AAP guidance on school reopening addresses physical and mental health, instructional time
by Melissa Jenco, News Content Editor

Editor's note: This guidance has been updated since this story was published. Please visit https://bit.ly/2BMPlW5. AAP interim guidance is based on current evidence and best data at the time of publication. Updates are provided to reflect changes in knowledge about the impact of the disease on children and adolescents. For the latest news on COVID-19, visit http://bit.ly/AAPNewsCOVID19.

New AAP guidance on reopening schools once COVID-19 wanes includes considerations for instructional time, physical and mental health, special populations, and more.

"Planning Considerations: Return to In-person Education in Schools" recommends working with local and state public health officials and taking Centers for Disease Control and Prevention (CDC) guidance into account to determine when it is safe to reopen. The decision should factor in issues such as the local spread of COVID-19, local testing capacity and schools' ability to limit the spread of the virus.

As schools reopen, they should follow CDC recommendations on cleaning and disinfecting and consider phased reopening, staggered scheduling and social distancing protocols. Plans also should be in place for excluding and isolating sick children and staff. Even with these measures in place, some students with high-risk medical conditions may need to continue distance learning.

Teachers planning lessons should take into account lost instructional time, but not expect to fully make up for it and should recognize some students will have struggled with virtual learning more than others. The curriculum should be a balance of core subjects, physical education, and other learning experiences.

If the academic expectations are unrealistic, school will likely become a source of further stress for students (and educators) at a time when they need additional support, the guidance says.

The impact of school closures may be greater for students with disabilities who lost out on both instruction time and related therapy services and may have difficulty transitioning back to school. The AAP recommends reviewing the needs of each child with an Individual Education Program. New referrals should take priority over re-evaluations, and students should start services even if they must be done virtually.

Schools also should continue to prioritize compliance with vaccinations and use onsite school health services to complement the pediatric medical home and help students stay healthy. Preparticipation evaluations for athletes should be conducted in alignment with guidance from the AAP as well as local authorities.

In times of isolation from family and friends, economic struggles and anxiety about returning to school, students' mental health also must be taken into consideration. School mental health professionals can provide critical support, and teachers and staff should be trained in psychological first aid. Students exhibiting suicidal ideation and other severe issues should be referred for additional services.

"Schools should be attuned to the broader social and family stressors that may affect a student's ability to attend school or be ready to learn," the AAP guidance says.

Another crucial way to support students is by providing nutritious meals, especially in the wake of families experiencing unemployment and economic hardships. Millions of U.S. children rely on these meals, and schools should look for ways to provide them regardless of whether their facilities have reopened.
Even if in-person instruction resumes, it may be temporary and administrators should plan accordingly.

"Until the broad availability of a vaccine and/or treatment for COVID-19 exists, there is a risk for future waves of disease impacting communities across the country," the AAP said. "It is important that schools plan for the possibility of additional periods of school closures and prepare strategically for distance learning or other educational options."