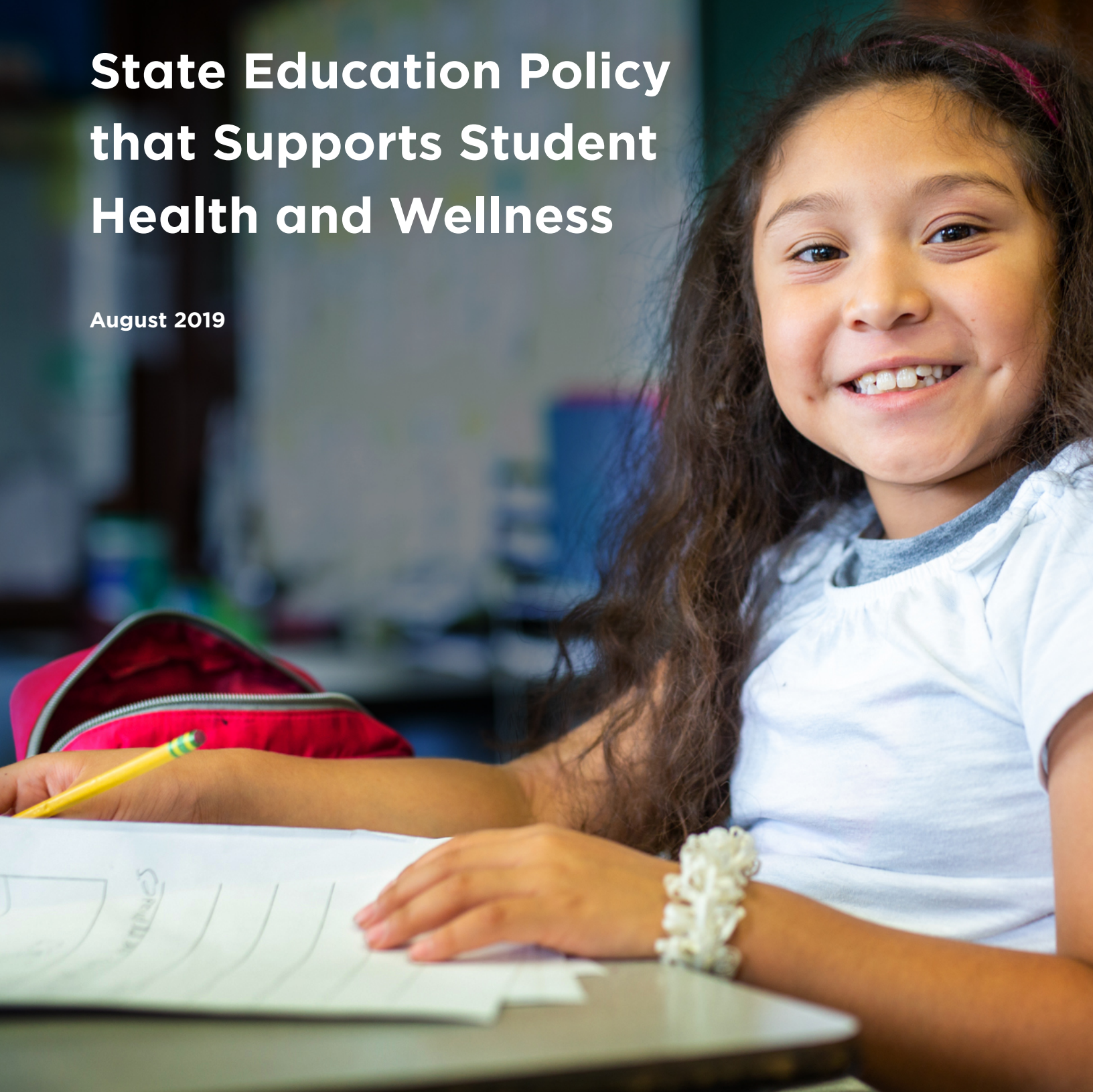


State Education Policy that Supports Student Health and Wellness

August 2019



**HEALTHY SCHOOLS
CAMPAIGN**

EVERY CHILD DESERVES TO LEARN + THRIVE

Introduction

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.¹ Yet far too many students — particularly low income students and students of color — spend their days in buildings with unhealthy air, have limited opportunities for physical activity, and have inadequate access to fresh water, nutritious food or a school nurse.² These same students often come to school suffering the impact of food insecurity and childhood trauma, and with one or more health problems that hinder their ability to learn.

The Every Student Succeeds Act (ESSA), the education law passed in 2015, highlights the importance of equitable access to quality education and the conditions that support student learning, and provides new opportunities for schools to support student success by improving student health and wellbeing.³ Since 2015, Healthy Schools Campaign (HSC) has provided targeted support, tools, and resources to states and school health advocates to ensure that implementation of ESSA reaches its full potential to impact student health and wellness.

This document builds on HSC’s previous resources and provides an update on how states have approached health and wellness in education policy and practice in response to the requirements and opportunities in ESSA. This document describes key sections of the law with the highest potential to impact student health, outlines current state efforts, highlights best practices and provides recommendations for advancing this work at the state and local level.

¹Basch, C., Gracy, D., Johnson, D., Fabian, A. (2015). Health Barriers to Learning and the Education Opportunity Gap. *Progress of Education Reform*, Volume 15 (Issue 3), Retrieved from <http://www.ecs.org/clearinghouse/01/20/69/12069.pdf>.

²Douglas D. Ready, “Socioeconomic Disadvantage, School Attendance, and Early Cognitive Development: The Differential Effects of School Exposure,” *Sociology of Education* 83, no. 4 (2010): 271-86.

³ESSA (2015). Every Student Succeeds Act of 2015, Pub. L. No. 114-95 § 114 Stat. 1177 (2015-2016).

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Addressing Health and Wellness Through State Education Policy

An emerging body of research over the last decade has demonstrated that a positive school environment that supports students' physical, psychological, cognitive, social, and emotional growth is critical to effective learning and student success.⁴ This understanding is increasingly part of mainstream conversations about education. Nevertheless, many policies and practices at the national, state and district level have made it challenging for schools to integrate emerging best practices for supporting students' healthy growth and development — and thus their learning — into the daily routine of school.

Opportunities in ESSA

In December 2015, the bipartisan Every Student Succeeds Act (ESSA), a major overhaul of federal education legislation, was signed into law. ESSA gives states and school districts significant authority and flexibility to create standards for accountability and regulate school performance, and specifically recognizes the need for schools to support the whole child. ESSA provides an opportunity to ensure equitable access to quality education and the conditions that support student learning, and provides clear opportunities for cross-sector engagement and collaboration—so schools do not need to do this work alone.

Even before ESSA was passed into law, state policymakers were already beginning to consider how to incorporate student health and wellness into education. However, despite increasing awareness about the importance of addressing student health, the previous education law, No Child Left Behind (NCLB) had been interpreted and implemented in a way that emphasized student testing and academic outcomes as measured by standardized test results. NCLB's punitive emphasis, which was the dominant educational narrative for many years, obscured a more significant and comprehensive discussion or articulation about the vision for education. ESSA, with its focus on equity and the whole child, has provided key new opportunities

for states to build education policy and practices that honor student health and wellness.

It is important to note that most states have steadily increased their focus on health and wellness in state education planning, even when these components are not readily apparent in their ESSA state plans. Leveraging increased awareness of the powerful impact of mental and physical health on student achievement, state boards have adopted a variety of regulations, guidelines, and requirements that support health-related initiatives.⁵ Many states — particularly in the context of scaled back federal guidance from the current Department of Education — have adopted aspirational goals that may fall outside their ESSA plans, such as creating equitable opportunities for all students to learn and be prepared for civic engagement, as well as success in higher education or the workforce.

Nevertheless, ESSA is a powerful tool in moving education policy and practice in the direction of increased focus on the whole child. ESSA specifically acknowledges the importance of supporting student physical and mental health and wellness in a number of important ways. For example, a state education plan that meets ESSA requirements might include:

- A state accountability system that requires schools to maintain healthy school environments.

⁴https://learningpolicyinstitute.org/sites/default/files/product-files/Educating_Whole_Child_REPORT.pdf

⁵<https://statepolicies.nasbe.org/health>

- State and local report cards that publicly track how schools perform on additional indicators.
- State standards and assessments that ensure school districts are offering a well-rounded education by testing students on the state's existing, or emerging, standards in health, PE, or social and emotional learning.
- Needs assessments that consider health and wellness, and identify evidence-based policies, practices and programs that lead to learning readiness and school improvement.
- A professional development program that equips educators to better meet the needs of the whole child.
- Enrichment and support programs that support access to a well-rounded education and help meet the mental and physical health needs of students.

A full explanation of ESSA's provisions that can be used to support health and wellness efforts are detailed in [Appendix A](#).

Integrating Student Health and Wellness into ESSA State Plans

ESSA requires every State Education Agency (SEA) to submit a state plan detailing how they will implement ESSA. All [state plans were submitted](#) between the spring and fall of 2017 and approved by the U.S. Department of Education by fall 2018. All states are currently implementing their state plans.

ESSA requires every state to include a measure of school quality or student success in their state accountability system, which proved to be the primary

way in which states integrated a focus on the whole child into their state plans. Thirty-six states and the District of Columbia included chronic absenteeism in their state accountability system, although states' definitions of chronic absenteeism vary.^{6,7} One additional state, Kansas, will require that schools already identified for improvement use chronic absenteeism in improvement planning.⁸ Additionally, Rhode Island includes teacher absenteeism in its accountability system. While there are many reasons for chronic absence, health and wellness issues stand out, and chronic absence rates are a strong proxy measure for student health issues.

States also included other measures that get at schools' success in providing a supportive environment for student learning and health. Eight states included school climate, as measured by student surveys, in their accountability systems. Four states will consider suspension rates and an additional five states will consider school discipline more broadly as a way to assess school quality and student success. Five states use other measures of health and wellness, including access to physical education or health education classes, mental health supports, or fitness assessments.⁹

Accountability systems are used by SEAs to determine how Local Education Agencies (LEAs, also commonly referred to as school districts) are serving their students and how the state can help LEAs with specific types of support. By including health and wellness indicators connected to learning in the accountability systems, states explicitly validate the importance of these issues and require that districts and schools

⁶Education Commission of the States. Accountability and Reporting: ESSA Plans. May 2018. Available at: <http://ecs.force.com/mbdata/mbQuest5E?rep=SA172>. Accessed on May 31, 2019.

⁷Kostyo S, Cardichon J, Darling-Hammond L. Learning Policy Institute. Making ESSA's Equity Promise Real: State Strategies to Close the Opportunity Gap, Eliminating Chronic Absenteeism. October 2018. Available at: https://learningpolicyinstitute.org/sites/default/files/product-files/ESSA_Equity_Promise_Absenteeism_BRIEF.pdf. Accessed on May 31, 2019.

⁸Ibid.

⁹Child Trends. Analysis of ESSA State Plans "School Quality or Student Success Indicator." September 2017. Available at <https://www.childtrends.org/wp-content/uploads/2017/09/ESSA-Fifth-Indicator-Coding-Child-Trends-9-20-2017.pdf>. Accessed on May 31, 2019.

address identified needs.

Many states integrated health and wellness into other components of their state ESSA plans. For example sixteen states will use school climate strategies in schools identified for support or improvement. This includes six states that will support schools' implementation of evidence-based approaches for school climate and nine states will support the use of needs assessments that specifically identify opportunities to improve school climate.¹⁰ In addition, eleven states will provide resources and technical assistance to schools related to social and emotional learning (SEL); five of these states connect SEL to school improvement efforts.¹¹

In addition, all states are required to provide information on state and local report cards that detail specific indicators of student health and wellbeing, such as chronic absenteeism, rates of in-school suspensions, out-of-school suspensions, expulsions, school-related arrests, and referrals to law enforcement, as well as incidences of violence including bullying and harassment. The first state school report cards under ESSA were released in fall 2018 and winter 2019.

Finally, school districts across the country are leveraging Title IV, Part A funding to implement

programs that support safe and healthy students and to provide well-rounded education. Districts across the country are utilizing Title IV, Part A funding to implement activities and programs including school based health and mental health services, trauma-informed classroom management, safe and drug free schools and violence prevention, crisis management and conflict resolution.¹²

State Spotlight: California

California has recognized the power of chronic absence as a tool for better understanding poor academic performance by integrating it into the state's Local Control Funding Formula (LCFF) and including it as a school quality measure in the state ESSA plan. As a result, chronic absence is included as a measure in the California School Dashboard. Additionally, other federal and state policy requirements, such as the local school wellness policy, create new opportunities to set goals, plan actions and leverage new resources to address chronic absence. HSC, Attendance Works and the California Local School Wellness Policy Collaborative recently collaborated on [California's School Health and Chronic Absence Diagnostic Tool](#).

¹⁰Ibid.

¹¹Ibid.

¹²AASA, The School Superintendents Association, NAFEPA, and Whiteboard Advisors. https://aasa.org/uploadedFiles/Policy_and_Advocacy/files/AASA%20NAFEPA%20WBA%20ESSA%20Title%20IV%20Survey%20FINAL%20061818.pdf



Education Policy Components to Support Student Health and Wellness

Healthy Schools Campaign has highlighted six elements of state education policy and practice that can be leveraged to promote student health and wellness. The sections below consider key opportunities associated with these elements, and highlight promising best practices and success stories.

State Accountability Systems to Support the Health and Learning Connection · 6

State and Local Report Cards that Connect Health and Learning · 7

Standards, Assessments and Definitions of Well-Rounded Education · 8

Support for School Improvement Efforts through Needs Assessments · 9

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State Accountability Systems to Support the Health and Learning Connection

Accountability systems are used by SEAs to determine how LEAs are serving their students and meeting the state's priorities. The systems essentially create a ranked list of schools, where the lowest performers are put into a group that receives intense support from the SEA through a plan for improvement that is informed by a needs assessment. By including health and wellness indicators connected to learning in the accountability systems, states explicitly validate the importance of these issues and require that districts and schools address identified needs. Choosing the most meaningful and appropriate measures is an essential part of ESSA implementation. There should be a particular focus on what schools, administrators, and teachers actually have the ability to control and affect; conversely, indicators that are easy to accomplish without making significant improvements in the school health environment may not result in actual impact.

Best Practices

- State education plans incorporate clearly defined measures that provide meaningful, actionable data for improving achievement and increasing equity.
- SEAs provide support to districts to understand,

collect, and analyze accountability data.

- SEAs engage stakeholders to consider what additional measures of student success and school quality might be included in future years, and assess how these could be used and applied.
- SEAs collaborate with other state agencies, such as state health departments and state departments of mental health, which might collect complementary data.
- SEAs work to understand and analyze any unintended consequences of including a measure in the accountability system.
- SEAs seek guidance from national experts, partners and stakeholders, and provide technical assistance to LEAs as they integrate health and wellbeing into their practice.

Resources

HSC and the Alliance for a Healthier Generation created guides to help states consider different metrics, including: [Chronic Absenteeism](#), [School Climate](#), [Social and Emotional Learning](#), [School Connectedness](#) and [School Discipline](#).

State Spotlight: Connecticut

Since 2011, Connecticut has been reforming its education system with an emphasis on targeting resources to areas of greatest need, culminating in the state's five year strategic education plan, [Ensuring Equity: Excellence for all Connecticut Students](#). In addition to learning goals, the state's plan prioritizes meeting student's non-academic needs — including mental health, nutrition and physical activity — so they are healthy and ready to learn. The state's accountability system incorporates data that districts were already collecting, and includes measures of both chronic absenteeism and physical fitness. The strategic plan was developed with extensive stakeholder input, including families, educators, business leaders and community members representing a diverse array of the state's residents and organizations.

Connecticut used this strategic plan and planning process to help define its ESSA plan, including policies that address attendance and chronic absenteeism, discipline and trauma. The state's ESSA plan also includes an Early Indication Tool that creates district- and school-level dashboards with specific information about students at risk, such as students in special education, alternative school students or English Language Learners. For schools identified for improvement, the state provides support to the districts to create plans with strategic focus areas, which may include chronic absenteeism and lead to health-related interventions.

State and Local Report Cards that Connect Health and Learning

ESSA requires that states release yearly report cards that include a variety of elements, such as student demographics and achievement, as well as indicators of student well-being, such as rates of suspensions and chronic absenteeism rates. Local report cards essentially mirror the state report cards, but they must also include school-specific information, showing how schools in the LEA compare to state averages and how students in each school compare to LEA averages. LEAs also have the opportunity to add additional information for their stakeholders.

Best Practices

- SEAs and LEAs assess if measures included on the state's or district's report card provide meaningful information about health and wellness to policymakers, communities, and families.
- SEAs and LEAs present required data in a manner that is accessible, clear, and meaningful to constituents, with input from a wide range of stakeholders.
- SEAs explore additional state school report card measures to support student health and wellness and look at how other states and districts use these measures.

- SEAs and LEAs try to identify the root causes and long-term implications of health and wellness challenges, and use an equity lens to consider how these might impact different populations of students.

Resources

In addition to the resources highlighted in the Accountability Measures section above, information about access to physical and mental health services at school can be found in School-Based Health Alliance's [Children's Health and Education Mapping Tool](#). OCR also collects data on the [presence of school nurses and other health professionals](#) and CDC looks at [trauma-informed interventions](#). SHAPE America has information on [health and physical education guidelines](#) and FRAC explores meal participation rates for [lunch](#) and [breakfast](#).

Local Spotlight: Chicago Public Schools

As part of an effort to remove health-related barriers to learning so that students may succeed in college, career and life, [Chicago Public Schools](#) (CPS) developed the [Healthy CPS indicator](#), a comprehensive health-focused measure that is included on the CPS school progress report. Healthy CPS aligns with Healthy Chicago, the city's first public health agenda. The Healthy CPS Indicator, and its detailed survey process, helps schools streamline health and wellness initiatives already taking place at the school, create an action plan with the school's wellness team and implement health-promoting changes, including physical activity, nutritious foods, school-based health services, health education and supports for students with chronic conditions. Stakeholders can use the indicator to identify whether their school is implementing key policies and initiatives that focus on chronic disease, instruction, wellness and health services.

Standards, Assessments and Definitions of Well-Rounded Education

ESSA requires schools to provide all students with a well-rounded education, and allows the use of ESSA funding to do so. The definition of a well-rounded education is broad, and can include health, PE and any other subject the state or LEA determines will provide an enriching academic experience. This replaces the concept of core subjects as described in NCLB.

Each state plan must provide an assurance that the state has adopted challenging academic content standards for math, reading or language arts and science — but states can develop and implement standards and assessments for content areas such as social and emotional learning (SEL), health education and physical education, or to refine existing standards to make deliberate connections to human health and well-being, such as thorough science standards. Developing standards and assessments on these content areas will also support the collection of statewide data on these issues and their possible inclusion in state accountability systems.

Best Practices

- SEAs use best practices and evidence to guide the development of developmentally-appropriate standards for health-related subject matter, including SEL, physical education, and health education.
- SEAs provide guidance and technical assistance to LEAs to support implementation, and create benchmarks, curricular guidance, and other support as needed.

- LEAs develop partnerships with state and local agencies to connect to ongoing efforts to help students connect to career competencies and pathways.
- SEAs and LEAs identify, collect, and disseminate examples of best practices and “what works” in their state, and create opportunities for state education policymakers to share and exchange ideas.

Resources

The [Collaborative for Academic, Social, and Emotional Learning](#) (CASEL) offers a range of resources for developing social emotional learning [standards, frameworks, and competencies](#), as well as [assessment of standards](#).

State Spotlight: New York

New York State’s ESSA plan includes a significant emphasis on SEL and overall student wellbeing. The New York State Department of Education worked with the New York State Safe Schools Task Force to develop a School Climate Index in 2018, and increased the available resources for providing educational components on mental health and SEL. New York also has associated [benchmarks](#) provided for voluntary use at the early elementary (K-3), late elementary (4-5), middle school (6-8), early high school (9-10), and late high school (11-12) levels.

Support for School Improvement Efforts Through Needs Assessments

ESSA specifically requires needs assessments in a number of circumstances, including when a school is identified for comprehensive support and improvement (CSI) by their SEA due to their performance on the state's accountability system, and must use a school-level needs assessment to develop and implement a school improvement plan. (Schools identified for targeted support and improvement (TSI) may be required or strongly encouraged to complete a needs assessment as well.) In addition, needs assessments are required when schools use their Title I funds to operate a schoolwide program, and LEAs that receive at least \$30,000 in funding from the Student Support and Academic Enrichment Grants (SSAEG) program must complete a needs assessment each year.

Needs assessments are an opportunity for schools to examine factors outside the classroom that impact academic achievement and are a key tool to mobilizing resources schools need in order to address these issues. And, because needs assessments are linked to indicators in the accountability system and/or school report card, there is a clear path for incorporating questions that can uncover health and wellness issues. For example, if chronic absenteeism is an accountability measure, then the needs assessment should help schools identify the root causes of chronic absenteeism specific to their student population, which likely will include chronic and acute health issues. The needs assessment will thus help schools identify the correct set of evidence-based practices to address their issues and create coordinated interventions that include essential school and community-based resources.

This has important equity implications, given that the schools likely to be identified as needing comprehensive support and improvement disproportionately serve low-income students and students of color, populations that are already at risk for poor health and education outcomes.

Best Practices

- SEAs offer needs assessment guidance that explicitly supports or requires school districts to incorporate health and wellness data into their needs assessments, and collaborate with other state agencies, such as state health and public health agencies to design and support implementation of this guidance.
- SEAs support or require school districts to collaborate with community partners, including local nonprofit hospitals and health departments, to develop and conduct needs assessments.
- SEA staff or partners provide technical assistance on health-related needs assessment.
- SEAs provide school districts with a well-researched list of evidence-based practices to address the needs identified, as well as guidance on selecting interventions, and creating school improvement plans that include these interventions.

Resources

HSC and Alliance for a Healthier Generation's [Needs Assessments to Connect Learning + Health: Opportunities in the Every Student Succeeds Act \(ESSA\)](#) includes important background information, data sources, and sample health and wellness questions that can be included in needs assessments.

State Spotlight: Colorado

The Colorado Department of Education, with assistance from the Southwest Comprehensive Center of WestEd and in partnership with RMC Research Corporation, developed [A Guide for Comprehensive Needs Assessment](#) related specifically to NCLB-required needs assessments. Tools and resources on their website include links to data systems, needs assessment tools and survey templates. Their tools encompass a full array of educational issues and consider such wide-ranging factors as student data analytics, healthy youth, school climate and family feedback surveys on school improvement.

Preparing Teachers and School Leaders to Better Address School Health and Wellness

Professional development provides an excellent method of ensuring that teachers and staff understand how to integrate health and wellness into their interactions with students. As the adults who spend the most waking hours with children during the week, school staff deeply understand how important it is that they are equipped to look out for the health and safety of their students. A recent study showed that elementary school teachers are already spending about 180 hours per school year addressing student health issues.^{13,14} Additionally, a recent survey showed that teachers and principals value social emotional learning but close to half have not received training or professional development on the subject.¹⁵

In addition, building an effective schoolwide environment that promotes health and wellness requires prioritizing the health and wellness of teachers, principals and other school staff. According to a [report](#) from Pennsylvania State University and the Robert Wood Johnson Foundation, “elementary school teachers who have greater stress and show more symptoms of depression create classroom environments that are less conducive to learning, which leads to poor academic performance among students.” Effects of teacher stress range from lower scores on math tests, to more behavior problems and lower levels of social adjustment and student engagement.¹⁶

Creating and maintaining positive working environments is critical for teacher retention and productivity. High stress and poor working

environments lead many teachers out of the profession, and turnover is most likely to occur in poorly performing schools. This contributes to a long-term destabilization of low-income neighborhood schools and deepens existing inequities in the school system.

Best Practices

- SEAs consider integrating health and wellness into preservice training and certification requirements for teachers and administrators.
- SEAs create standardized training and professional development tools to connect educators with evidence-based strategies, curriculum, and resources.
- LEAs develop or support training opportunities to build knowledge of and expertise in issues related to student health and well-being, including understanding and applying data for improvement.
- SEAs and LEAs work collaboratively with partners, and consider how to leverage relationships with other agencies and organizations to address interconnected and interdependent social determinants of health and education.
- LEAs create wellness programs to connect staff to stress reduction and health promotion support.

Resources

The CDC Healthy Schools project has a variety of [professional development resources](#). CASEL has developed [guidance](#) for states interested in developing a high-quality professional learning system for SEL.

¹³Hill, N. J., & Hollis, M. (2011). Teacher time spent on student health issues and school nurse presence. *Journal of School Nursing*, 28(3), 181.

¹⁴Baisch, M. J., Lundeen, S. P., & Murphy, M. K. (2011). Evidence-based research on the value of school nurses in an urban school system. *Journal of School Health*, 81, 74-80.

¹⁵Hamilton L, Doss C, Steiner E. Teacher and Principal Perspectives on Social Emotional Learning in America’s Schools. Findings from the American Educator Panels. 2019. Rand Corporation: Santa Monica, CA. Available at: https://www.rand.org/pubs/research_reports/RR2991.html. Accessed on June 6, 2019.

¹⁶Greenberg, M. T., Brown J. L., Abenavoli, R.M. (2016). “Teacher Stress and Health Effects on Teachers, Students, and Schools.” Edna Bennett Pierce Prevention Research Center, Pennsylvania State University

State Spotlight: Florida

The Florida Department of Education offers an in-person professional development opportunity for up to 200 state educators, the [Healthy Schools Summer Academy](#). Designed specifically for health education and physical education content teachers and administrators, with special emphasis on other subject area courses with integrated health education benchmarks, all educators are welcomed. Academy sessions include information and resources focusing on Florida standards, safe and supportive environments, school connectedness, nutrition, tobacco prevention education, physical education assessments, and using the Youth Risk Behavior Survey (YRBS).

State Spotlight: North Carolina

The North Carolina Department of Public Instruction engages LEAs in evidence-based practices of the Multi-Tiered System of Support (MTSS) framework and the Whole School, Whole Community, Whole Child (WSCC) model. North Carolina has legislation supportive of safe school environments inclusive of strategies to address student academic, behavioral, and social emotional needs. Through provision of professional development, resources, guidance, technical assistance and collaboration, staff of the NCDPI help LEAs with the implementation of practices aligned with this legislation with an ultimate goal of healthy, safe, and responsible students. For example, NCDPI has created [online professional development training modules](#) to provide educators the tools to improve students' academic performance, raise awareness of how to address behavioral health issues inside and outside the classroom, and foster communication among schools, students, families, law enforcement, and communities.

Student Support and Academic Enrichment Grants

The Student Support and Academic Enrichment Grants program (Title IV-A) consolidates what used to be 49 discrete grant programs into a single grant program that SEAs and LEAs can use to promote student health, increase access to well-rounded education and improve the use of technology. Any school district that receives more than \$30,000 through this program must conduct a needs assessment and use the funding to address the needs identified. Programs that can be implemented using this funding could include evidence-based drug and violence prevention programs, mental health services and mentoring and school counseling programs.

Best Practices

- SEAs promote the use of Title IV-A funds for their intended use and do not encourage the transfer of funds for other needs.
- SEAs develop clear guidance for LEAs on the use of Title IV-A funds related to health and mental health, including how these funds can be applied to state priorities and requirements, and disseminate information about evidence-based interventions for health and wellness that can be supported by Title IV-A funds.

- SEAs create and disseminate needs assessment guidance that include health and wellness elements.
- LEAs create partnerships with local stakeholders to complement and amplify health-related initiatives.

Resources

SHAPE America provides [Title IV-A resources](#) to states and districts, which includes a funding estimate calculator, a [Title IV-A Funding Fact Sheet](#), an [ESSA Brainstorming Worksheet](#), and a webinar entitled [“Seizing ESSA’s New \\$1.1 Billion Opportunity.”](#) The Title IV-A Coalition provides this [overview fact sheet](#) with an analysis of how states are using funding.

State Spotlight: Washington

The State of Washington Office of Superintendent of Public Instruction (OSPI) created online [guides and resources for application for Title IV-A funding](#), which LEAs could use to identify and fund initiatives funded by the state’s \$15.5 million for the 2018-2019 school year. OSPI distributed these funds via formula allocations to all eligible school districts. OSPI offers school specific guidance and resources on a range of health and wellness related issues on which Title IV-A funds can be used, including mental health, such as the Student Assistance Prevention-Intervention Services Program, which delivers supports and services necessary for student engagement and healthy decision-making. The program is a comprehensive, integrated model of services that fosters safe school environments, promotes healthy development and social well-being, and prevents alcohol, tobacco, and other drug abuse. Funds can also be used for mental health and suicide prevention, such as developing and implementing LEA plans for recognizing and responding to signs of emotional or behavioral distress in students, as required by the state’s regulation. OSPI also provides guidance on how funds can be used to support a well-rounded education, including social emotional learning and health and physical education.

Conclusion

State and local education policy and practice are increasingly important pathways by which schools can support student health and wellness, and ESSA provided a key opportunity for states to dramatically transform their approach to accountability and equity through their plans.

The elements described in this document, such as incorporating health and wellness measures into accountability systems, are just the beginning. Accountability sets an important minimum standards — but it does not create a vision for what is possible. As implementation of state ESSA plans continues, and as states have the opportunity to continue to update and refine their ESSA plans, as well as their systems of support for struggling schools, HSC looks forward to seeing states and school districts develop exciting new visions for schools that fully support the physical and mental health of students as a core pathway to academic success.

Appendix A: ESSA's Explicit Authorities to Connect Learning and Health

- Health and physical education (PE) have been added to the list of subjects that define a student's "well-rounded education." Schools eligible for Title I grants may use funding to develop and implement "well-rounded program[s] of instruction."
- Each SEA is required to create a state accountability system with at least four indicators of their choosing, including three academic indicators and one non-academic indicator (a measure of school quality or student success). Examples of non-academic indicators listed in ESSA include measures of school climate and safety, such as chronic absenteeism and incidences of violence.
- Each SEA must release an annual state report card describing how the state is meeting Title I requirements. In addition to measures such as per-pupil expenditures and student achievement, the report cards must include rates of chronic absenteeism and incidences of violence, including bullying and harassment. LEAs are also required to prepare and disseminate report cards to the public that include the same minimum requirements as the SEA report cards.
- Title I funded schools with Schoolwide Program Plans must design these plans based on comprehensive needs assessments for the entire school. While the plans focus on the needs of all children in the school, they place particular emphasis on the needs of high-risk students. This may include counseling, school-based mental health programs and specialized instructional support.
- In order for SEAs to receive Title I grants, ESSA requires them to develop state plans in coordination with specialized instructional support personnel. Specialized instructional support personnel include school counselors, school social workers, school psychologists, school nurses and others.
- States receiving Title I funding must have state plans that describe how they will improve school conditions for learning by reducing discipline practices that remove students from the classroom and reducing aversive behavioral interventions that compromise student health.
- Title IV, Part A consolidates 49 grant programs, some of which focused on student health, into a new grant program called the Student Support and Academic Enrichment Grant. SEAs and LEAs can use these grants to promote student health, increase access to a well-rounded education and improve the use of technology.
- Access to professional development has been expanded under Title II of ESSA to include all teachers, as well as administrators and other staff. This expansion of eligibility, along with a broadening of acceptable programs, allows for professional development of all staff to include health and wellness-related issues.

Appendix B: Stakeholder Input Process

To better understand how states thought about integrating health and wellness into policy and planning efforts, such as accountability measures, improvement strategies and other approaches, HSC conducted 20 key informant interviews, using standardized interview guides, in August through October 2018 with representatives from key national organizations, state advocate groups and state education agencies.

Additionally, HSC convened national and state education leaders on December 6, 2018 to identify lessons learned from state and district implementation of ESSA plans, including ways to support student health and wellness, opportunities to support states and school districts with ESSA implementation, and opportunities for collaboration. Throughout the day-long meeting, participants discussed a range of issues and considered steps forward for the field. Connecticut and Louisiana discussed their experiences with ESSA, with additional input from California, DC, and Kentucky.

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Healthy Schools Campaign

Healthy Schools Campaign (HSC) engages stakeholders and advocates for policy changes at the local, state and national level to ensure that all students have access to healthy school environments, including nutritious food, physical activity and essential health services, so they can learn and thrive.

To get involved go to healthyschoolscampaign.org.

For more information contact:

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