Healthy Kids are Better Learners: State Policy Options to Improve Children’s Health

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Image credit: Alliance for a Healthier Generation
Objectives

- Describe intersections between academic outcomes and student health and wellbeing
- Identify levers for promoting positive outcomes for youth within education from pre-K through secondary
- Discuss specific policy opportunities for improving education outcomes by incorporating health and wellness into plans and strategies
  - Every Student Succeeds Act (ESSA)
  - Wellness Policies
  - Other
Successful learners REQUIRE health promoting schools

- Students who report feelings of “connectedness” with and engagement to school are more likely to do well academically

- Students who report a higher number of developmental assets also do better in school - and increasing assets improves academics

- Universal school-based behavioral interventions linked to improved educational outcomes

- School breakfast programs are linked with reduced tardiness and absenteeism

- Schools that promote physical activity see academic and cognitive benefits for their students

How does health impact learning?

- **Students** facing health challenges - chronic and acute conditions, injuries, safety - are more likely to have learning difficulties
  - Asthma and dental pain are leading causes of school absenteeism
  - 25% of students in grades 9-12 reported feeling so sad or hopeless for at least two weeks in the year that they stopped some of their normal activities
  - Students who are hungry do not perform as well academically

- Teachers and staff are constantly addressing the impact of health on their students
  - One study showed that teachers spent an average of one hour of instructional time on health issues each day--roughly 180 hours of lost time over the school year
  - Absenteeism disruptive to teaching and learning
  - Non-academic barriers to learning are a constant challenge
Kids’ experiences impact learning

- Over 51% of students are currently living in poverty
- More than 60% of children are exposed to violence - directly or indirectly
- More than half of adolescents had at least 1 ACE, almost 1 in 10 had 4 or more ACES

Long-term linkages between education and health

- Educational outcomes are strongly linked to health outcomes
  - Lower educational attainment linked to adverse health outcomes
  - Income and employment—both linked to educational outcomes—are linked to higher rates of chronic diseases
Lever for change: Whole School, Whole Community, Whole Child

Gears for creating sustainable change

- Policies (both formal and informal)
- Process
- Practices
- Highly qualified personnel/staffing
  - Defining qualifications for teachers
  - Creating opportunities for ongoing support
- Funding and resources
Policy Opportunities: Every Student Succeeds Act (ESSA)

- Signed into law in December 2015 reauthorizing the Elementary and Secondary Education Act (last version was NCLB)
- ESSA provides significant authority for state and local leadership to design and implement policy, programs, and accountability requirements and mechanisms.
- *ESSA includes implicit and explicit authorities for educators to address the needs of the whole child.*
ESSA Title I

- Designed to “provide all children significant opportunity to receive a fair, equitable, and high-quality education, and to close educational achievement gaps.”

- Delineates the responsibilities of state and local educational agencies (SEAs and LEAs) to ensure the infrastructure and accountability for high-quality education for all children.

- Requires stakeholder engagement and input.
ESSA Title I: Opportunities to Create Health-Promoting Schools

- State plans describe:
  - Challenging academic *standards*
  - *Assessments* used to measure students’ achievement based on the standards (required for math, reading/language arts, and science, *and any other subjects state chooses*)
  - State *accountability system* and metrics
  - Methods for assessing schools and subgroups of students within schools to determine if they are in need of improvement interventions
    - Methods for supporting LEAs in implementing evidence-based practices for improving schools
ESSA Title I: Opportunities to Create Health-Promoting Schools

- Accountability systems measure:
  - Academic achievement, as measured by levels of proficiency on assessments
  - Graduation rates
  - Significant progress towards academic growth for students behind on any measures
ESSA Title I Opportunities: Accountability Systems

- At least one valid, reliable, and comparable indicator of school quality or student success. Examples could include:
  - School climate or student connectedness (CA, GA, HI)
  - Social emotional learning (SEL) standards
  - Engagement and safety (MN)
  - Chronic absenteeism or other equity proxy (OR)
  - Student fitness levels (CT)
ESSA Title I: Opportunities to Create Health-Promoting Schools

• State report cards include:
  • Long term goals and measurements and interim progress for all students and each subgroup
  • Information submitted to the SEA, such as measures of school quality, climate, and safety, chronic absenteeism, incidences of violence, including bullying and harassment
  • Teachers with emergency or provisional credentials, or teachers who are not teaching in the subject or field for which the teacher is certified or licensed
ESSA Title I Opportunities: State Report Cards

- Per-pupil expenditures of Federal, state, and local funds
- Graduation rates for high schools in the state and their post-secondary programs, to the extent practicable
- Number and percentage of students enrolled in preschool programs
- Other data that the SEA believes will best provide parents, students, and other members of the public with information regarding the progress of each of the state’s schools
Title I: Creating Consistent “P16” Pipelines

• Emphasis on early childhood education and early learning

• LEA plans must describe how the LEA will support transitions from early learning environments to elementary educational experiences

• LEA may reserve Title I funds to provide early childhood education programs for eligible children, including those identified as living in low-income communities (Sec 1007)
Title II: Teacher Quality

- Provides funds for the development and training of teachers and administrators, which might include opportunities for in-service or pre-service training on health, child-development, school climate, or social-emotional learning.
Title IV: Safe and Healthy Students

- Block grants that include nutrition and physical education and other obesity prevention approaches into local educational agency plans for providing a well-rounded education for students.

- If LEAs receive $30,000, at least 20% must be spent on activities that: “support a healthy, active lifestyle, including nutritional education and regular, structured, physical education activities and programs, that may address chronic disease management with instruction...to help maintain the well-being of students.”

- Requires school districts to undertake a community needs assessment that accounts for how they will provide a well-rounded education

- Requires stakeholder engagement and input
ESSA Timeline

• **April - October 2016:** State Planning Committee established to draft the state plan, which must be created with “meaningful consultation” with, at minimum, a state’s governing entities (Governor, state legislature, state boards of education), LEAs, education professionals, and parents.

• **May-August 2016:** Federal Rulemaking with proposed rules anticipated this Spring. Topics to be covered in the regulations include Title I standards, assessments, and funding (comments due 8.1), and “supplement not supplant” requirements.

• **November - December 2016:** State Plan submitted for review and public comment, which the law requires be open for at least 30 days.

• **ESSA requires all regulations to be finalized by December 2016.**

• **January 2017:** State Plan submitted to the US Department of Education.

• **School Year 2017-2018:** All ESSA provisions go into effect.
Local Wellness Policies

- Required by the Child Nutrition Act for schools to have local wellness policies (LWPs) since school year 2006-2007

- Healthy and Hunger-Free Kids Act updated the wellness policy regulations strengthening LWPs and adding requirements for public participation, transparency, and implementation.

- LEAs will be required to periodically measure and make available to the public an assessment on the implementation of LWP, including the extent to which schools are in compliance with LWP, the extent to which the LWP compares to model LWP, and a description of the progress made in attaining goals of LWP.

- Must address physical activity and nutrition
Opportunities for State Legislators

- Engage in the ESSA state plan process in collaboration with boards of education
- Consider how the state can maximize opportunities within ESSA accountability, state report cards, and other requirements
- Gather feedback on ESSA plans and provide to state policymakers
- Consider teacher qualification requirements and in-service/professional development training
- Provide resources to allow the state flexibility in meaningfully addressing the needs of the whole child
- Envision schools that allow students to meet their full potential by reducing barriers to learning
Questions?

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