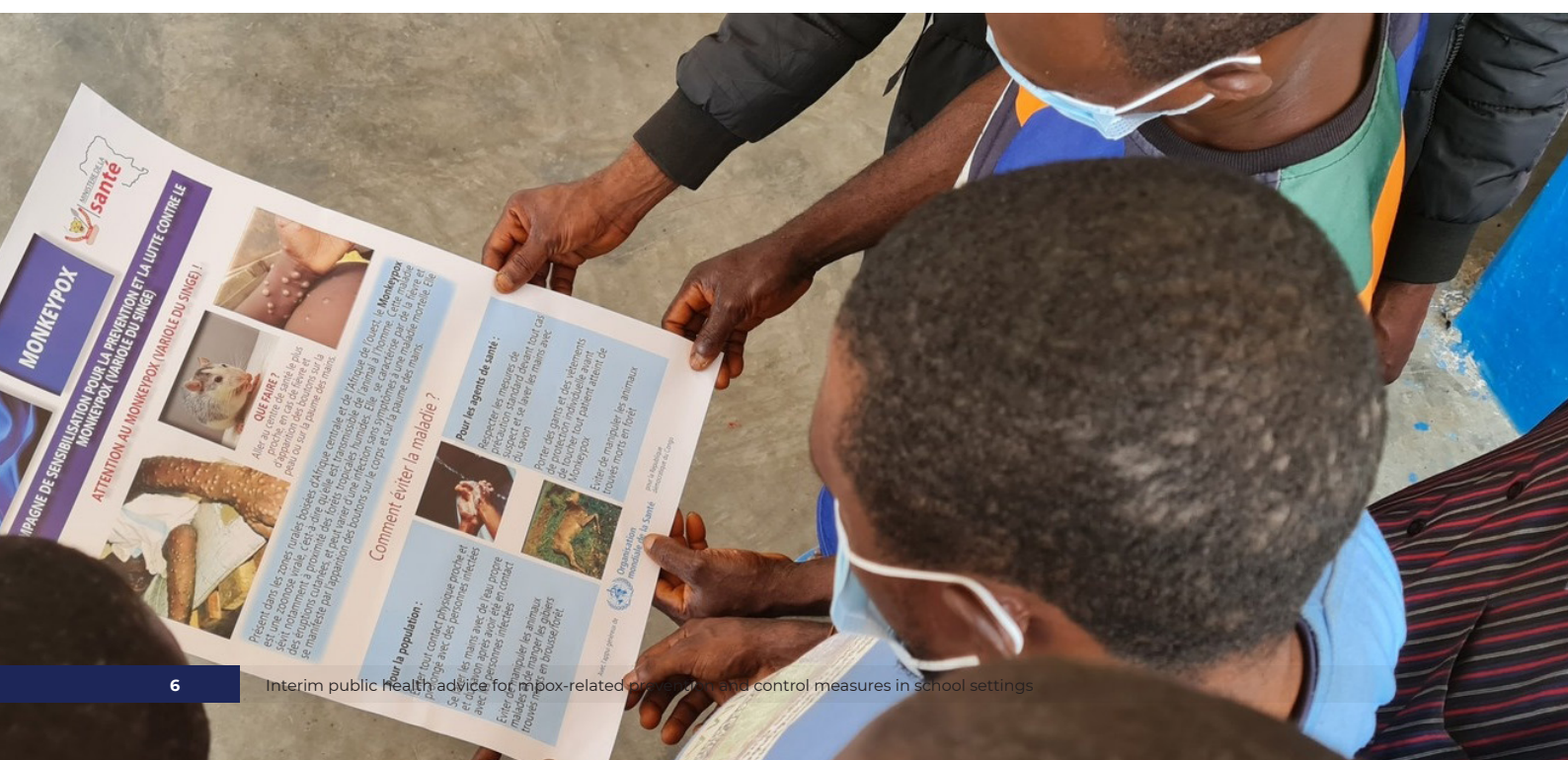
- Actively address misinformation and fears surrounding mpox, and include student, parent and teacher associations to address myths and rumors when appropriate.
- Consider additional actions that help reduce fear and stigma around mpox, such as peer-support groups.

If a student or staff member has had contact with a person known to be infected with mpox off the school premises

What this section is about: This section outlines what measures to take when a student or staff member has knowingly come into contact with a person known to be infected with mpox or has otherwise had a known exposure to mpox.

Why this section is important: The information presented here allows for monitoring of mpox and protection of the school community in a way that promotes continued learning and reduces stigma.

Where can more information be found: <https://www.who.int/emergencies/outbreak-toolkit/disease-outbreak-toolboxes/mpox-outbreak-toolbox#:~:text=Learn%20how%20WHO%20defines%20and%20classifies>



- If not showing signs or symptoms of mpox, the student or staff member should be permitted to continue attending school.
- Local health authorities should be contacted for local relevant guidance and to provide support with contact monitoring to take place off school premise (i.e., at home), to limit any stigma associated with contact with a person known to be infected with mpox.
- Ensure they understand risks and methods to prevent mpox transmission. If the person is a student, ensure their parents/guardians are also aware.
- For 21 days after the known exposure:
 - Limit sharing of personal items, such as eating utensils, school supplies, and personal hygiene products between the student/ staff member and others and where possible provide dedicated materials.
 - The student/ staff member should be counseled on what to do if symptoms appear and closely monitor their symptoms daily.
 - If sexually active, refrain from sexual contact
- If they develop symptoms while away from the school setting, they should not come to school and should notify health authorities for further guidance and to seek care.
- If they develop symptoms while at school rapidly implement the following section.

Student or staff member suspected to have mpox

What this section is about: This section outlines the actions that need to be immediately implemented in the case that a student or staff member is suspected to have mpox on the school premises. Information is also provided on the order in which to do so in a way that respectfully and safely manages the individual suspected to have mpox while protecting the broader school community from further infection.

Why this section is important: This information is critical to prevent the spread of mpox while promoting safe and ethical management of the individual suspected to have mpox.

Where can more information be found:

- <https://www.who.int/emergencies/outbreak-toolkit/disease-outbreak-toolboxes/mpox-outbreak-toolbox#:~:text=Learn%20how%20WHO%20defines%20and%20classifies>
- <https://www.who.int/teams/health-care-readiness/clinical-management-of-monkeypox#:~:text=Learn%20about%20the%20interim%20rapid%20response>

1. If a student/staff member at the school setting is suspected, probable or confirmed to have mpox, promptly implement the following measures:

- As discreetly as possible, isolate the suspected individual from others (with at least 1 meter of distance maintained), ideally in a separate room or area.
- Ask them to carefully cover lesions with clean clothes if not covered, wash hands promptly with soap and water or alcohol-based hand rub and wear a well-fitting mask² within 1 meter of others.

- School leadership should consider if it is possible to require masking suspect children especially for those who cannot tolerate masks, those with disabilities or specific health conditions that are suspected to have mpox. Where students are not able to wear a mask and showing signs and symptoms of mpox, physical distancing remains an alternative option, while any person assisting the individual within 1 meter should wear a medical mask and gloves as below.
- Promptly notify local public health authorities of the person suspected of mpox so they can validate whether the person meets the criteria for suspected mpox, guide care and testing including the safe transport of the person off school grounds, advise on further isolation measures for the sick person either at home or in a health care facility in line with clinical need and local procedures, and perform contact tracing as required.
- If the person is a student, while also liaising with local health authorities as above, contact their parents or guardians to arrange for the sick person to be safely transported off school premises. If local health authorities are not readily available, parents should be advised to bring the child to a nearby health facility for assessment by a healthcare professional, while avoiding physical contact with the child.
- If the person is a staff member, ask them to leave the school premises as soon as possible to seek care; communicate with local health authorities.
- If a staff member is needed to assist the individual, they should wear a medical mask and gloves² when interacting with, or within 1 meter of, the individual.
- When a person with confirmed mpox was on school premises while showing signs and symptoms of the illness, it is important to clean and disinfect surfaces and materials they may have come into contact with (especially absorbent materials). Avoid touching objects and surfaces that the suspected case may have come into physical contact with without first putting on gloves. Perform enhanced environmental cleaning¹ by following the below:
 - Appropriately fitting gloves, medical mask and dedicated, close-toed shoes should be worn².
 - Avoid dry sweeping or vacuuming to prevent dispersion of particles, use damp mopping or wiping instead.
 - If the individual has used multiple classrooms/spaces on campus, clean all spaces in the same thorough manner.
 - After washing surfaces with soapy water, the surface should be disinfected with a 0.05% chlorine solution. The surface should remain damp with chlorine solution for at least 1 minute for proper disinfection to occur.
 - If additional enhanced cleaning is needed over an extended period, the 0.05% chlorine solution should be remade if it is more than 24 hours old or if the solution is visibly dirty.
 - Properly remove and dispose of PPE and clean hands immediately after.

¹ School cleaners should be trained in proper cleaning, waste management techniques, and PPE use and removal.

² In the case of disposable masks or gloves not being available, cloth masks and reusable gloves can be worn and subsequently cleaned in hot water (>60° C) and soap or soaked in 0.05% chlorine solution after each use.

- Using gloves, remove any waste generated by the student/ staff member by placing it in waste bags, tying securely and placing it with other municipal waste.
 - Carefully remove gloves and dispose of them in a waste bin.
 - Wash hands with soap and water or ABHR solution immediately afterwards
- Inform other parents, staff, and the school community about the situation while strictly maintaining confidentiality. Reassure them that appropriate measures are being taken and provide education on mpox symptoms and preventive actions.
- As safe and feasible, allow the student to continue remote learning while properly practicing isolation measures.
- Provide psychosocial support as possible for students who are in isolation.
- The student/ staff member may return to school once skin lesions have crusted, scabs have fallen off and a fresh layer of skin has formed underneath.

2. If the person suspected to have mpox subsequently tests negative:

- If signs or symptoms persist despite testing negative, the individual should

follow up with a health provider to rule out other conditions and ensure they are well enough to return to school.

- If they have no signs or symptoms, they may return to school as usual, but should continue ongoing self-monitoring for mpox symptoms, especially if they had potential exposure to someone with mpox. If symptoms develop later, they should report them immediately and avoid contact with others.
- Ensure they continue to practice good hygiene and hand washing.

3. If the person showing signs and symptoms of mpox also has an epidemiological link and test results have not yet been received (a probable case) or has subsequently tested positive (a confirmed case):

- The person needs to remain in isolation, in healthcare facility or at home, as per public health guidance.
- They should not return to the school or have any contact with other students or staff, or enter any part of the school facility, until cleared by health authorities.
- Isolation measures should be maintained until all skin lesions have crusted, scabs have fallen off, and a fresh layer of skin has formed underneath, and any other symptoms have resolved.



Annex 1: Essential supplies list for Schools

| Item | Use |
|---|--|
| Bucket w/ LID, 20 l and tap (hand washing stations) with support | Hand washing |
| Bucket w/ LID, 60 l and tap (hand washing stations) with support | Hand washing |
| Jerrycan, 20L | (Optional) For drinking water |
| Basin, 40 liters, plastic | Mixing and storage of soapy water and 0.05% chlorine solution for cleaning |
| Bar soap | Hand washing |
| Liquid soap, 5 liters | Making soapy water for cleaning |
| Cleaning cloths | Cleaning surfaces |
| Cleaning gloves, heavy duty, nitrile, green, cat III, size M | Protection while cleaning |
| Squeegee/ mops with handle | Cleaning of floors |
| Chlorine Based disinfectants | Disinfection during cleaning process |
| Medical MASKS, EN 14683 Type I YY 0469 or YY/T 0969, if bacterial droplet filtration is below 98% or alternative equivalent standard. pack of 50 | Protection for sick individual, while within 1 meter of sick individual, and during cleaning |
| GLOVES, EXAMINATION, nitrile, pair (Gloves, examination, nitrile (preferable), latex, polychloroprene or PVC, powder-free, non-sterile (e.g. minimum 230 mm total length). Minimum thickness 0.05 mm. Sizes S, M, L.) | Protection for use while touching a sick individual and during cleaning |
| Waste bags, small (10L) | Secure disposal of waste generated while caring for a sick individual and cleaning |
| Mpox-related informational posters (IEC materials) | Clear communication |

References

- UNICEF's Three Star Approach for Schools https://globalhandwashing.org/wp-content/uploads/2015/03/UNICEF_Field_Guide-3_Star-Guide1.pdf
- WHO's guidance on surveillance, case investigation and contact tracing for mpox <https://www.who.int/publications/i/item/WHO-MPX-Surveillance-2024.1> Surveillance, case investigation and contact tracing for mpox: Interim guidance, 20 March 2024
- WHO's public health advice on mpox and congregates settings: settings in which people live, stay or work in proximity https://cdn.who.int/media/docs/default-source/documents/health-topics/monkeypox/public-health-advice-for-congregate-settings_v10_final.pdf?sfvrsn=deea3bf4_12&download=true
- WHO's guidance on prompt isolation and adequate clinical management when cases are identified <https://iris.who.int/handle/10665/355798> Clinical management and infection prevention and control for monkeypox: interim rapid response guidance, 10 June 2022
- WHO publishes public health advice on preventing and addressing stigma and discrimination related to mpox



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