

Supporting Healthy Nutrition and Physical Activity During the COVID-19 Pandemic

American Academy of Pediatrics Interim Guidance

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The COVID-19 pandemic has compromised healthy nutrition and physical activity

The coronavirus disease 2019 (COVID-19) pandemic has burdened families with economic hardship, food insecurity, school closings, and shutdowns. Families are struggling to sustain the healthy lifestyles necessary to building the foundations of health for their children and adolescents. It is especially important for pediatricians to recognize the new barriers to a healthy lifestyle that have resulted from the COVID-19 pandemic while continuing to address already existing challenges to a healthy lifestyle faced by children, adolescents, and families.

[Assessing and counseling](#) on maintenance of healthy nutrition, sufficient sleep, physical activity, and minimizing sedentary time are all key components of care during the pandemic. The guidance below is focused on population-based recommendations for supporting healthy nutrition and physical activity during the COVID-19 pandemic. A complementary set of guidance for children and adolescents with obesity is available [here](#).

Access to nutrition has been compromised

As a result of the economic hardships and inconsistent access to school breakfasts and lunches because of virtual, half-day, and/or hybrid learning, many children and adolescents may not have regular access to nutritious foods. Families may have experienced shifts to high-calorie snack foods and nonperishable processed foods; there may have been significant increases in the consumption of unhealthy snacks and sugary sweetened beverages. Both food insecurity and food scarcity can negatively affect nutrition, lead to increased risk for disordered eating, and increase consumption of nonnutritive, calorie-dense foods that can lead to unhealthy weight gain and contribute to obesity.

Opportunity for physical activity has been negatively affected

Closures of recreational sports, gyms, and schools as well as important safety and mitigation measures related to reopening recreational activities and resuming organized sports and physical education have resulted in less access to opportunities for organized physical activities. In-person organized sports and physical education classes may be modified or limited because of physical distancing requirements and space issues in schools and recreational buildings. Families report that during COVID-19 mitigation, time spent in physical activity and sports has decreased while sleep time and screen time have increased.

Health inequities are worsening

Health inequities have been magnified during the pandemic, with Black and Hispanic children, children with special health care needs, children in families with low incomes or members with limited English proficiency, and children in rural areas facing higher risks of unmet health care needs. During the pandemic, both obesity and food insecurity are likely to increase. Rates of COVID-19 exposure are higher in families with lower mean family incomes and in those of diverse racial/ethnic populations, and in groups who experience existing health inequities. Already existing inequities in access to healthy food and physical activity are likely to worsen.

Role of the Pediatrician

Pediatricians will need to support families in finding ways to address barriers to healthy lifestyles during the COVID-19 pandemic while acknowledging the role of disrupted schedules, stress, and health inequities that make maintaining a healthy lifestyle even more difficult. The pandemic has created environments of disrupted family routines, sleep dysregulation, reduced physical activity, increased screen

time, increased access to unhealthy snacks, and less consistent access to food, that can result in increased risk for the chronic diseases of obesity, hypertension, type 2 diabetes mellitus, and cardiovascular disease.

Recommendation: Assessment and Screening

At all well visits, assess/screen for nutrition and physical activity disruptions attributable to the pandemic, and [screen for obesity onset or worsening](#) during the pandemic.

Assess nutrition:

- Evaluate for food insecurity and access to fresh food
- Assess routines and patterns around eating
- Assess for disordered eating related to the pandemic, including scarcity of food, stress, and trauma

Assess physical activity:

- Understand amount and type of physical activity
- Assess barriers and challenges related to opportunities for physical activity
- Assess recreational screen time and sedentary time

Assess obesity onset or worsening:

- Conduct obesity assessment (BMI percentiles) at all visits, because obesity is likely to increase during the pandemic
- Identify at-risk children and adolescents through assessment of nutrition, sedentary behavior, sleep and physical activity, review of systems, and physical and family history

Recommendation: Counseling

Provide tailored counseling using positive strategies that build on family strengths, emphasizing maintenance of healthy lifestyle and/or how to mitigate obesity onset in the face of the increasingly obesogenic environment of the pandemic.

Counseling should be tailored to the child's developmental stage and the socioeconomic, cultural, and psychological characteristics of families and help maintain optimal nutrition and physical activity during the pandemic. Counseling should also be aimed at increasing healthy nutrition, such as increased fruit and vegetable consumption, scheduled meals and snacks, and creating healthy home nutritional environments.

Recommendation: Knowledge and Skills

Pediatricians should become familiar with the complex and interconnected factors that lead to poor nutrition, decreased activity, and excessive weight gain and how these factors are affected by the pandemic.

Specific areas of knowledge and skills include techniques of lifestyle behavior counseling and the promotion of parenting skills, social-emotional health, community nutrition and activity resources, and treatment options for obesity (eg, lifestyle behavior counseling, pharmacotherapy, and metabolic and bariatric surgery).

Mood disorders and experience of trauma can have impacts on eating and physical activity. In the setting of the pandemic, changes in nutrition/weight may be indicators of more significant mental health issues. Mood disorders and other mental health concerns may interfere with the ability to promote a healthy lifestyle.

Relevant AAP Policy Statements

- [Physical Activity Assessment and Counseling in Pediatric Clinical Settings](#)
- [Organized Sports for Children, Preadolescents, and Adolescents](#)
- [Promoting Food Security for All Children](#)
- [Addressing Food Insecurity: A Toolkit for Pediatricians](#)
- [Preventing Obesity and Eating Disorders in Adolescents](#)

Relevant AAP COVID-19 Interim Guidance

- [Return to Sports](#)
- [Guidance for School Re-entry](#)
- [Caring for Children and Youth With Special Health Care Needs](#)
- [Supporting the Emotional and Behavioral Health Needs of Children, Adolescents, and Families](#)
- [Obesity Management and Treatment](#)

Related AAP Resources for Pediatricians

- [Institute for Healthy Childhood Weight](#)
- [Food Research and Action Center and AAP: Addressing Food Insecurity – A Toolkit for Pediatricians](#)