National Collaborative on Education + Health

Report on the Chronic Absenteeism Working Group of the National Collaborative on Education and Health
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Chronic absenteeism—or missing 10 percent or more of school days for any reason, excused or unexcused—is a proven early warning sign of academic risk and school dropout. The long-term consequences of chronic absenteeism can lead to a population that is less educated, less healthy, under-employed and less financially stable in the community. While the causes of chronic absenteeism are multi-fold, research shows that student health issues are a leading contributor. These health issues include physical, mental, vision, dental, social, emotional and behavioral health issues in addition to issues connected to a child's surrounding environment such as other family health issues, community violence, housing insecurity and food insecurity. As a result, identifying and implementing health interventions is a critical step to addressing chronic absenteeism and a key opportunity for collaboration among the health, public health and education sectors. These sectors must work together and with others to ensure students are present, engaged and prepared to lead healthy, productive lives.

While there are efforts across the country that are addressing chronic absenteeism, definitions are not consistent, the focus is often on unexcused absences at the middle and high school level and few interventions address the health-related causes of chronic absenteeism. The National Collaborative on Education and Health is uniquely well positioned to mobilize the health and public health community, in collaboration with the education community, around this issue. Specifically, the National Steering Committee of the collaborative determined that a working group should be established to:

- Make the case connecting chronic absenteeism to health, as well as academic success and long-term well-being;
- Promote the adoption of a consistent definition of chronic absenteeism;
- Identify levers within the health sector, that align with current efforts taking place in the education sector, to help address chronic absenteeism;
- Identify effective interventions to address the health or public health related causes of chronic absenteeism within schools and the health sector; and,
- Develop strategies to promote the adoption of best practices and evidence-based interventions to help address chronic absenteeism.

The Chronic Absenteeism Working Group (Working Group) was established in response to this charge. The Working Group brought together over 30 health, public health and education leaders from across the country representing federal, state and local organizations, government agencies and school districts (see Attachment A for a full list of the Working Group participants). The group met in May and August of 2015 and the following report highlights the key content discussed by the Working Group and the resulting principles and recommendations, including a framework for state action.

Background

What is Chronic Absenteeism?

For the purpose of the Working Group, chronic absenteeism was defined as missing 10 percent or more of school days in a school year for any reason, including both excused and unexcused absences. While many states and school districts define chronic absenteeism differently, Attendance Works, a national and state initiative that promotes better policy and practice around school attendance represented on the Working Group, recommends using this definition of chronic absenteeism that is based on a percentage rather than a number of missed days. This definition promotes earlier identification of students to trigger intervention. because it helps identify students who at risk of chronic absence at any point during the school year, even if a student only misses two or three days each month.

Chronic absenteeism is a national problem that negatively affects education outcomes. Nationwide an estimated 5 to 7.5 million students are chronically absent each year. It is not just a high school problem; one in ten kindergarten and first grade students is chronically absent.[i,ii] And chronic absence is disproportionately represented in the population; students from low-income families are four times more likely to be chronically absent than their middle class peers.[iii]

Truancy and school absenteeism have been issues in the U.S. since the introduction of compulsory education and mandatory attendance. Every state requires that children attend school or participate in an equivalent such as home schooling. However, truancy and chronic absence are not the same. Truancy focuses only on unexcused absences; looking at only these absences will underestimate the total potential school time lost to absenteeism. In addition, it is important to note that a school can have a chronic absenteeism problem despite high average daily attendance, a common school measure. Schools and districts that have high average daily attendance numbers often overlook the chronically absent students because they are hidden in the more commonly collected average daily attendance data. These averages mask a small but significant minority of students with excessive absences as opposed to many children that miss just a few days of school.

Chronic Absenteeism's Impact on Education and Health Outcomes

Students' attendance affects their progress in school, and poor attendance can lead to a failure to graduate. The long-term consequences of chronic absenteeism can lead to a population that is less educated, underemployed, less financially stable in the community, and also less healthy, because a lifetime of good health is correlated with receiving more education.

Frequent absences can be devastating for a child's school success. Children who are chronically absent in both kindergarten and first grade are much less likely to be reading at grade level by third grade.[iv] Students who are not reading at grade level by the third grade are four times more likely to drop out of high school.[v] By sixth grade, chronic absenteeism becomes one of the leading indicators that a student will drop out of high school.[vi] A student who is chronically absent for any year between eighth and twelfth grade is over seven times more likely to drop out.[vii]

Educational achievement is not only a predictor of adult success; it also strongly predicts adult health outcomes. Students who do not graduate have greater health risks as adults than their higher-achieving peers, creating an unfortunate and unnecessary cycle of poverty and poor health outcomes.[viii] The less education adults have, the more likely they are to smoke, be overweight, have diabetes, and die prematurely of certain chronic conditions[ix]. Because students raised in poverty are disproportionately affected by chronic

absenteeism, they stand to benefit the most from being in school. One of the most effective strategies for providing pathways out of poverty is to do whatever it takes to get these students to school every day.

While it is difficult to isolate the leading causes of chronic absenteeism in a given community given the lack of such data collection, research clearly shows that health issues are a primary cause of chronic absenteeism. As a result, ensuring students are able to attend school individually healthy and in healthy school environments is a critical strategy for addressing chronic absenteeism. A healthy school environment includes regular access to school health services (including physical, mental, dental, vision and behavioral services), healthy school food, physical activity, good indoor air, access to water and a supportive school climate and culture.

Research indicates that some common health conditions resulting in missed school include asthma, diagnosis of Attention Deficit Hyperactivity Disorder (ADHD), influenza, diabetes, obesity, violence, dental health, seizure disorders, mental health and anxiety, food insecurity, housing insecurity, violence and vision problems. [x] With so little attention historically focused on chronic absence, communities need support identifying which health issues are most commonly linked to children's attendance behavior and how to address these issues. Attachment B provides an overview of some of the leading student health conditions that impact student attendance.

Principles for Addressing the Health Related Causes of Chronic Absenteeism

The Chronic Absenteeism Working Group's discussion focused on identifying comprehensive strategies at the national, state and local levels for addressing chronic absenteeism and the health-related causes. The working group developed the following set of key principles that can be used to guide strategies and efforts to address chronic absenteeism:

Understand the problem. A key step towards developing an effective chronic absenteeism intervention is determining the extent to which there is a chronic absenteeism problem and identifying the causes. This requires the collection of data from education, health and other sectors and the ability to share this data across sectors. In addition, the adoption of a common definition of chronic absenteeism is critical to ensuring quality data collection and being able to compare data across communities and states.

Support a collective impact intervention model. Addressing chronic absenteeism should not be the sole responsibility of schools and it is critical to identify key stakeholders and sectors, including health, housing, transportation and justice, that should be involved in efforts to address chronic absenteeism. It is important to identify and support a multi-stakeholder coalition that will bring these stakeholders together to implement a unified strategy.

Identify and disseminate solutions. In order for communities to feel that they have the knowledge and support necessary to implement evidence-based interventions to address chronic absenteeism, it is necessary to ensure they have access to model interventions, technical assistance and additional support. It is also important that these tools and resources can be easily adapted to the needs of a given community. These resources should highlight potential short-term wins that can have an immediate impact on student attendance and should also encourage communities to consider the bigger, long term changes that need to take place to ensure sustainability and widespread impact of efforts.

Identify options for financial sustainability. Ensuring that there is funding is critical to the long-term success of any effort to address chronic absenteeism. Determining how stakeholders can pay for action requires an examination not only of education resources in a community, but also of resources from other sectors,

including health. New opportunities within the health care system, including new community benefit expectations for non-profit hospitals, present promising opportunities. It is also critical to determine how different sources of funding can be braided together to maximize their impact and sustain efforts over time.

Make the case for action. There is a critical need to reframe the issue of chronic absenteeism in a way that does not blame parents or punish students but instead empowers schools and communities to address chronic absenteeism together as a way of supporting the health and success of students. It is also important to underscore the long-term impact of chronic absenteeism on education outcomes, an individual's health and ability to be a productive member of the workforce. This will help make the case for why chronic absenteeism should matter to multiple sectors.

With these principles in mind, the Working Group discussed a number of opportunities for advancing efforts to address chronic absenteeism and the tools and resources necessary to catalyze efforts around this issue.

National Level Opportunities and Strategies

<u>U.S. Department of Education's National Chronic Absenteeism Initiative</u>

The U.S. Department of Education (ED) has been an active participant in the National Collaborative on Education and Health, serving on the National Steering Committee and on each of the Collaborative's working groups, including the Chronic Absenteeism Working Group. ED's participation in the Collaborative helped serve as the catalysis for the development and launch of a new national chronic absenteeism initiative. This initiative, which will be launched in the fall of 2015, is intended to galvanize federal, state and local multi-sector efforts to address chronic absenteeism. The early fall launch event will be a clear call for the need for coordinated, cross-sector approaches to improving student attendance.

Addressing chronic absenteeism is included as a key goal within the President's My Brother's Keep initiative (Section 8.2) and ED is currently working with other federal agencies involved in My Brother's Keeper, including the U.S. Department of Health and Human Services (HHS), the U.S. Department of Justice and the U.S. Department of Housing and Urban Development, to support this national chronic absenteeism initiative. In addition to the launch event, ED's national chronic absenteeism initiative will include a series of activities that will take place over the next nine months. For example, ED is working with HHS to release a joint letter from Secretary Duncan and Secretary Burwell highlighting the importance of school health and calling for greater integration of the health and education sectors. In addition, ED is planning to launch a new school climate resource for states, districts and schools that will include a school climate survey and a practice guide highlighting how to use the data collected from the survey and where to access resources to create safe and supportive schools.

These activities will lead up to a May summit which will happen in conjunction with the release of the Office for Civil rights biennial survey data which includes chronic absenteeism. The summit will bring states and districts together that have made a commitment to address chronic absenteeism. The summit will focus on identifying strategies to create cross-sector systems of support and identifying technical assistance needed to advance efforts to address chronic absenteeism.

The launch of the national chronic absenteeism initiative presents an important opportunity to catalyze efforts to address chronic absenteeism and the Collaborative can play a key role in maximizing the impact of this initiative. There is a need to demonstrate broad, multi-sector support for ED's initiative and mobilize national stakeholder organizations to leverage this opportunity and work with their constituents to address chronic absenteeism. A sign-on letter in support of ED's initiatives was developed and circulated (see

Attachment C) as a first step towards demonstrating support for this effort. The establishment of a national chronic absenteeism coalition could also play a key role in disseminating best practices, technical assistance and resources to their members and through their networks. Emphasizing the outcomes in multiple sectors, including health, education and workforce will help to galvanize support from diverse constituencies.

There is also a need to develop an initial set of tools on health and chronic absenteeism to ensure states and communities have the resources needed to address the health-related causes of chronic absenteeism. For example, this might include tools for making the case for why student health matters, a summary of best practices and model interventions and bright spots.

Inclusion of Chronic Absenteeism in the Elementary and Secondary Education Act

The Every Child Achieves Act (the Senate version of the Elementary and Secondary Education Act (ESEA) reauthorization bill) includes chronic absenteeism in multiple places in an effort to emphasize the need for a whole child approach and to address the intersection of health and education. For example, in order to remain eligible for Title I grants offered under ESEA (grants given to address the needs of low-income, high risk schools) state education agencies must submit a plan to ED which outlines the state's assessments and school accountability systems. Each state plan must describe how the state education agency will address school climate issues, which may include providing technical assistance on strategies to reduce chronic absenteeism. In addition, state education agencies are required to create an annual state school report card and chronic absenteeism is a suggested indicator to include.

The Every Child Achieves Act also allows Title II funding to be used to develop and implement programs that include providing training for teachers, principals, and other school leaders to address school climate issues such as rates of chronic absenteeism. Finally, chronic absenteeism is included as a performance measure for full-service community schools grants.

In addition to including chronic absenteeism, the Every Child Achieves Act includes a number of key provisions which support student health and wellness. For example, the Every Child Achieves Act clarifies that Title 1 funding can be used to meet student health needs. In addition, in order to receive Title IV funding, school districts must complete a health needs assessment and use Title IV funding to develop and implement a program that meets the needs identified through the assessment. Finally, the Act defines physical education and health education as core subjects.

These provisions would provide important opportunities to support states and communities in addressing chronic absenteeism and creating the conditions of health in schools.

Office for Civil Rights Data Collection

For the first time, ED's Office for Civil Rights data collection included a question regarding rates of chronic absenteeism (defined by ED as missing 15 days or more of school during the school year for any reason). Given that the survey has a 99.5% certification rate, this represents an important step towards collecting a national chronic absenteeism data set and having access to higher quality data that can be used to help states and communities understand the extent to which chronic absenteeism is a problem overall and within subpopulations. This data will be available in spring 2016 and, as is described above, ED is planning to hold a summit in conjunction with the release of this data to bring together states and schools that are committed to addressing chronic absenteeism.

There is an important opportunity to work with ED to ensure the Office for Civil Rights data is shared in a way that is understandable and actionable and that states and communities have the tools and support needed to improve student attendance. In addition, as this data is used to map the attendance gap at the national, state and local levels, it will be important to determine strategies for integrating health data into this analysis in an effort to better understand the health-related causes of chronic absenteeism in a given community. This will include identifying existing models for sharing health and academic data between education, health and public health and identifying best practices and resources for ensuring communities understand the health needs of students.

State Level Opportunities and Strategies

States are uniquely positioned to catalyze efforts to address chronic absenteeism and can play a critical role in analyzing the data to determine who missing too much school and why. [Mapping the Early Attendance Gap: Charting a Course for Student Success](), a report released by Attendance Works and Healthy Schools Campaign, that was informed by the efforts of the Working Group emphasizes the key role states can play in turning chronic absenteeism around. The report highlights the connection between health and attendance and the power of states to tackle absenteeism by tapping key champions, leveraging data and learning from places that have improved attendance despite challenging conditions.

Whether states take these steps depends on more than the state education agency. Rather, a wide variety of stakeholders, across a range of sectors and disciplines, can influence what happens. These stakeholders can include policymakers, government agencies, philanthropies, nonprofits, civic organizations and business. The following framework, which was informed by the efforts of the Working Group and was adapted for inclusion in the Mapping the Early Attendance Gap report, outlines a strategy for state stakeholders to work together to achieve the long-term goal of ensuring that students are in school and ready to learn. In the short term, this framework can guide action that helps states provide schools and communities with access to the tools and resources necessary to map and address chronic absence, starting in the early grades. The four components included in this framework should be supported by what happens in districts as well as through partnerships with other community stakeholders.

1. Actionable Data: Invest in Development of Early Warning Systems

   Rationale: Having actionable data is key to determining the extent to which there is a chronic absenteeism problem and identifying the causes. Most school officials measure attendance in terms of average daily attendance, a measure which does not lend itself to developing early warning systems that enable schools to identify students that are at risk of missing a significant amount of the school year. Supporting the collection of actionable data that can be used to create early warning systems and better understand and act on the problem is critical to improving student attendance.

   Possible Actions:
   - Invest in the development of more effective state and local data systems that include attendance and can easily generate information about which and how many students are chronically absent by grade, school, district and student subpopulation.
   - Offer information and resources to promote data sharing while respecting confidentiality. For example, this could include developing protocols and guidance documents for complying with HIPAA and FERPA, the privacy laws in health and education respectively.

2. Positive Messaging: Changing the Narrative

Rationale: The current, dominant student absenteeism narrative tends to blame parents and punish students. Neither of these strategies is effective in supporting families and students in attending school and ensuring students are ready to learn. As a result, there is a need to shift the student absenteeism narrative to one that engages and empowers families, students and communities around the issue of student attendance. Changing the narrative is key to making the case for action to address chronic absenteeism and engaging multiple sectors around this issue.

Possible Actions:
- Develop new messages that raise awareness about the chronic absenteeism facts without placing the blame on students and families.
- Build a national coalition that brings together key stakeholders, including superintendents, state decision makers, teachers, health professionals and others, to deliver the new messages via their organizational channels and bully pulpits.
- Identify and mobilize key spokespeople to reinforce the new public narrative.

3. Capacity Building: Developing and Implementing Early Interventions

Rationale: It is essential to build the capacity of schools and communities to implement effective early warning systems and interventions that use student attendance data and support students and families in improving attendance. In order for communities to feel that they have the knowledge and support necessary to implement effective interventions to address chronic absenteeism, it is necessary to ensure they have access to model interventions, technical assistance, options for financial sustainability and additional resources. The federal and state governments, stakeholder organizations and others can play a key role in ensuring these resources are in place. State level technical assistance and support and a collective impact model should be used to ensure that a unified strategy is implemented to engage multiple sectors in a community in addressing chronic absenteeism.

Possible Actions:
- Provide a robust set of tools and a strong complement of training opportunities for key stakeholders at the state and local levels.
- Define model interventions that can be used to guide efforts across the country.
- Highlight case studies of effective interventions and articulate the strategies and best practices that can be learned from these examples.
- Promote peer learning opportunities across states to share strategies for helping districts and schools to partner with health providers and other local stakeholders.

4. Shared Accountability: Setting Performance Standards

Rationale: Systems are needed that promote and incentivize schools and communities to improve student attendance. For example, chronic absence can be built into accountability systems used by districts and states, such as school report cards, to measure progress and identify where additional support is needed to improve student performance.

Possible Actions:
- Encourage states to create a common definition of chronic absence, including what constitutes a day of absence, so that data can be compared across districts and schools.
- Promote the inclusion of chronic absenteeism data in school turnaround efforts.
- Support the inclusion of chronic absenteeism measures in state school report cards and other state

accountability systems.
- Work with school districts to integrate chronic absenteeism into their school improvement plans.
- Integrate chronic absenteeism into community health needs assessments.

Local Interventions to Address the Health Related Causes of Chronic Absenteeism

The following framework was informed by the Working Group's efforts and includes key principles to consider when developing a local intervention to address the health-related causes of chronic absenteeism. The framework is based on the Principles for Effective Health and Education Collaboration that were developed by the Collaborative's Health Systems Working Group. Key questions for health and education stakeholders to consider are included under each principle. The goal is for communities to use this framework to catalyze partnerships between local school districts and schools and local health providers to address the health-related causes of chronic absenteeism.

Needs assessment and implementation strategy: A needs assessment is a systematic process for determining and addressing needs or gaps in a community and leveraging assets or strengths. What key problems rise to the top and how can they be expressed in a way that is meaningful to both sectors? What resources and opportunities can be leveraged to address these problems? The needs assessment should reflect the co-benefits of collaboration and articulate needs in language meaningful to each sector. It should be noted that all non-profit hospitals are now required by the Affordable Care Act to do a regular Community Health Needs Assessment. Reaching out to local, non-profit hospitals to collaborate and access this information can be an excellent starting point for communities trying to determine the leading health issues impacting children in their community. Key questions to consider include:
- How can a school and/or school district identify the leading student health issues in their community?
- How can a schools and/or school district identify the assets and resources in a community that can be leveraged to address health issues?
- How can these health issues be expressed in a way that is meaningful to both the health and education sectors?

Data exchange mechanisms: Access to and exchange of health and education data is critical to a needs assessment and understanding both the chronic absenteeism problem within a community and the health related causes. Key questions to consider include:
- How can schools and local health agencies/providers work together to better understand and address student health issues?
- How can perceived barriers, such as HIPAA and FERPA, be addressed?

Integrator: A lead organization should be identified as the backbone organization for coalition efforts to address the health-related causes of chronic absenteeism. Key questions to consider include:
- Who can serve as the backbone organization for a coalition effort to address the health-related causes of chronic absenteeism?
- Who can convene the key players to initiate and sustain the effort?
- Who can identify, select and oversee implementation of evidence-based interventions?
- Who can select and monitor accountability measures?
- Who can develop and implement a plan for sustainability?

Demonstrated buy-in from key players: This element should be more meaningful than letters of agreement and should include some demonstrated experience working together. Key questions to

consider include:
- Who are the key stakeholders that need to be engaged to ensure political and community support for this work?
- Who are potential partners that can support the development and implementation of an intervention to address the health related causes of chronic absenteeism? What is the best way to reach out to these partners?

Targeted intervention(s): A variety of interventions could be considered based on a needs assessment and the stage of commitment among the stakeholders in the collaborative process. Short-term "wins" that focus on a high-need/high-return intervention may help cement the collaborative relationship, while other investments that focus on building a broader culture of health will have longer timeframes for seeing results. Key questions to consider include:
- What are examples of Tier 1 interventions to address the health-related causes of chronic absenteeism in your community?
- What are examples of Tier 2 interventions to address the health-related causes of chronic absenteeism in your community?
- What are short-term "wins" for your community?

Capacity investment: There needs to be a willingness to help create the infrastructure that is needed to collaborate in new ways. Just one example would be creating health information technology capacity for school health service providers and/or school based health centers. Key questions to consider include:
- What investment is needed to make health data actionable?
- What is the current school and community health infrastructure (how many school nurses, school mental health providers, etc.) and what is needed to meet the health needs of students in the community?

Evaluation, training, continuous improvement and performance measures: These measures should be used to assess the overall impact of an initiative as well as to permit continuous quality improvement. Key questions to consider include:
- What is the plan for evaluating the overall impact of your initiative and ensuring continuous quality improvement?
- What are evaluation measures that are of value to education stakeholders?
- What are evaluation measures that are of value to health stakeholders?

Sustainability: Sustainability for new collaboration is critical. One goal of any project should be to identify ways to assure sustainable funding for the new approach. But sustainability must go beyond financing to include how successful projects are built into the culture of the education and health systems going forward. Key questions to consider include:
- What are options for sustainable funding in your community?
- How can you braid various funding streams to support multi-sector efforts?
- Are there opportunities to build this effort into the local education system's policies and procedures?
- Are there opportunities to build this effort into the local health system's policies and procedures?

Scalability: No project should be undertaken unless there is sufficient investment in evaluation and replicability assessment, so that those who wish to bring this effort to scale will know how best to do so. Key questions to consider include:
- What is the plan for sharing the results of this effort and supporting spread and scale?

- What are key opportunities (e.g. conference presentations) or networks that should be leveraged for disseminating the best practices and lessons learned through this work?

Community engagement: Collaborations of this nature will only succeed if the communities that are being engaged – health providers, health systems, teachers, administrators, staff, parents and students – are empowered. Building a culture of health is founded on this engagement; the changes that are needed cannot be imposed on any one system by another. Key questions to consider include:
- What community stakeholder groups need to be engaged (e.g. health providers, teachers, administrators, parents) and how can they be engaged?

The Missing School Matters campaign led by the E3 Alliance with support from the St. David's Foundation highlights an effective local initiative that addresses the health-related causes of chronic absenteeism in Central Texas. Developing a culture of attendance through multiple avenues and partnerships is at the heart of the Missing School Matters campaign. This initiative incorporates many of the principles described above and the success of this campaign is largely due to the collaboration between the local health and education communities, along with support from local businesses, community partners and media.

The goal of the Missing School Matters campaign is to go beyond just raising awareness about absences and to begin discovering and addressing the root causes behind absences. In 2013, E3 Alliance designed and executed the Absence Reasons Study to analyze student absence reasons and patterns. The study found that the single largest reported cause of Central Texas student absences – at 48% - is acute illness. And the flu emerged as the cause of more absences than all other immunizable diseases combined. As a result, in 2014, E3 Alliance led the largest in-school flu immunization campaign in Texas history with over 6,500 vaccines given at 56 primarily Title 1 schools in five districts. While they are still waiting on results, the 2015 flu immunization campaign is expected to be quadruple the size, providing over 26,000 vaccines in 136 schools across nine districts. Moving forward the Missing School Matters campaign will have a continued focus on acute illness and will also focus specifically on the reasons low income students are missing school, including mental health issues and chronic illness.

Advancing the National Collaborative's Work on Chronic Absenteeism

The Collaborative can continue to play a key role in advancing efforts to address chronic absenteeism. Some of the key opportunities that have been identified for the Collaborative's work moving forward are:

- Continue to engage with, advise and support ED's national chronic absenteeism initiative. In addition to the sign on letter, this might include establishing a national chronic absenteeism coalition and working with the coalition to disseminate best practices, technical assistance and resources to their members and through their networks.

- Continue to support efforts to address the health-related causes of chronic absenteeism. Some opportunities for advancing the Collaborative's work on the connection between student health and chronic absenteeism include:

  o Sharing data: Identify existing models for sharing health and academic data between education, health and public health and identify best practices and resources for ensuring communities understand the health needs of students. This might include developing protocols and guidance documents for complying with HIPAA and FERPA.

- o Mapping the gap: Determine strategies for integrating student health data into efforts to map the attendance gap at the national, state and local levels. For example, how can stakeholders better understand the role that student health plays in inequities identified by the Office for Civil Rights' chronic absenteeism data (to be released in spring 2016)?
  - o Building capacity: Develop an initial set of tools on health and chronic absenteeism. For example, this might include tools for making the case for why student health matters, a summary of best practices and model interventions, bright spots and a dialogue kit.
  - o Sharing Accountability: Promote the use of chronic absenteeism as an indicator in health and public health data systems.

- Engage members of the Collaborative in promoting efforts to address chronic absenteeism through their own organizations.

- Identify and highlight bright spots demonstrating the chronic absenteeism is a problem that can be turned around.

While there is no one-size-fits-all approach to addressing chronic absenteeism, it is critical that stakeholders understand the connection between school health and chronic absenteeism and have the information necessary to implement interventions that address student health needs. Moving forward, there is an important need to educate school stakeholders about chronic absenteeism and its underlying causes and share best practices and evidence-based interventions to address the health-related causes. The health, public health and education sectors must work together and with others to ensure students are present and engaged and prepared to lead healthy, productive lives.

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