**Alignment to Education Accountability Measures**

Aligning and integrating a whole child approach with health-related goals into education accountability measures is both an outcome, and enabling factor for sustainability.

"*Health and education are related. They are interrelated. They are symbiotic. Boosting one boosts the other. There is a connection between the two sectors. When one fails so does the other. When one succeeds that success feeds the other. We do not just have an isolated duty to want the child to be healthy and educated—we have a moral imperative. Each of us that works with children must see our roles as carers, as nurturers, as teachers in supporting the whole child.*"

-ASCD Executive Director and CEO Dr. Gene R. Carter in his Best Health Promotion Practice Award acceptance speech at the 21st International Union for Health Promotion and Education Conference.

Research confirms that health is a vital learning support, but the sheer number of challenges facing students may seem insurmountable for some schools. While many schools are implementing evidence-based health promoting programs, they are not part of the fabric of the education system. Leaders in education research and policy, as well as parents and students, have called for health to be integrated into the core mission of schools.[[1]](#footnote-1) At the same time, high school graduation has emerged as a key priority in health, and had been identified as a leading health indicator.[[2]](#footnote-2),[[3]](#footnote-3)

Incorporating health-related indicators in state and local education accountability systems requires establishing matches between what the general public, parents, school districts and schools, school-community collaboratives, decision makers, and school health program proponents believe are important to measure. Each audience needs to view information on health-related indicators as important to achieving education’s core mission.[[4]](#footnote-4) While the accountability systems will vary by state and locality, school health programs can map to the following key academic outcomes:

* Grades
* Chronic absenteeism
* Discipline
* Drop out/truancy
* School climate and connectedness
* High School graduation
* Staff recruitment, retention, absenteeism, presenteeism and well-being.

Key components include:

* The program is well integrated into the operations of the school/district.
* The program is meaningfully aligned to local accountability measures.
* The program adapts to support education outcomes.
* Program aligned to staff professional development goals.
* Alignment to education initiatives to demonstrate how student and staff health supports the mission of schools and its ongoing effectiveness.

1. Basch, C Healthier students are better learners: A missing link in school reform to close the achievement gap. Equity Matters: Research Review 6. 2010. [↑](#footnote-ref-1)
2. Freudenberg N, Ruglis J. Reframing school dropout as a public health issue. *Preventing Chronic Disease: Public Health Research, Practice and Policy*, 2007,4 (4), 1-11. [↑](#footnote-ref-2)
3. Healthy People 2020. Available at www.healthypeople.gov/2020/topicsobjectives2020/ [↑](#footnote-ref-3)
4. Council of Chief State School Officers. *Incorporating Health Indicators into Education Accountability Systems.* 1998. Washington DC. [↑](#footnote-ref-4)