Covid-19’s Impact on Youth Physical Activity and Safe Routes to School

ONE Step Forward
TWO Steps Back

Safe Routes PARTNERSHIP
Active Paths for Equity & Health

Covid-19’s Impact on Youth Physical Activity and Safe Routes to School
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Active People, Healthy Nation™ is a national initiative to help 27 million Americans become more physically active by 2027. This initiative promotes effective strategies, including Safe Routes, recommended by the Community Preventive Services Task Force to improve physical activity. CDC, in collaboration with state, community, and national partners, promotes these proven strategies through Active People, Healthy Nation to ensure that all Americans have access to safe and accessible places for physical activity. Use of Active People, Healthy Nation does not imply review, approval, or endorsement by HHS.
Table of Contents

About This Report .......................................................... ii
I. Introduction .................................................................. 1
II. Background: COVID-19’s Impact on Communities’ Physical and Emotional Health .... 2
III. Safe Routes to School and Safe Routes Everywhere During a Pandemic ........... 4
IV. National Organizations See an Emergency for Youth .......................... 8
V. The Path Forward: Recommendations and Next Steps for
   Centering Equity and Physical Activity ................................ 13
Appendix ........................................................................ 15
Endnotes ........................................................................ 17
This report helps paint a picture of how COVID-19 has impacted physical activity for youth and families. It examines how the past year has limited opportunities for physical activity and changed the way people move throughout their communities. This report includes perspectives from Safe Routes to School practitioners and national organizations working to advance physical activity for youth and families. It offers recommendations for supporting physical activity moving forward.

**Why this report was created:**
After living with the COVID-19 pandemic for more than a year, individuals and organizations working in communities have observed a decrease in opportunities for physical activity. The purpose of this report is to summarize quantitative data from emerging studies and perspectives from national thought leaders and practitioners who work directly with communities to paint a more holistic picture of how physical activity for youth has changed during COVID-19. The pandemic has also changed how people move throughout their communities. This report looks at how some communities found the joy and relief of walking and biking in their neighborhoods, but many families were not afforded that same experience during COVID-19.

**How this report was created:**
To build a more robust understanding of how physical activity has changed during the COVID-19 pandemic, the Safe Routes Partnership reached out to practitioners working in local communities and national thought leaders. At the beginning of 2021, the Safe Routes Partnership surveyed its Safe Routes to School community to assess how COVID-19 impacted local Safe Routes to School programs. Individuals who responded to the Safe Routes to School survey were invited to participate in a subsequent listening session with their peers to discuss challenges and lessons learned during the past year. The Safe Routes Partnership also held interviews with seven national organizations leading efforts to advance physical activity for youth and families across the country, who were asked to discuss the implications of less physical activity for their work and the communities they serve. Along with emerging studies and data on physical activity, these surveys, listening sessions, and interviews helped shape and inform this report.

**What this report provides:**
- Background on how COVID-19 has impacted communities’ physical and emotional health.
- A summary of challenges and opportunities for Safe Routes to School practitioners and programs during the COVID-19 pandemic and beyond.
- Key themes and reflections emerging from interviews with national organizations working to advance physical activity for youth and families.
- Recommendations for supporting physical activity strategies and centering physical, emotional, and social health in recovery plans moving forward.
Physical activity is essential for improving and maintaining the physical, social, and emotional health of youth and adults in all communities. Unfortunately, most people in the U.S. are not getting the recommended amount of physical activity.\(^1\) Low levels of physical activity were already harming people of every demographic group pre-pandemic, with many of the worst effects experienced by people with lower incomes and people of color.\(^2\) One year into the COVID-19 pandemic, we are beginning to understand the toll taken on people’s physical activity and health.

Some people in the U.S. were able to take advantage of working and learning from home, spending more time outdoors, and walking or biking in their neighborhood during the past year, but that has not been the case for everyone. The COVID-19 pandemic has exposed what research has long shown – not all communities, people, or places have the same access to safe places to recreate or to walk and wheel close to home and to every day destinations.

Physical activity and unstructured time for play are not - or should not be - a luxury for kids. Physical activity helps kids’ brains grow\(^3\), helps them learn and stay on task, and improves academic achievement.\(^4,5\) Regular moderate-to-vigorous physical activity offers immediate health benefits and reduces the risk of many adverse health outcomes.\(^6\) It also provides opportunities to combat depression and behavioral disorders\(^7\), and build Social and Emotional Learning competencies.\(^8\) Sadly, physical activity has often fallen down the priority list during a year full of profound challenges.

This report examines how the past year changed the way kids and families engage in physical activity and move throughout their communities and the impact of decreased physical activity. The report also takes a closer look at how Safe Routes to School programs adapted and pivoted to meet community needs and either pressed on or pressed pause during the pandemic. Finally, we will share reflections from leading national organizations and recommendations for supporting physical activity strategies for youth and families and recovery plans moving forward.

The Safe Routes Partnership developed this report as part of a partnership with the YMCA of the USA. With support from the Centers for Disease Control and Prevention, this partnership allowed our organizations to continue to advance our joint work to support communities in becoming places where children and adults can be active and healthy. In the development of this report, the Safe Routes Partnership held four listening sessions with Safe Routes to School practitioners and advocates and a series of interviews with a selection of national organizations leading physical activity efforts. These partner listening sessions and discussions helped shape this report and paint a more holistic picture of the state of physical activity for youth and families.
DISPARATE IMPACTS OF COVID-19

COVID-19 disproportionately impacts low-income communities and Black, Indigenous, and people of color communities and highlighted racial, health, and built environment inequities that go back many decades. Black, Indigenous, and people of color workers are more likely to be employed in frontline or essential fields like public transportation, child care, social services, cleaning services, agriculture, and food production. Essential workers have been required to continue showing up to work in conditions that place them at high risk for exposure to COVID-19. These same workers are also much more likely to have pre-existing health conditions, lack health insurance, and lack access to health care. Black, Native, and Latinx Americans are also more likely to live in dense, multi-generational housing, further increasing the risk of exposure to their communities. As families of color and families with lower incomes face disparate health and economic hardships during COVID-19, children of color and children of families with lower incomes also face challenges. Children of color have disproportionately experienced learning loss, challenges with the digital divide, food insecurity, and housing instability during the pandemic.

Furthermore, Black, Indigenous, and people of color communities are more likely to live in areas lacking safe, quality walking and biking infrastructure. Local and state governments issued stay-at-home orders and asked that only essential workers leave home for work and for everyone to stay home unless they have an essential trip like getting groceries or going to medical appointments. Many people have not had the privilege of staying home and continued to require transportation options to get to and from essential jobs, grocery stores, and other essential services. The pandemic highlighted the need for safe, affordable, and accessible transportation options for all. It also made clear that access to public transit and the availability of safe, quality walking and biking infrastructure are essential.

In a recent study conducted at Kaiser Permanente Southern California, researchers compared hospitalization rates, intensive care unit (ICU) admissions, and mortality for patients with COVID-19 who were consistently inactive, do some activity, or consistently meet physical activity guidelines. The study found consistently meeting physical activity guidelines was strongly associated with reduced likelihood for severe COVID-19 infections. Levels of consistent physical activity pre-pandemic were already insufficient. The study points out that pandemic control measures have likely had the unintended consequence of further reducing levels of physical activity. Being consistently inactive was a stronger risk factor for severe COVID-19 outcomes than any of the underlying medical conditions and risk factors identified by CDC, except for age and organ transplant history. The study also recommended that public health authorities inform the public that aside from getting vaccinated and following public health safety guidelines, engaging in regular physical activity may be the single most important action individuals can take to prevent severe COVID-19 and its complications, including death.
Section II: Background: COVID-19’s Impact on Communities’ Physical and Emotional Health

REDUCED PHYSICAL ACTIVITY AND INCREASED STRESS DURING COVID-19

As many families spent an increasing amount of time at home during the pandemic, daily physical activity opportunities decreased, including for students learning from home. Parents of students learning remotely or in hybrid models were more likely than parents of students learning in-person to report that their children experienced decreased physical activity, time spent outdoors, time with friends, and worsened mental or emotional health. Physical inactivity is one of the primary contributors to chronic diseases and leading causes of death. In addition, physical inactivity contributes to obesity. These conditions disproportionately affect low-income communities and communities of color. The decrease in physical activity during the past year has led to serious physical health outcomes. During the pandemic, 42 percent of adults reported undesired weight gain with an average increase of 29 pounds. Communities of color were most likely to report unintended physical changes during the pandemic, including changes to weight and sleep patterns. Youth also experienced accelerated weight gain during the pandemic: overall obesity among children ages two to seventeen increased from 13.7 percent to 15.4 percent in one year, with more pronounced increases for children ages five to nine years and those who were Hispanic, Black, or children from families with lower incomes.

Many families have been coping with significant stress levels during the pandemic, from fear of contracting and recovering from the virus to financial, housing, and food insecurities. Nearly one in four adults reported drinking more alcohol to cope with their stress. Youth have also been navigating higher levels of stress during the past year. Students learning remotely have struggled to stay engaged in a virtual classroom, and learning loss is a growing concern. Nearly three-quarters of parents polled in a national survey shared that they were concerned about their children’s learning loss during the pandemic due to virtual learning. That same poll showed that the vast majority of parents in the United States are concerned about the toll remote learning has taken on their children’s physical and mental wellbeing.

In early 2020, Action for Healthy Kids conducted a survey of 1,000 parents and caregivers of kids in Pre-K through 8th grade to get a pulse on parents’ and caregivers’ thoughts about the health issues their children face. Following the onset of the COVID-19 pandemic, they conducted a follow-up survey later that year and found that parents and caregivers recognized their children were facing a health crisis. Seventy-five percent of parents said their children were currently facing issues regarding their health and wellbeing. Nearly two-thirds of parents noticed impediments to their kids getting enough sleep, proper nutrition, and physical activity. During the pandemic, the concern that increased the most for parents and caregivers was related to the physical activity of their children. Parents were increasingly concerned for their children’s inactivity and most interested in receiving support from their children’s schools in the form of virtual physical education classes and at-home physical activities.
The abrupt shift to remote learning in the spring of 2020 challenged schools and school-based programs, including Safe Routes to School, to rapidly shift gears and adapt to an unprecedented new reality. Safe Routes to School practitioners pivoted to help families address challenges presented by remote learning and encourage kids and families to continue walking and rolling. At the beginning of 2021, the Safe Routes Partnership surveyed our greater Safe Routes to School community to assess how COVID-19 impacted local Safe Routes to School programs. Individuals who responded to the Safe Routes to School survey were also invited to participate in a listening session with their peers to discuss challenges and lessons learned during the past year. This section of the report covers the data collected from the survey and listening sessions, including reflections, lessons learned, and challenges shared by our greater Safe Routes to School community. See Appendix A for additional survey data details.

POLLING SAFE ROUTES TO SCHOOL PROGRAMS FROM ACROSS THE COUNTRY

In January 2020, the Safe Routes Partnership conducted a survey to Safe Routes to School practitioners and advocates, with an invitation to share what changes occurred in their programs over the previous year. One hundred twenty-five different Safe Routes to School programs from 32 states responded to our survey. Sixty percent of the responses came from Safe Routes to School coordinators in local communities, 17 percent were community advocates or partners, and the remaining 23 percent of responses were from parents and caregivers, teachers and school staff, public health and local government professionals, afterschool program providers, and volunteers.

Our survey asked Safe Routes to School programs to share what communities they work with, and, unsurprisingly, the majority of the programs reported working in low-income communities and communities of color. Fifty-five percent of the programs that responded said they work with Latinx families, 45 percent work with Black and/or African-American families, 24 percent work with Asian-American, Pacific-Islander, and/or Native Hawaiian families, and 12 percent work with Native-American and/or Tribal families. Seventy-five percent of the Safe Routes to School programs surveyed responded that they work in low-income communities.

Every family and community has been impacted differently during the COVID-19 pandemic. Schools tried remote learning and in-person learning models and often a hybrid of the two. At one point during the last year, over half of the survey respondents indicated
their communities implemented a hybrid learning model, 29 percent said their community had in-person learning opportunities, and 80 percent said their community implemented a remote learning model. The shift from in-person to remote learning was a tremendous challenge for youth, families, educators, staff, and school-based program providers, including Safe Routes to School practitioners. Two-thirds of the Safe Routes to School programs that responded to the survey said they could continue offering programming that encouraged physical activity during the pandemic. The other third was not able to provide any programming during the past year.

Individuals who responded to the 2021 Safe Routes to School survey were subsequently invited to participate in a conversation with their peers to further discuss the challenges and lessons learned during the pandemic. The Safe Routes Partnership held a series of four listening sessions where staff facilitated discussion and captured notes while Safe Routes to School practitioners swapped stories and shared ideas and resources.

The Safe Routes Partnership asked listening session participants to discuss the changes that occurred in their Safe Routes to School program during the last year due to the pandemic. Practitioners shared that their existing community partnerships and Safe Routes to School teams were impacted early on. When schools began to close and switch to virtual learning models, they lost access to students, families, teachers, and school staff. Many indicated they had difficulty reaching or no contact at all with the communities their programs usually served. Public health organizations and providers, frequent partners to Safe Routes to School efforts, were called to the frontline COVID-19 response in their communities. Some newer Safe Routes to School programs had just hired staff and started developing relationships with schools but weren't able to effectively launch their program during school closures.

Seasoned programs also suffered, with budget reductions, staff lay-offs, and crossing guard and traffic safety program cuts. Some Safe Routes to School programs had just hired staff and started developing relationships with schools but weren't able to effectively launch their program during school closures.

During the listening sessions, the Safe Routes Partnership asked each group of Safe Routes to School practitioners to answer the following questions:
- What are some of the changes that have occurred in your Safe Routes to School program during the last year due to the pandemic?
- Were there any activities you were able to continue with little to no changes?
- Has your program been able to collect any data during the pandemic? What tools did you use, and what were your findings?
- What are your biggest concerns for Safe Routes to School and the youth and families you work with moving forward?
- What opportunities have come up for your program during the past year, or what opportunities do you see ahead?
As the pandemic unfolded, Safe Routes to School practitioners started to see the most pressing needs in their communities and quickly shifted gears. Practitioners facilitated bike swap programs to connect working bicycles with people who needed them most. They showed up for meal distribution programs, delivering meals to families, and offering bike repair clinics at grab-and-go meal sites. Safe Routes to School programs focused on physical activity programming in neighborhoods where internet service was lacking and dropped off physical materials for youth and families to encourage continued walking and biking through stay-at-home orders.

When asked whether Safe Routes to School practitioners have been able to collect any data during the past year, the overwhelming majority of listening session participants said they were not able to do so. Many programs did not want to pile on with Safe Routes to School surveys, with so much being asked of youth, families, educators, and staff. When practitioners put out surveys, the response rate among youth, parents, and caregivers was low. The practitioners who did share they had collected data indicated that Safe Routes to School participation and physical activity decreased during the pandemic:

- One Safe Routes to School practitioner shared that their youth cycling program could continue through the pandemic, but due to gathering restrictions, participation dropped from 300 to 150 students.
- Another Safe Routes to School program shared that 70 students across twelve schools participated in their 2020 Walktober challenge; pre-COVID-19 participation reached over 1,000 students walking daily.
- A Safe Routes to School coordinator reported their Walking School Bus participation dropped from 80 students during the previous year to 18 students during the pandemic.

Some Safe Routes to School programming was able to continue with little or no changes. Encouragement events like Ruby Bridges Walk to School Day became a Walk Anywhere Day, where youth and families could participate in a community-wide event on their own time and in their neighborhoods. Coloring activities and poster contests continued to help kids think about walking and biking on their way to school and other places in the community. During warmer months, some Safe Routes to School programs partnered with local YMCAs and Boys and Girls Clubs to offer outdoor, physically distanced programming. Many programs focused on addressing engineering concerns near schools to improve safe walking and biking in the long term. Practitioners facilitated virtual walk audits to assess what infrastructure improvements are needed near schools and updated Safe Routes to School walking and biking maps for the return to in-person learning.

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Section III: Safe Routes to School and Safe Routes

SAFE ROUTES TO SCHOOL PRACTITIONERS SHARE CONCERNS FOR HEALTH, SAFETY, AND SUSTAINABILITY

“One of my biggest concerns is for the safety of Black, Indigenous, and people of color (BIPOC) students in public spaces – the harassment, physical harm, and being killed in our streets. We cannot ignore this increase in our Asian-American communities and Black communities. How can we be intentional about this in our Safe Routes to School programming? What does “Safe” actually mean?”

– Safe Routes to School Coordinator

We asked listening session participants to share their most significant concerns for Safe Routes to School and the families they serve moving forward. During a year filled with protests for racial justice and against police brutality, increases in anti-Asian violence and killings of Black, Indigenous, and people of color, Safe Routes to School practitioners joined in a racial reckoning and began a deep dive into what safety really means for the communities they live in and work with. They reflected on their worries for the personal safety and health for Black, Indigenous, and people of color communities, with increasing cases of harassment and physical harm.

Practitioners discussed the financial, housing, and food insecurities that have worsened during the pandemic and shared their concerns for the health and wellbeing of students and families. With the growing wealth and resource gap during the past year, practitioners are worried about the increasing disparities for under-resourced schools and families. Funding for Safe Routes to School programs was another top concern among listening session participants.

Safe Routes to School practitioners also shared their concern for the health and safety in returning to in-person learning and families’ perception that driving their children to and from school is the safest option. Practitioners shared they will have to work to prevent the revert to single car occupancy and promote Safe Routes to School as a safe, physically distanced option for school travel.

Youth, families, and schools are craving opportunities for physical activity, but with mounting pressures to overcome learning loss, Safe Routes to School practitioners also shared concerns for the growing health gap and how they can reengage schools and fit programming back into the school day and afterschool curriculum.

SAFE ROUTES COMMUNITY FINDS OPPORTUNITY IN THE MIDST OF A PANDEMIC

Despite a year filled with challenges, Safe Routes to School practitioners found many opportunities for engaging their communities and promoting physical activity. Many Safe Routes to School practitioners shared that new community partnerships were a huge opportunity to have emerged from the past year. Practitioners were able to partner with community groups and organizations on new initiatives that support health and wellness. New collaborations with local libraries, parks and recreation districts, and local businesses allowed practitioners to identify mutual priorities and expand the reach of Safe Routes to School programming. Working with new community partners also introduced fresh ideas for programming and helped shine a spotlight on the multi-faceted benefits of Safe Routes to School, including physical health, mental health, and social connection.

Listening session participants also discussed the increase in people walking and biking outdoors during the pandemic. For example, Slow Streets are designated low-volume and low-speed roads, typically in residential areas, that prioritize space for people walking, biking, and rolling. With Slow Streets initiatives, some families enjoyed the benefits of safe and active transportation options for the first time in their neighborhoods and communities. The growing enthusiasm and support for safer streets present an opportunity for Safe Routes initiatives moving forward to keep up the momentum and make lasting changes that improve walking and biking throughout the community, not just to and from school.

“This year was an opportunity to take a step back from what we were doing, and instead of focusing on a ton of schools, we’re working on one school, one community at a time. It’s created more of a community connection.”

– Safe Routes to School Coordinator

“Here’s a lot of pent up demand and excitement for physical activity programming. Schools are excited to have an outdoor, physically-distanced program that is easy to immediately implement.”

– Safe Routes to School Coordinator

Photo credit: Thomas de Luze

Safe Routes Partnership  7  One Step Forward Two Steps Back 2021
The Safe Routes Partnership met with seven national organizations leading efforts to increase physical activity and health for youth and families across the country. Almost every organization affirmed that they had seen a decrease in physical activity during the COVID-19 pandemic. We asked them to discuss the implications of less physical activity for their work and the communities they serve. We heard that the decrease in physical activity during the past year has become a national emergency for youth and families’ physical, emotional, and social wellbeing. This section of the report includes key themes and reflections that emerged from our interviews with national organizations for which physical activity is foundational in their work.

We met with the following individuals and organizations to help inform this section of the report:

- **Amanda Merck, MPH, Research Area Specialist, Salud America! UT Health San Antonio.** Salud America’s mission is to inspire people to drive community change for health equity for Latino and all families and to lead the nation in creating culturally relevant multimedia research, tools, and stories to fuel people to start and support policy, system, and environmental changes in schools and communities to improve Latino child and family health, reduce disparities, and promote health equity and a culture of health.

- **Bill Nesper, Executive Director of the League of American Bicyclists.** The League of American Bicyclists is leading the movement to build a bicycle-friendly America for everyone. Since 1880, the League has been protecting the rights of people who bike and promoting bicycling for transportation, good health, and the pure joy and freedom it brings.

- **Daniel Hatcher, Director of Community Partnerships for the Alliance for a Healthier Generation.** Alliance for a Healthier Generation is a leading children’s health organization that advances equitable whole child health. Driven by our passion to ensure that every mind, every body, and every young person is healthy and ready to succeed, our work has reached over 30 million young people across the country.

- **Erik Peterson, Senior Vice President of Policy for the Afterschool Alliance.** The Afterschool Alliance works to ensure that all youth have access to affordable, quality afterschool programs by engaging public will to increase public and private investment in afterschool program initiatives at the national, state, and local levels.

- **Katie Adamson, Vice President of Health Partnerships and Policy for the YMCA of the USA.** YMCA of the USA is the national resource office for the 2700 Ys across the country. The Y is the nation’s leading nonprofit committed to strengthening community through youth development, healthy living and social responsibility. We believe strong communities are possible only when we invest in our kids, our health and our neighbors.

- **Laurie Whitsel, Ph.D., FAHA, Vice President of Policy Research and Translation for the American Heart Association and Senior Advisor to the Physical Activity Alliance.** The Physical Activity Alliance (PAA)’s mission statement is to lead efforts to create, support, and advocate policy and system changes that enable all Americans to enjoy physically active lives. The PAA envisions an active and healthy nation where the opportunity for physical activity is easily available in the daily lives of all Americans.

- **Vanessa Garrison, Chief Operating Officer for GirlTrek.** GirlTrek’s mission is to pioneer a health movement for African-American women and girls grounded in civil rights history and principles through walking campaigns, community leadership, and health advocacy.
There are huge concerns for the increased health risk factors associated with physical inactivity, including obesity, diabetes, and hypertension. Substance abuse has also increased during the pandemic. What is the impact on families and youth? And what role can physical activity play to address these health challenges?

- Laurie Whitsel, Physical Activity Alliance

Section IV: National Organizations See an Emergency for Youth

Additional COVID-19 Resources – During a year filled with challenges, physical activity and public health leaders created resources and tools to continue supporting the health of youth and families. Here are some additional resources, including those shared during the partner interviews, developed during the pandemic to support physical activity and transportation equity:

- **Afterschool Alliance** shared a blueprint and other resources for reopening schools and afterschool programs, and developed the Afterschool Alliance American Rescue Plan resource page.
- **Alliance for a Healthier Generation** developed Creating a Caring School Community guides, ‘grab-and-go’ resources any educator can use to co-create a caring, supportive in-person and/or virtual school environment. Each resource includes a “Get Moving” activity to reinforce learning.
- **GirlTrek** pivoted to offer virtual programming that inspired physical activity and connection through the pandemic, including Black History Bootcamp, a 21-day guided walking podcast that celebrates Black stories.
- **Physical Activity Alliance** is developing a series of white papers to support physical activity through COVID-19, including Physical Activity for Preschoolers During the COVID Pandemic.
- **Salud America!** released a series of blog posts with recommendations and calls-to-action to advance equitable walking and rolling through COVID-19, including a story on surging rates of walking and rolling, a call for Open Streets programs, a piece on health equity and COVID-19 recovery, and a call to invest in people and places.
- **Springboard to Active Schools**, a collaboration of the National Network of Public Health Institutes and Health Resources in Action, offered Considerations for Classroom Physical Activity During COVID-19.
- **YMCA of the USA** shared examples of resources that were distributed to all Ys and their communities through “Y Member News” highlighting how to stay safe during COVID, keeping kids safe around water, and creating a fun camp experience at home. Most Ys across the country offered free, virtual health, wellness and educational programming during COVID and offered on-site learning and enrichment hubs for tens of thousands of children and youth who needed child care, afterschool and virtual learning support. The Y also launched a digital storybook with the National Park Service, which included virtual tools and resources to help kids get outdoors playing in nature.

**LOSS OF PHYSICAL ACTIVITY HAS ADVERSE OUTCOMES FOR PHYSICAL, EMOTIONAL, AND SOCIAL HEALTH**

National organizations shared that life during the pandemic presented numerous health concerns for the communities they serve. From the fear of contracting or recovering from the virus, facing housing and food insecurities, and dealing with emotional stress, grief, and trauma, communities struggled dramatically during the past year. And in the midst of it all, physical activity has often fallen to the wayside, further compounding health risks over the short and long term. Physical activity, movement, and play can be productive ways of combating stressors. Physical activity and physical education can support students’ social and emotional learning, including managing emotions, establishing relationships, and feeling empathy for others. Unfortunately, it has often been set aside and seen as a luxury during a year that required prioritization of essential services and activities.

Partners shared that the work that national organizations and leaders have done in recent years to advance physical activity seemingly started to unravel during the pandemic. The increased sedentary behavior during the past year brings up serious concerns for short-term and long-term health risks, including obesity, diabetes, and hypertension. Partners are particularly worried about the impact on youth’s health, citing soon to be published research indicating childhood overweight and obesity rates increased dramatically during the past year. Providing safe, accessible opportunities for physical activity before, during, and after school will be essential for re-engaging youth and families in movement and restoring physical health.

Interviewees also shared that having safe and accessible physical activity opportunities provides outlets for social and emotional stress. Communities have been grappling with racism and racial justice, mental health issues, grief, housing and food insecurities, and substance abuse issues during a year of isolation and economic hardship. Partners stepped into new spaces and leaned into their networks to support their communities’ most pressing needs. The YMCA of the USA recognized that children cannot learn and stay active when they are hungry and became one...
of the biggest meal providers in the country during the past year. Salud America! acted as a megaphone for the challenges faced by Latinx communities who were disproportionately impacted by COVID-19 early on. GirlTrek invested in a virtual network, offered virtual walking and learning opportunities, and held national conversations with civil rights leaders Angela Davis and Nikki Giovanni.

Some families may have been able to alleviate some of the stressors of the past year by taking advantage of working and learning from home to get more time outdoors in their yards, neighborhoods, and parks. However, many others rely on built-in physical activity programming like Safe Routes to School, P.E., youth sports, and afterschool programs to get their physical activity and play. These youth and families were often left behind during the pandemic, stay-at-home mandates, and virtual learning.

Physical activity offers another opportunity for something youth and families have yearned for during the pandemic: human connection and social health. Some interviewees shared they were able to pivot to offer virtual programming that inspired physical activity and connection through the pandemic, including GirlTrek’s Black History Bootcamp, a 21-day guided walking podcast that celebrates Black stories, and Alliance for a Healthier Generation’s Creating a Caring School Community Guides, which offers grab-and-go resources educators can use to co-create a caring, supportive in-person or virtual school environment. The Afterschool Alliance shared that for virtual afterschool programs, physical activity was a challenge but many programs found creative ways to incorporate activity including zoom yoga classes, virtual scavenger hunts, and wellness and nature walks. Comprehensive School Physical Activity Programming can help increase physical activity and reinforce social and emotional learning before, during, and after school. Going forward, partners shared they will strive to provide physical activity programming that allows space for kids, adults, and families to relate with each other, unpack some of the traumas and losses faced during the past year, and experience joyfulness and playfulness together again.

“We are hopeful that this summer will provide an opportunity for students to get outside and into in-person enrichment programs and camp-style programs. With new federal funding available through the American Rescue Plan to support summer enrichment, there is a concentrated effort among the out of school time field to provide low cost or no cost quality summer programming that helps young people reengage and begin to recover not just academically but with an emphasis on social, emotional and physical health as well.”

– Erik Peterson, After School Alliance

“My biggest concern for kids as it relates to physical activity is the same concern I have for adults. We’ve been isolated. We’ve been disconnected. And we are fearful of reconnecting in physical spaces together. And yet all of the research shows us that when people have accountability around physical activity and people to do their physical activity with, they’re more successful. So my concern is this year of disconnection has led to a year of inactivity. And that without the physical spaces to actually gather, that physical inactivity will continue.”

– Vanessa Garrison, GirlTrek

Photo credit: Kelly Sikkema
During the past year, there has often been talk of silver linings and a search for a positive side of life during the pandemic. While it is true that some communities were able to take advantage of life at home and experienced the joy of riding a bike or walking in their neighborhood, all our partners shared that this was not the reality for so many of the communities they serve, especially for Black, Indigenous, and people of color communities. Our communities were not built the same, and resources have not been distributed equitably. Partners shared that there is a lot of work to be done on the policy level to ensure kids and families have equal access to green spaces and safe walking and biking infrastructure. The pandemic cast a spotlight on built environment inequities, and it is clear that communities need better ways to connect people from where they live to their schools, parks, and places of play.

National organizations shared that they are calling for more substantial investments in slowing traffic, protecting sidewalks and bike lanes, and improving park access. Partners suggested looking through the lens of areas where there are higher percentages of renters and housing density when advocating for transportation and park investments, including bicycle and pedestrian infrastructure. To truly recover from the past year of living through a pandemic with decreased opportunities for physical activity, the lives, health, and stories of the kids and families who have been challenged most during the pandemic will need to be centered in supporting physical activity efforts in all recovery plans.

School-based and community-based providers of physical activity are in a unique position to respond to the growing need for movement, physical activity, and play. Partners shared that the recovery period following the pandemic would be much more than “going back to normal.” Providers will resume programming that offers structured play and physical activity, but they also have the opportunity to lead the conversation on why the built environment and programming matter for the communities they serve. Physical activity providers and leaders can build coalitions to help identify solutions for community connectivity and health.

“Relationships, belonging, and social connectedness - physical activity offers these opportunities for youth and people of all ages. Physical activity can also be a useful avenue for addressing some of the social isolation and mental health impacts we’ve experienced over the past year.”
- Katie Adamson, YMCA of the USA.

“Unless physical activity is designed into kids’ lives through Safe Routes to School, P.E., and after school programs, for so many families that are facing economic strain, it is such a burdensome task to ask families to take separate time for physical activity. It’s a double burden if you don’t have those opportunities where you live. We need to address the fact that we’ve built unequal neighborhoods where it’s simply not possible for kids to play.”
- Amanda Merck, Salud America!

“Some communities have seen a bike boom during the pandemic, but many don’t have safe places to walk and bike. Families have a fear of the disease and a fear of a built environment that prioritizes fast-moving cars. Without structured play and physical activity, there’s been less opportunity for connecting and going for bike rides because our streets weren’t built for that, especially in traditionally underserved communities. I hope going forward that we as a movement can say with one voice that people should be able to get around using active modes.”
- Bill Nesper, League of American Bicyclists
Learning loss is a real challenge and concern for youth and families. Interviewees shared they saw learning loss happening pre-pandemic, and it has worsened during the past year of virtual learning. Still, partners cautioned that as society enters a recovery period, the instinct to overcorrect the loss of learning could be detrimental to kids’ social and emotional wellbeing. There is a lot of work ahead of us as we enter a recovery period following the pandemic, and interviewees shared that we can’t let physical activity, connecting with nature, and playtime slip down the priority list. In other words: don’t sacrifice physical activity, play and inevitably the health of our kids to make up for learning loss.

Partners also shared that supporting staff and educators will be critical in driving change forward. Even with policy changes and increased investments for health and physical activity, staff will require training and professional development opportunities to learn about best practices and resources available. Educational and professional development opportunities will need to be integrated with other trainings staff are already attending, to avoid overwhelming and burdening staff. Parents and caregivers, teachers, and staff have been asked to fulfill many roles this past year, often without enough support or resources. Interviewees urged considerations be made for how communities support and invest in the people who promote healthy behavior and offer physical activity programming going forward.

“We can’t just prioritize academic learning loss above all else. Kids need to play and experience the joy and health that comes from physical activity. They are zoomed-out and scheduled-out. Kids need to be kids again!”
- Katie Adamson, YMCA of the USA

“Staff and educators have experienced trauma and grief just like kids have. How do we support them? We have an opportunity to build physical activity into our approach to trauma-informed care, but we have to support the people who make it possible for kids to move more.
- Daniel Hatcher, Alliance for a Healthier Generation
As we begin to emerge from this public health crisis, more than ever, we’ll need physical activity programming and safe walking and biking infrastructure to keep us getting around our communities and to everyday destinations and essential services. The pandemic spotlighted the inequities in our health services, educational programming, park systems, and built environment. Looking forward, how do we more proactively address these inequities to ensure that communities of color and low-income communities have walking and biking connections to essential destinations, access to physical activity, and feel safe being active in public spaces? What can be done to ensure all people in all communities can safely walk, bicycle, wheel, and be physically active? How do communities reengage youth in physical activity and allow kids to be kids again? This section of the report shares recommendations for supporting physical activity efforts and recovery plans moving forward.
infrastructure where it is most needed. Neighborhoods with higher percentages of people of color and low-income families are often cut off from accessing great public spaces and essential services via active transportation and public transit due to many factors such as federal highways built through their communities and a lack of safe infrastructure like bike lanes and sidewalks. With the uptick in walking, biking, and Slow Streets and car-free initiatives, the past year underscored the need for streets that are designed around and for people. This momentum can be built upon to implement lasting changes that prioritize communities of color and low-income communities. Safe bicycle and pedestrian infrastructure and reliable public transportation should be prioritized for communities of color and low-income communities.

Communities can also find ways to invest in and improve parks and green spaces. Spending time in nature provides youth with a wide range of health benefits and improves academic performance. Under pre-pandemic circumstances, time spent in parks and green spaces has been tied to many health benefits. Close proximity to parks and the safe routes to get there increase the likelihood that people will engage in physical activity that boosts physical and mental health. During the COVID-19 pandemic, some communities could take advantage of their local parks and enjoy the benefits of walkability in their own neighborhoods. Unfortunately, not everyone has safe access to great parks and green spaces, and many communities did not have that same experience during a year full of stressful challenges. Communities can work to make outdoor spaces accessible to and safe for everyone regardless of who they are or where they live.

**PRIORITIZE PLAY AND PHYSICAL ACTIVITY**

The past year of remote learning created significant concern for learning loss among youth. As communities begin to enter a recovery period post-pandemic, there is a big locus in education to help students recover lost instruction time. While this is a tremendous concern that warrants needed attention, it is important not to let students' physical, social, and emotional health continue to fall by the wayside. Communities should work to build physical activity into the curriculum during the school day and through after school programs. Youth and families need the freedom to be creative, move and play, and not think and worry. Communities should balance addressing learning loss with addressing the other emotional, social, and physical losses that physical activity can help address. CSPAPs can help support social and emotional learning competencies, and should be integrated into education strategies moving forward. We have an opportunity to embed physical activity into many parts of our day, including while we are learning, working, playing, and commuting.
This past year forced communities to prioritize the most foundational services, and unfortunately, physical activity has often not made the list. Educators, staff, parents, and caregivers struggled to adapt physical activity programming and education to a virtual environment. Many kids and families didn’t get to experience the joy and relief of physical activity, while they were constrained to the inequitably built environments of their homes and neighborhoods. Youth and families have been spending more sedentary time at home and less time moving in their communities, connecting with others in public, and enjoying outdoor spaces. While some communities found the joy and relief of walking and biking in their neighborhoods, many families have not been afforded that same experience during COVID-19.

Looking ahead, Safe Routes to School programs and practitioners can help reengage youth and families in physical activity and reimagine how people move in their communities.

Going forward, physical activity providers have a challenge and opportunity to explore physical activity strategies that restore human connection and health, lead urgent conversations on inequitable infrastructure and investment, and lead communities on the path to build back better by prioritizing physical activity and play in strategies to remedy learning loss and to address social and emotional health. Over one year into the COVID-19 pandemic, we are only just beginning to understand the impact on people’s physical, social, and emotional health and wellbeing. As we contemplate a path to recovery from the past year of living through a pandemic with decreased physical activity, the lives, health, and stories of the kids and families who have been challenged most during the pandemic will need to be centered in all recovery plans. Going forward, we know that physical activity can help youth and families begin to unpack the losses from the past year, reconnect with friends and family, reengage with learning and play, and build back better. We know that to truly move forward, we have to get physically moving again.

Safe Routes to School programs and providers always played an essential role in physical activity. During the past year, practitioners creatively pivoted to offer remote physical activity opportunities and bicycle and pedestrian safety education. Some Safe Routes to School programs successfully adapted and made changes to their programs, while others simply had to press pause. Practitioners demonstrated that Safe Routes to School shares many community priorities related to health and wellness with families, schools, community-based organizations, libraries, parks and recreation districts, public health organizations, and so many others. Safe Routes to School programs found ways to keep students and families moving throughout their neighborhoods and communities.
In January 2020, the Safe Routes Partnership put out a survey to Safe Routes to School practitioners, with an invitation to share what changes had occurred in their programs over the previous year.

We received responses representing 125 Safe Routes to School programs from the following 32 states: Alabama, Arizona, California, Colorado, Florida, Georgia, Hawaii, Idaho, Kansas, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Tennessee, Texas, Utah, Vermont, Virginia, Washington, and Wisconsin.

60% of the survey responses came from Safe Routes to School coordinators, 17% were community advocates or partners, and the remaining 23% of responses were from parents and caregivers, teachers and school staff, public health and local government professionals, afterschool program providers, and volunteers.

The survey asked Safe Routes to School programs to share what communities they work with and serve. 45% of programs responded that their program serves Black or African-American families. 55% responded said they serve Latinx families. 24% said they serve Asian-American, Pacific-Islander, and/or Native Hawaiian families. 12% said they serve Native American and/or Tribal families.

The survey asked what learning models were implemented in their communities during the past year of the pandemic. 29% of programs said their community had an in-person learning model, 80% said their community was learning remotely, and 58% said their community had a hybrid learning model.

The survey asked whether Safe Routes to School programs were able to continue offering programming that encouraged physical activity during the pandemic. 66% said yes, 33% said no.

The survey asked if Safe Routes to School programs were able to collect any data during the pandemic. 56% responded they were not able to collect any data during the pandemic, 21% said they collected walking and rolling data through student tallies, parent/caregiver surveys, etc., and 6% said they collected data on students’ physical and/or mental health during the pandemic.
Endnotes

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