The Massachusetts Chapter of the American Academy of Pediatrics (MCAAP) Statement on School Reopening – 8/17/2020

The Massachusetts Chapter of the American Academy of Pediatrics (MCAAP) represents more than 1,600 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists across the Commonwealth. Our members are dedicated to improving the health and well-being of children by providing quality health care and advocating for them and their families. As our mission dictates, the MCAAP strictly promotes the health of children and we believe the following recommendations are in the best interests of children and their families.

As pediatricians we understand that in addition to academic instruction, schools play a critical role in children's social and physical development, provide emotional support, peer and mentor relationship-building, nutrition services, and physical activity that keep children's minds and bodies healthy. Teachers and other school personnel are essential to a child's development of their own personhood and often provide a safe haven for children during difficult times in their families' lives. Since schools have closed, pediatricians across the Commonwealth have seen a concerning increase in depression, anxiety, suicidal ideation, obesity, child abuse and neglect, and food insecurity. Children and youth with special healthcare needs such as developmental disabilities and autism face specific challenges during school closures. Pediatricians and parents have seen regressions in academic, social, and life skills that threaten their long-term functioning. Equally as concerning are the achievement disparities that are widening even more, disproportionately harming children of color, those living in poverty, and immigrants.

Regardless of the various educational formats across the Commonwealth in the fall or the manner students may experience extracurricular activities, it is imperative that all child advocates prioritize the promotion of healthy social interactions among students.

While we recognize the complexity of determining the timing and nature of K-12 school reopening across the state, we believe that we must strive to minimize the risk of infection for children, families, teachers, and school personnel, while also doing our best to lessen the socioemotional and educational risks children face if they are not able to physically return to school in the fall. We urge all school districts in the Commonwealth to follow guidance from the public health and medical experts while taking into consideration the needs of parents, teachers, and others with whom children interact.

We as pediatricians support the goal for all school districts to safely bring as many children back to in-person learning this September based on current understanding of the best available data regarding the effects of COVID-19 on children, the limited role that children in school settings have been shown to have on community transmission of this virus, and the ongoing monitoring of public health metrics of viral transmission in the state of Massachusetts. The ability to bring students back to in-person learning in each district will be dependent on community levels of disease, physical constraints of school

buildings, transportation considerations, and the safety and guidance of public health and education experts. The community must all do our part in maintaining good hand hygiene, wearing of masks or face coverings, staying home when sick, and limiting our exposure to others especially in crowded public spaces to further our ability to return students to in-person schooling this fall.

We encourage state and federal governments to continue to provide needed financial support to our cities and towns, allowing the school districts to access and obtain the resources required to meet safety guidelines outlined by the Department of Elementary and Secondary Education. It is crucial that local and state health departments continue to monitor the situation in local communities and that school districts remain flexible and be prepared to pivot to a different model of learning as conditions change.