

May 25, 2016

John B. King, Jr.
Secretary of Education
U.S. Department of Education
400 Maryland Ave. SW, Room 3E306
Washington, DC 2020

Re: Request for Stakeholder Feedback Regarding ESSA Non-Regulatory Guidance

Dear Secretary King,

Thank you for the opportunity to provide input on areas of the Every Student Succeeds Act (ESSA) for which the U.S. Department of Education (ED) can provide non-regulatory guidance to assist States, districts and other grantees in understanding and implementing the new law. Healthy Schools Campaign (HSC) and Trust for America's Health (TFAH) strongly encourage ED to provide non-regulatory guidance that supports States, districts and other grantees in supporting the whole child and promoting health and educational equity for students across the country.

The link between health and learning is clear: Healthy, active and well-nourished children are more likely to attend school, be ready to learn and stay engaged in class. However despite widespread agreement on these facts, the school setting often does not promote health. Too many students spend their days in buildings with unhealthy air, limited opportunities for physical activity and inadequate access to fresh water, nutritious food or a school nurse. Many students come to school with one or more health problems that impact their ability to learn. According to the U.S. Centers for Disease Control and Prevention (CDC), the incidence of chronic diseases—including asthma, obesity and diabetes—has doubled among children over the past several decades. This has implications not only for children's long-term health but also for their opportunities to learn and succeed at school. Just as important, we know that students who achieve success in schools are more likely to achieve better health over their lifetime. These were key findings highlighted in *Health in Mind: Improving Education through Wellness*, a report published by HSC and TFAH several years ago.

This challenge is especially critical in light of the nation's vast health disparities. Low-income and minority students are at disproportionally increased risk of health problems that hinder learning. These students are more likely to attend schools with unhealthy environments and that do not invest in evidence-based prevention. Unless we address these disparities in health status and school environments, efforts to close the education achievement gap will fall short.

In order to work towards addressing this challenge, HSC and TFAH are co-convening the National Collaborative on Education and Health, a national effort to create a culture of health in schools across the country. Since its launch two years ago, the Collaborative has brought together



over 140 health and education leaders representing over 100 organizations. The Collaborative has catalyzed efforts at the federal, state and local levels to create healthier school environments and students, including investment in upfront prevention.

ESSA recognizes the need for schools to support the whole child and specifically acknowledges the importance of promoting physical and mental health and wellness. The implementation of ESSA provides an important opportunity to more fully integrate student and school health into education policy and practice and support the integral connection between health and learning.

That is why we urge ED to issue non-regulatory guidance that supports the vision set forth in ESSA of promoting educational equity and ensuring students are healthy and ready to learn. In addition to guidance that addresses student health specifically, we encourage ED to consider how guidance in general can achieve the goal of promoting student and school health. Specifically, we recommend that ED issues non-regulatory guidance that:

1. Outlines a process for identification of evidence-based interventions that support healthy schools and student health and meet ED's requirements for allowable uses of Title I and Title IV funding and provides access to technical assistance resources to help schools, districts and States analyze their data and identify evidence-based interventions that match the risk and protective factors in their community and student population.

There are numerous evidence-based interventions for supporting the connection between student health and learning that are documented by federal agencies and private organizations, including the Centers for Disease Control and Prevention (CDC), the Substance Abuse and Mental Health Services Agency (SAMHSA), the U.S. Environmental Protection Agency (EPA), the National Institutes of Health (NIH), Department of Justice and the U.S. Department of Agriculture. We urge ED to issue guidance that will navigate decision-makers to the appropriate evidence-based registries and resources, such as ED's What Works Clearinghouse, the National Registry of Evidence-based Programs and Practices (NREPP) at SAMHSA, NIH's "Red Book", Asthma Community Network of EPA, and other similar federal and private evidence registries. Schools, districts and States need help identifying and implementing evidence-based practices, particularly when the evidence exists in many different federal agencies and private repositories. Guidance should include permission for schools, districts and States to select relevant evidence-based interventions from any relevant federal or widely used private (such as Blueprints for Healthy Youth Development) evidence registry.

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¹ National Academy of Medicine Discussion Paper, Unleashing the Power of Prevention, J. David Hawkins, Jeffrey M. Jenson, Richard Catalano, Mark W. Fraser, Gilbert J. Botvin, Valerie Shapiro, C. Hendricks Brown, William Beardslee, David Brent, Laurel K. Leslie, Mary Jane Rotheram-Borus, Pat Shea, Andy Shih, Elizabeth Anthony, Kevin P. Haggerty, Kimberly Bender, Deborah Gorman-Smith, Erin Casey, and Susan Stone June 22, 2015. Available at http://nam.edu/perspectives-2015-unleashing-the-power-of-prevention/



The National Collaborative recommends the provision of state-level expert technical assistance to assist schools and communities in implementing, evaluating and sustaining evidence-based practices.

We also urge ED to make clear in guidance that the use of evidence-based practices should not preclude innovations and continuous improvement.

School Improvement Plans and SSAEG

There is a critical need to translate evidence-based interventions that support the conditions of learning in schools into practice, including interventions that support healthy schools and student health and wellness. Under Title I, districts, in partnership with stakeholders, must develop and implement a school improvement plan that includes evidence-based interventions. In addition, under Title IV, programming implemented using Student Support and Academic Enrichment Grants (SSAEG) must be evidence-based. Ensuring States and districts have easy access to evidence-based interventions and technical assistance in selecting and implementing such interventions will be key to the success of both Title I and Title IV programming.

Similarly, outlining a process to identify models of school improvement plans that promote student health and wellness will help States and districts better understand how to support the whole child through school improvement programming and leverage new flexibilities within ESSA to accomplish this. Given that students in the lowest performing schools are disproportionately affected by health conditions that impact their ability to learn, ensuring health and wellness are a part of school improvement plans is a key strategy for supporting student success. Guidance should also emphasize the role that community-based organizations and providers can play promoting student physical and mental health and meeting the needs of the lowest-performing students.

Guidance should outline the process for identification of best practices and model programs to inform districts on how best to use SSAEG funding to promote health and wellness. There are models from districts across the country of programming that aligns with SSAEG. Documenting a process for identification of evidence-based and best practices will help districts ensure they are implementing high quality programming that meets students' health needs.

Comprehensive Needs Assessments

Similarly, guidance should identify a process for identification of best practices and models for conducting comprehensive needs assessments that incorporate student and school health and wellness. Both Title I school improvement plans and schoolwide programs must be informed by a comprehensive needs assessment. In addition, school districts receiving more than \$30,000 in SSAEG funding must conduct a needs assessment and use grant funding to address the needs identified. Districts and schools will need significant support and guidance to conduct effective needs assessments. Given that multiple needs assessments are currently conducted at the local level, there is an opportunity to inform schools so that they leverage the current data collection and analyses instead of duplicating current needs assessment processes. For example, consistent



with Healthy Students, Promising Futures, schools can leverage the community health needs assessments conducted by non-profit hospitals.

Given the connection between health and learning, it is critical that guidance on how to conduct needs assessments includes a focus on how to assess student health needs and the school health and wellness environment. Guidance should outline a process by which schools can identify model needs assessments, including those that include a focus on student health and wellness.

Schoolwide Title I Programs

ESSA requires that schoolwide Title I programs "address the needs of all children in the school, but particularly the needs of those at risk of not meeting the challenging state academic standards." Counseling, school-based mental health programs, specialized instructional support services, mentoring services and other strategies to improve students' skills outside the academic subject areas are highlighted as allowable components of schoolwide program plans.

Guidance should include a process for identification of models of schoolwide Title I programs that support this type of programming. We urge ED to provide guidance and technical assistance to schools, districts and States to help them identify and adopt models that support additional health needs of children, including chronic conditions including asthma and diabetes, oral health, teen pregnancy and vision and hearing which all impact students' ability to learn. Providing districts with guidance on how to integrate programs and strategies that address these needs within their schoolwide Title I programs is key to supporting student success. In addition, guidance should highlight how key community stakeholders, including health professionals, can be involved in the schoolwide program planning process.

Professional Development

ESSA presents an important opportunity to provide school staff with professional development on how to support the whole child. The majority of professional development training programs for school staff currently do not provide school staff with training on the connection between health and learning. However, there are examples of professional development programs that provide teachers with training on how to support healthy schools and student health and wellness, such as Healthy Schools Campaign's Fit to Learn professional development program which educates principals and teachers about how to create schools and classrooms that support the conditions of learning. In addition, there are multiple examples of professional development programs that provide teachers with training on how to support student social and emotional wellness. Disseminating programs such as these is necessary to ensure States and districts understand how to think broadly about professional development programming and provide school staff with the flexibility to receive training on how to support all the needs of students in their communities. In addition, guidance should include criteria that States and districts can use to select effective professional development programming.

2. Establishes criteria for selecting strong measures of school quality and success for inclusion in state accountability systems, including measures that can address health.



Guidance should include criteria for selecting measures of school quality and success and include examples of measures that meet these criteria. As States develop their accountability systems, there will be a key need to ensure stakeholders understand how to select both strong academic and non-academic measures of school quality and success. Suggested criteria include measures that are tested, are evidence-based, are actionable, have best practices for addressing and are meaningful to key stakeholders, including educators, parents, specialized instructional support personnel and community members. As identified in the law, examples of indicators that meet these criteria include rates of chronic absenteeism and measures of school climate. ED has a series of validated surveys available through their Safe and Supportive Schools Initiative that can be used with young people, parents and educators to measure school climate. Both school climate and attention to chronic absenteeism have been shown to impact student and school health.

3. Provides States, districts and communities with the knowledge and support to define and measure chronic absenteeism and effectively use chronic absenteeism data in early warning and intervention systems.

Given that chronic absenteeism is a required indicator on Title I state and district report cards and an optional strategy in other parts of the law, it is therefore important to provide guidance to States and districts on how to effectively define and measure chronic absenteeism and use chronic absenteeism data in early warning and intervention systems. ED has developed many tools and resources as a part of its Every Student, Every Day initiative which can be referenced in ESSA guidance to ensure States and districts have the knowledge necessary to implement effective efforts to address chronic absenteeism.

In addition, guidance should strongly encourage States and districts to define chronic absenteeism as missing 10 percent or more of school for any reason. This definition aligns with ED's Every Student, Every Day initiative and will enable States and districts to fully leverage the power of chronic absenteeism as an early warning indicator. A common definition of 10 percent also would align with other major national efforts around chronic absenteeism.

4. Encourages States, districts and communities to braid various funding streams together to support programs that promote student and school health, outlines the process for seeking assistance from federal agencies to identify, apply for and braid together federal funds that can support student and school health and encourages sustainability planning from the outset.

Cross-sector efforts such as those that promote health in schools often rely upon multiple funding streams for long-term sustainability. Guidance should encourage schools, districts and States to seek out and braid together various funding streams, including those in ESSA. Guidance should reference recent federal initiatives that are based on cross-agency collaboration and shared goals, such as the *Performance Partnership Pilots for Disconnected Youth* and *Now is the Time Project AWARE* that promote a comprehensive, coordinated and integrated program for advancing wellness and resilience in educational settings for school-aged youth, and ultimately improving academic outcomes. Furthermore, guidance should outline the process by which schools, districts



and States can work with the federal government to identify, apply for and braid together multiple funding streams to sustain cross-sector programs. Finally, guidance should encourage schools and districts to plan for sustainability, in recognition of the reality that ED funding alone will not be enough to implement and sustain many evidence-based interventions that have positive impacts in multiple arenas.

5. Supports States and districts in engaging a wide range of stakeholders in the implementation of ESSA, including Title I state plans and schoolwide Title I programs.

Guidance should build the capacity of States, districts and schools to engage a wide range of stakeholders, including partners from other sectors, parents and communities in efforts to implement ESSA. Authentic stakeholder engagement broadens the constituency for public education to include a much wider range of people and organizations, creating new opportunities for shared responsibility for ensuring that all students succeed. Guidance on stakeholder engagement is critical, since a much broader definition and process is needed than has been employed in the past. Guidance should set a high bar, so that planning is not seen as the domain of a single group of individuals sitting around a table, but as a dynamic process that intentionally engages diverse stakeholders whose views are really listened to and considered from multiple perspectives. Core principles for stakeholder engagement should include:

- *Inclusion.* Engage a wide range of people and organizations with a stake in education to recognize the value of diverse perspectives.
- Accessibility. Make it easy for people to participate, to understand what is happening, and to be heard.
- *Sustainability.* See stakeholder engagement as a continuous process involving ongoing dialogue—not as a one-time proposition.
- *Focus on results*. Use engagement as a steppingstone toward building long-term partnerships that can help school systems get results that matter—from improved attendance and school climate to more extensive parent and student engagement.

The development of Title I state plans and schoolwide Title I programs provide important opportunities for engaging a wide range of stakeholders to ensure these programs meet students' needs and leverage community resources and assets. Guidance should define what meaningful stakeholder engagement is and highlight best practices country to inform school planning and decision making.

Guidance should also emphasize the importance of engaging stakeholders in other sectors to conduct needs assessments and highlight processes for identifying strategies for collaboration, such as those featured in ED's Healthy Students, Promising Futures toolkit. For example, districts and schools can work with local non-profit hospitals and others to leverage their expertise around needs assessments and the data they and others collect and analyze (such as federally-qualified health centers). This guidance can promote collaboration to improve efficiency and reduce redundancy in data collection and needs assessment.



There is specific need to build the capacity of all Title I schools to engage parents and families in efforts to create health-promoting school environments, a proven strategy for creating healthier school environments. The Centers for Disease Control and Prevention has developed a framework for engaging parents in school health, titled Parent Engagement: Strategies for Involving Parents in School Health, based on a three-pronged approach: connecting with parents, engaging them and sustaining that engagement.

Issuing non-regulatory guidance that ensures States and school districts have the knowledge and tools needs to support the whole child is critical to realizing the vision set forth by ESSA and will help create healthy schools and healthier students The recommendations included in this document are based on the knowledge HSC and TFAH have gained through each organization's respective work and our work with the National Collaborative on Education and Health.

We appreciate the opportunity to submit comments on ESSA's non-regulatory guidance and look forward to working with you to ensure the nation's children are healthy and ready to learn. If you have any questions, please contact Jack Rayburn at TFAH (jrayburn@tfah.org) or Alex Mays at HSC (alex@healthyschoolscampaign.org).

Sincerely,

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