COVID-19 Pandemic Guidance Document for Health and Physical Education, and Physical Activity

The Society of Health and Physical Educators (SHAPE America) serves as the voice for health and physical education professionals across the United States. The organization’s community includes a diverse membership of health and physical educators, as well as advocates, supporters, and 50+ state affiliate organizations.

Since its founding in 1885, the organization has defined excellence in physical education. For decades, SHAPE America’s National Standards for K-12 Physical Education have served as the foundation for well-designed physical education programs across the country. The organization was also a proud member of the coalition that developed the National Health Education Standards.

SHAPE America’s mission is to advance professional practice and promote research related to health and physical education, physical activity, dance, and sport.

Eastern District is one of five districts of SHAPE America, and is dedicated to furthering the purposes of the organization within the following Eastern District states: Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont, as well as Puerto Rico and the Virgin Islands.

SHAPE America Eastern District’s COVID-19 Pandemic Guidance Document for Health Education, Physical Education, and Physical Activity is intended to provide administrators, teachers, staff, parents and community members with critical information, statistics and resources regarding the importance of maintaining health and physical education as part of a well-rounded education regardless of the teaching environment (In-person, hybrid, and/or virtual).
The COVID-19 pandemic has truly created change and challenges for much of what we know and do within the educational setting. As we prepare for the re-opening of our schools within the Eastern District, we are faced with continued change and challenges with regards to what our schools will look like and how instruction will be delivered to our students. Therefore, our roles as educators and key stakeholders will be a crucial one as we begin to develop re-entry plans that put the physical, mental, and social-emotional health of our students at the forefront, making health education, physical education and physical activity a necessary component of each plan.

The “Every Student Succeeds Act “(ESSA) identifies school health education and physical education as part of a student’s “well-rounded education. Physical education is defined as a K-12 academic subject that provides standards-based curricula and instruction designed to develop the knowledge and behaviors for physical activity, physical fitness, and motor skills in students. Health education is defined as a K-12 academic subject that provides standards-based curricula and instruction designed to provide functional information that contributes to the development of essential health skills necessary to adopt, practice, and maintain health-enhancing behaviors in students. Physical education and health education has always been important, but now it is CRITICAL that we provide quality HPE for our students so they can thrive physically, academically and emotionally through this pandemic and beyond into the “new normal” that education will become.

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Unlike any other content area, physical education is the only discipline that teaches to the three domains of learning: psychomotor, affective, and cognitive. Instructionally, through the psychomotor domain, students learn to move efficiently and effectively adjusting their movements based on the situation. Cognitively, students develop new knowledge and mental skills to help them make informed decisions about their own personal health and well-being. Affectively, students learn how to express their feelings and emotions through age appropriate behaviors. As part of the Affective Domain, HPE programs provide students with a strong curriculum based on the 5 core competencies for SEL learning: Self-Awareness, Social Awareness, Self-Management, Relationship Skills and Responsible Decision Making. Thus, social emotional learning is crucial to their overall growth and development.

Social and emotional learning (SEL) has always been an integral component of a quality Health Education and Physical Education program, but more emphasis on this topic is needed now, more than ever. Student access to safe school-based health and physical education must be a priority in light of the pandemic’s social restrictions, excessive student screen time, and the emotional toll the pandemic has had on students. As educators, we are committed to empowering all children to lead healthy and active lives through effective health and physical education programs, taught by certified health and physical education teachers. Physical education allows students opportunities for safe and organized physical activity. Research shows that participating in physical education improves student attendance, test scores, participation and enthusiasm for other academic subjects, motivation to learn, and reduces discipline referrals. Evidence also shows that effective school health education reduces student participation in behaviors such as smoking, heavy drinking, school misbehavior, and violence.

“Student access to safe school-based health and physical education must be a priority in light of the pandemic’s social restrictions.”

According to the CDC (2019), When schools are closed, children lose access to important opportunities for physical activity. Many children may not be sufficiently physically active outside of the context of in-school physical education (PE) and other school-based activities. Beyond PE, with schools closed, children may not have sufficient opportunities to participate in organized and safe physical activity. They also lose access to other school-based physical activities, including recess, classroom engagements, and after school programs.
The loss of opportunities for physical activity from school closures, especially when coupled with potentially diminished nutrition, can be particularly harmful to children. Physical inactivity and poor nutrition among children are major risk factors for childhood obesity and other chronic health conditions. Over 75 percent of children and adolescents in the United States do not meet the daily physical activity level recommendations (60 minutes or more), and nearly half exceed 2 hours per day in sedentary behavior. Current models estimate that childhood obesity rate may increase by 2.4 percent if school closures continue to December 2020.[37],[38],[39]

**Physically active students:**
- Consistently outperform less active, unfit students academically in both the short and long term. Demonstrate better classroom behavior.
- Demonstrate a greater ability to focus, and
- Report lower rates of absenteeism.

**Students that attend physical education are:**
- Approximately 2 to 3 times more likely to be active outside of school.
- Almost twice as likely to continue to be active to a healthy level in adulthood.

According to the American Academy of Pediatrics (2020), it is critical to maintain a well-balanced curriculum with emphasis on physical education and other learning experiences along with all the other core subject areas.

In their Whole School Whole Community Whole Child info graph, the AHA state that their programs and advocacy efforts promote physical education and health education while contributing to increased physical activity and children’s well-being, along with advocating for highly effective and more frequent physical education (American Heart Association, 2019).
SHAPE America’s 2020-2021 School Reentry Considerations: K-12 Physical Education, Health Education, and Physical Activity has been designed to provide educators and administrators with an overview of three models of learning to assist with preparation for a safe return to teaching health and physical education. The three models include: In-school instruction with physical distancing; Distance learning, and Hybrid learning (a combination of in-school instruction with physical distancing and distance learning).

Kaiser Permanente recommends 5 starter plays to implement physical education and lay the groundwork to provide safe instruction for the next normal at school.

As part of a well-rounded education, it is vitally important to ensure that “Advocacy Efforts” for Physical Education and Health Education exist within our schools and not left out. We must be at the table or we will be left off the “menu”. Now more than ever during the COVID-19 Pandemic, we need to stand up and advocate for the profession, our students, and our communities. We can shine and show why our academic subjects of health education and physical education are so important for the health and well-being of our children.
RESOURCES

Health and Physical Education

- SHAPE America COVID-19 Resources
- The CARES Act: A Federal Funding Opportunity for Health and Physical Education
- The Importance of Quality Physical Education
- Strengthen Physical Education in Schools
- Advocating for Physical Education
- Elementary PE Social Distancing
- A Template Letter for your Administrator
- OPEN Fall 2020 Planning Page

Physical Activity

- CDC: The Importance of Reopening Schools This Fall
- Study: Returning Chinese school-aged children and adolescents to physical activity in the wake of COVID-19: Actions and precautions
- Physical Activity Guidelines for Americans, 2nd Edition
- World Health Organization Physical Activity Key Facts
- American Heart Association Recommendations for Physical Activity in Kids and Adults
- USDA Choose My Plate Age Reccomended Physical Activity

Play and Recess

- 29 Reasons Why Play is So Important During Times of Crisis and Stress
- The Importance of Daily Recess When Schools Return From COVID-19 Lockdowns
- Peaceful Playgrounds: Covid-19 Social Distancing School Playground
- Playworks: How Schools Can Approach Recess in the 2020 School Year

Social/Emotional Learning

- CASEL Guidelines for Educators, Parents, and Caregivers
- SHAPE America: Social and Emotional Learning Considerations for School Re-entry
- Crosswalk for SHAPE America National Standards & Grade-Level Outcomes for K-12 Physical Education and CASEL Social and Emotional Learning Core Competencies
RESOURCES CONTINUED

General COVID-19 Resources

- CDC: Schools & Child CarePlan. Prepare, and Respond
- CDC Readiness and Planning Tool to Prevent the Spread of COVID-19 in K-12 Schools
- NJ Spotlight: Murphy to Use $54M in Federal Aid to Help Bridge Digital Divide in State’s Schools
- NJ Spotlight: Can Schools Reopen Safely? Newark Pilot Program Offers a Trial Run
- Kaiser Permanente: Thriving Schools: Playbook for Healthy School Communities
- Infographic: Quality Physical Education Policy
- DESE: Guidance for Courses Requiring Additional Safety Considerations for Fall 2020
- NJEA COVID-19 Resources
- NJEA testifies to Assembly Education Committee

NEA Resources

- Member Webinar: Returning Safely to In-Person Instruction
- Educator Rights to Leave Under Federal Law
- All Hands on Deck: Initial Guidance Regarding Reopening School Buildings
- DEMAND CONGRESS GIVE COVID-19 RELIEF HELP TO PUBLIC SCHOOL STUDENTS, EDUCATORS, AND COMMUNITIES
- NJEA: Suggested Minimum Acceptable Standards for a Return to In-Person Instruction
SHAPE America Re-Entry Guidelines

- K-12 School Re-entry Considerations

State Re-Entry Guidelines
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