Though rates of childhood obesity have shown small improvements in the past few years, the number of healthy weight children in the US is still far from ideal. Increased awareness of the importance of healthy, active living efforts to improve school nutrition programs have made great strides in turning the tide of obesity, and state policymakers have an important role to play in this effort.

Currently, physical education and activity standards vary greatly across the states.

Every state and District of Columbia requires physical education at some grade levels, but no state requires daily physical education for all children in grades K-12. Despite evidence that shows that children benefit not only physically, but mentally, from daily recess, very few states mandate time for physical activity during the school day.

**AAP POSITION**

- All children should receive at least 1 hour of physical activity a day.
- Physical activity should be promoted at home, in the community, and at school, but school is perhaps the most encompassing way for all children to benefit.
- Recess can serve as a counterbalance to sedentary time and contribute to the recommended 60 minutes of moderate to vigorous activity per day, a standard strongly supported by AAP policy as a means to lessen risk of overweight.
- Schools should also provide 1 hour of quality physical education daily to all students in grades K-12. It should emphasize enjoyable participation in physical activity that helps students develop the knowledge, attitudes, motor skills, behavioral skills, and confidence required to adopt and maintain healthy active lifestyles.
- Physical education classes should allow participation by all children regardless of ability, illness, and/or injury, including those with obesity and those who are disinterested in traditional competitive team sports.
• Rates of childhood obesity more than doubled in children and tripled in adolescents between 1980 and 2010. Since 2011, obesity rates have remained stable at 17%, affecting 12.7 million children and adolescents.

• Between 2011 and 2014, the prevalence of obesity was 8.9% among 2- to 5-year-olds compared with 17.5% of 6- to 11-year-olds and 20.5% of 12- to 19-year-olds. Childhood obesity is also more common among certain populations.

• Children and adolescents who are obese are likely to be obese as and are therefore more at risk for adult health problems such as heart disease, type 2 diabetes, stroke, several types of cancer, and osteoarthritis.

• Healthy lifestyle habits, including healthy eating and physical activity, can lower the risk of becoming obese and developing related diseases.

• 3 states – laws requiring daily physical education for grades K-12 and recess for grades K-6
• 7 states – laws requiring only daily physical education for grades K-12
• 7 states – laws requiring only daily recess for grades K-6

For information on current law or pending legislation in your state, please contact AAP State Advocacy at stgov@aap.org.

• AAP Policy – Active Healthy Living: Prevention of Childhood Obesity Through Increased Physical Activity – http://pediatrics.aappublications.org/content/117/5/1834.full
• AAP Policy – The Crucial Role of Recess – http://pediatrics.aappublications.org/content/131/1/183.full
• AAP Policy – Prevention of Pediatric Overweight and Obesity – http://pediatrics.aappublications.org/content/112/2/424.full
• AAP Obesity Policy Opportunities Tool – www.aap.org/obesity/matrix_1.html
• Centers of Disease Control and Prevention – Childhood Obesity – www.cdc.gov/obesity/childhood

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