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Dear Editor,

We argue that the focus on morbidity is of limited relevance to analyze the effects of school closure on COVID-19 transmission.

Children are equally susceptible, and similarly likely to transmit COVID19 as adults [1]. Decisions to close schools were based on an attempt to limit the spread of the virus [2]. Consequently, to investigate the efficiency of measures on schools, the outcome of an analysis should logically be on outbreaks or household transmission and assessing the direct or indirect effects of schools on it. Currently, household transmission is only mentioned as a limitation of the analysis. Outbreaks, on the other hand, are not discussed despite recent data for weeks 46-50 from the Swedish Public Health Agency reporting a total of 467 outbreaks in schools (highschools excluded), which corresponds to 48% of all the reported outbreaks in this period (967) [3]. This directly contradicts findings from the authors and should consequently be discussed along with other recent contradictory findings (see, e.g., [1]).

[1] Hyde, Z. (2020), COVID-19, children and schools: overlooked and at risk. Med. J. Aust., 213: 444-446.e1. <u>https://doi.org/10.5694/mja2.50823</u>

[2] Public Health Agency (2020, November 25). COVID-19 in children and Adolescents: A knowledge summary – Version 2. Retrieved January 11, 2021, from <u>https://www.folkhalsomyndigheten.se/contentassets/1e5e09395b9a4f498ff635cdd2b1a888/c</u> <u>ovid-19-children-adolescents.pdf</u> (p.6).

[3] Public Health Agency (2020, December 18). Veckorapport om covid-19, vecka 50. Retrieved January 11, 2021, from <u>https://www.folkhalsomyndigheten.se/globalassets/statistik-uppfoljning/smittsamma-sjukdom</u> <u>ar/veckorapporter-covid-19/2020/veckorapport-covid-19-v50-final.pdf</u>