As front-line providers of healthcare to the children of New York, the 6000 members of Chapters 1, 2 and 3 of the New York State District II of the American Academy of Pediatrics (NYS AAP) are dedicated to the physical, mental, and social health and well-being of all children.

The impact of school closures, with reduced in-person time in the classroom, has had a disproportionate impact on the mental health of our children. There has been a significant increase in the number of encounters for mental health issues reported by pediatricians across the state and the nation. Under-resourced communities are disproportionately impacted by the switch to remote learning for many reasons, including long-standing systemic health, financial and social inequities, which lead in turn to lack of access to the technology, and infrastructure necessary (but not sufficient) for success in these alternative teaching settings. Furthermore, under-resourced students normally depend on schools as a source of nutrition, special education and other resources, counseling, and before- and after-school care to a far greater degree than do their better-resourced peers.

The closure of schools in the early weeks of the pandemic was prudent and necessary, given our lack of knowledge of this novel disease. However, recent studies have shown that the K-12 school setting is not the high-risk environment for the spread of COVID-19 that had been originally feared. Despite these facts, New York State schools have not developed a comprehensive, cohesive and uniform approach to disease prevention and risk mitigation for school reopening, leading to confusion among parents and staff.

The Centers for Disease Control and the American Academy of Pediatrics have developed guidance detailing the steps necessary to enable schools to reopen safely and expeditiously. We encourage each individual school district to base its reopening decisions on the scientific evidence which is detailed in those documents.
Furthermore, we recommend the following policies be promptly adopted statewide:

- School reopening policy must be determined by applying accepted scientific and epidemiological evidence, including frequent rapid testing of students and staff, and appropriate mitigation strategies (universal masking, hand hygiene), and must be applied universally throughout the state. Social distancing in schools is also desirable, but there is no evidence to support requiring six feet of distancing between masked individuals. Reopening guidance, which considers local disease prevalence and spread, should ideally come from the state DOH and DOE.

  Schools should be treated as essential services, and should be the first entities to reopen following improvement in a community’s disease incidence and spread. School closure should be the last strategy employed as a community wide mitigation technique.

- Federal funds must be allotted directly to the school districts in need. Funding for mitigation and control techniques must be distributed equitably among all school districts, with increased funding going to those districts which have been historically under-resourced. All schools need to be able to provide the same testing, spacing and other mitigation services to their students. State funds must be distributed preferentially to those districts with the greatest needs, including infrastructure, hardware, software and protective equipment.

- Historically under-resourced populations have been impacted disproportionally by COVID disease. Schools which serve these heavily impacted populations must be prioritized for funding in order to enable prompt and safe reopening. This reopening must include all of the services traditionally provided by schools to these populations.

- Schools which serve populations of children with special educational needs, or who are at greater risk for learning loss, must be prioritized for reopening. This must include the provision of adequate funding for mitigation procedures for these schools.

- Vaccine distribution plans must include teachers and school personnel as front-line, essential workers, and adequate PPE availability for school staff must be assured.

It is time for a coordinated effort by the state DOH and DOE, School Districts and local school administrators, teachers, parents, pediatricians and children to take the necessary steps to safely reopen New York’s schools for full time, in person learning.

The members of NYS AAP stand ready to assist state and local officials in their efforts to reopen schools and enable children to resume both their education and their social and emotional development and growth. We urge schools, teachers, parents and other community members to reach out for assistance in securing optimal well-being for all our children.