

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 At the same time, high school graduation has emerged as a key priority in health, and had been identified as a leading health indicator.²,3

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 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

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.

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.

³ Healthy People 2020. Available at www.healthypeople.gov/2020/topicsobjectives2020/

⁴ Council of Chief State School Officers. *Incorporating Health Indicators into Education Accountability Systems.* 1998. Washington DC.



- High School graduation
- Staff recruitment, retention, absenteeism, presenteeism and well-being.

- 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.



Communication/Messaging

A valued outcome of program implementation and sustainability is heightened issue salience. This is especially true for high-profile efforts. Social problems that continue to be recognized as public issues through sustained organizational resources and sustained media coverage can lead to public perceptions of increased issue severity, as well as policymakers paying greater policy attention to the issue and allocating more resources to it.¹

Key components of communication include:

- The program has communication strategies to secure and maintain public support.
- Program staff communicates the need for the program to the public.
- The program is marketed in a way that generates interest.
- The program increases community awareness about the issue.
- The program demonstrates its value to the public.

¹ Dearing JW, Rogers EM. Agenda-Setting. Thousand Oaks, CA: Sage Publishing; 1996.



Environmental Support

Environmental support encompasses organizational support as well as broader community and political support. Having supportive leaders or "champions" of a program is often cited as one of the most important factors for successful program implementation and sustainability. In the area of school health, the presence of a school health champion is integral to leadership, modeling and job-alike support.

- Champions exist who strongly support the program.
- The program has strong champions with the ability to garner resources.
- The program has leadership support from within the organization (e.g. school, district levels).
- The program has strong public/community support.
- Leadership and champions believe that healthy kids learn better, and support whole child strategies to academic achievement.
- The program is integrated into staff professional development.
- The program is strategically aligned to local, state and federal educational accountability measures.



Organizational Capacity

Systems that focus on strengthening administrative capacity to support an innovation during its initial implementation are more successful at sustaining the innovation once the initial trial ends. A study investigating implementation of School Wellness Policies (SWP) found that schools reporting higher SWP quality and effectiveness were more likely to have developed organizational capacity to implement an SWP (e.g. developed administrative procedures, made staff aware of SWP requirements, set up a wellness task force or committee). However, supporting capacity for school health programs are especially challenging given very limited federal and state funding.

Evidence suggests that policy and system change are effective strategies to addressing complex public health issues and better population health outcomes.³ At the same time, leaders in education reform policy consistently speak to the necessity of capacity building to support school-wide improvement. More specifically, capacity building has been identified as a key driver (along with group work, instruction and systemic solutions) that works directly on changing the culture of a school (values, norms, practices, relationships) that translates into sustainable, whole-school change.⁴ Simply put, investments must be made that get at the intrinsic motivation and competency development of school staff in order to create lasting change.

Key components of organizational capacity include:

- Organizational systems are in place to support the various program needs. We see the presence of a strong school wellness council as central to this component.
- Leadership effectively articulates the vision of the program to leadership and stakeholders (i.e. school board within a district).
- Leadership effectively manages staff and other resources.
- The program has adequate staff to complete the program's goals.
- Staff have a deep understanding of school systems and policy structures, education accountability measures, and how to connect school health policy and system change strategies.
- There is on-going professional development for school staff and partners with an emphasis on implementing and sustaining policy and system change strategies.

¹ Johnson K, Hayes C, Center H, Daley C. Building capacity and sustainable prevention innovations: a sustainability planning model. *Evaluation Program Planning* 2004, 27(2), 135-49.

² Budd EL, Schwarz C, Yount BW, Haire-Joshu D. (2012). Factors influencing the implementation of school wellness policies in the United States, 2009. *Preventing Chronic Disease*, 2012,9, 110296.

³ Frieden TR. A framework for public health action: The health impact pyramid. *American Journal of Public Health*, 2010, 100(4), 590-595.

⁴ Fullman M. Seminar Series 204: Choosing the wrong drivers for whole school system reform. Center for Strategic Education. 2011.



Partnership and Community Engagement

Many school health programs are leveraged through partnerships and community coalitions because stable federal and state funding is hard to come by. Many partners have a stake in healthy schools. Given the number of potential partners, it is essential to be strategic and ensure that student learning and achievement are the focus of every partnership. Key stakeholders in the community may include health-based organizations, youth-based organizations, Education Associations and Unions, philanthropy and health-care organizations.

Community engagement has been a core component of traditional coordinated school health programs, and the new "Whole School, Whole Community, Whole Child" model 1 released by ASCD and the CDC emphasized this concept by breaking out "community involvement" from "family engagement". The model also specifically addresses the need to engage students in school health. Engaging those with "lived experience" from the population in which the program or intervention hope to impact is absolutely vital to the successful implementation and sustainability of a program.

Key components include:

- Diverse community organizations are invested in the success of the program.
- Community members are passionately committed to the program
- The program communicates with community leaders.
- Community leaders are involved with the program.
- The community is engaged in the development of program goals.

Developing and maintaining quality youth-adult partnerships requires some special considerations relative to other groups. While a full description of the theory and research behind quality youth-adult partnerships is beyond the scope of this report, key partnership structures include²:

- Youth have multiple options for participation and receive the support to progressively take on more responsibility as they gain experience and skills.
- There is clarity in the roles of youth and adults, as established by policy, position description, or compensation.
- Youth and adults receive coaching and ongoing feedback.
- The organization has established strategies to recruit and retain youth.
- Organizational resources budget, staff training, physical space are aligned to support quality youth-adult partnership.

¹ ASCD, Centers for Disease Control and Prevention. *Whole School, Whole Community, Whole Child. A Collaborative Approach to Learning and Health.* 2014. http://www.ascd.org/ASCD/pdf/siteASCD/publications/wholechild/wscc-a-collaborative-approach.pdf

² Zeldin S, Petrokubi J, Camino L. *Partnerships in Public Action: Principles, Organizational Culture & Outcomes*. October, 2008. Forum for Youth Investment.



Adults and youth each have the opportunity to reflect and learn with their same-age peers.

Quality youth-adult partnerships translate into benefits to the youth/student: increased engagement, sense of belonging, safety, community awareness; adult: connection, creativity, and empathy; and organization: policies, programs and resources better reflect the needs of the population. As it relates to sustainability, youth partners can be powerful advocates to garner both internal (student) support and external (education leadership, community partners, funders, elected officials) for a school health program.



Partnership and Community Engagement

Many school health programs are leveraged through partnerships and community coalitions because stable federal and state funding is hard to come by. Many partners have a stake in healthy schools. Given the number of potential partners, it is essential to be strategic and ensure that student learning and achievement are the focus of every partnership. Key stakeholders in the community may include health-based organizations, youth-based organizations, Education Associations and Unions, philanthropy and health-care organizations.

Community engagement has been a core component of traditional coordinated school health programs, and the new "Whole School, Whole Community, Whole Child" model 1 released by ASCD and the CDC emphasized this concept by breaking out "community involvement" from "family engagement". The model also specifically addresses the need to engage students in school health. Engaging those with "lived experience" from the population in which the program or intervention hope to impact is absolutely vital to the successful implementation and sustainability of a program.

Key components include:

- Diverse community organizations are invested in the success of the program.
- Community members are passionately committed to the program
- The program communicates with community leaders.
- Community leaders are involved with the program.
- The community is engaged in the development of program goals.

Developing and maintaining quality youth-adult partnerships requires some special considerations relative to other groups. While a full description of the theory and research behind quality youth-adult partnerships is beyond the scope of this report, key partnership structures include²:

- Youth have multiple options for participation and receive the support to progressively take on more responsibility as they gain experience and skills.
- There is clarity in the roles of youth and adults, as established by policy, position description, or compensation.
- Youth and adults receive coaching and ongoing feedback.
- The organization has established strategies to recruit and retain youth.
- Organizational resources budget, staff training, physical space are aligned to support quality youth-adult partnership.

¹ ASCD, Centers for Disease Control and Prevention. *Whole School, Whole Community, Whole Child. A Collaborative Approach to Learning and Health.* 2014. http://www.ascd.org/ASCD/pdf/siteASCD/publications/wholechild/wscc-a-collaborative-approach.pdf

² Zeldin S, Petrokubi J, Camino L. *Partnerships in Public Action: Principles, Organizational Culture & Outcomes*. October, 2008. Forum for Youth Investment.



Adults and youth each have the opportunity to reflect and learn with their same-age peers.

Quality youth-adult partnerships translate into benefits to the youth/student: increased engagement, sense of belonging, safety, community awareness; adult: connection, creativity, and empathy; and organization: policies, programs and resources better reflect the needs of the population. As it relates to sustainability, youth partners can be powerful advocates to garner both internal (student) support and external (education leadership, community partners, funders, elected officials) for a school health program.



Program Adaptation

Regardless of a program's ability to support the continued implementation of a program, research indicates that it is unlikely to be sustained if it does not meet the needs of the intended audience. Highly sustained organizations are constantly evolving through lessons learned, evaluation findings and ongoing needs assessments.

While adaptation is important for sustainability, it is critical for the program to clearly articulate what components must be in place for the program to be considered "sustained". In other words, what is the threshold for adaptation, and what components must be implemented to fidelity?

Key components of program adaptability include:

- Program allows adaptability for each school/district
- The program periodically reviews the evidence base.
- The program adapts strategies as needed.
- The program adapts to new science.
- The program proactively adapts to changes in the social, political, and cultural environments
- The program makes decisions about what components are ineffective and should not continue.

¹ Johnson K, Hayes C, Center H, Daley C. Building capacity and sustainable prevention innovations: a sustainability planning model. *Evaluation Program Planning* 2004, 27(2), 135-49.



Program Evaluation

Evaluation is the systematic investigation of the merit, worth or significance of an object or effort. A description of all the types and uses of program evaluation is beyond the scope of this report. We will briefly review summative and formative evaluations as they relate to sustainability. Summative evaluations are typically retrospective assessments of established programs and are useful in determining accountability for successes and failures, informing consumers about quality and helping stakeholders (likely funders) to understand the effectiveness of a program or project. They provide cumulative statements of a program's worth, including effectiveness and cost savings. Summative evaluations are not aimed for program development of staff, but rather sponsors and consumers. Formative evaluations, on the other hand, provide information for the development and/or improvement of a program. They offer guidance for those who are responsible for ensuring and improving the quality of a program, paying close attention to the needs of the consumer. Both formative and summative evaluations are necessary for program development and evaluation.

The timing of summative evaluation findings is often too late in the project life cycle to be useful in promoting sustainability; evaluation could be more useful if it included continuously accumulated data about major outcomes, so that interim data about outcomes would be available before the initial funding ends.²

- The program has the capacity for quality program evaluation.
- The program reports short term and intermediate outcomes.
- Evaluation results inform program planning and implementation.
- The program provides strong evidence that the program works.
- Program evaluation results are used to demonstrate success to funders and other key stakeholders.

¹ Joint Committee on Standards for Educational Evaluation. *The program evaluation standards.* 1994, Thousand Oaks, CA: Corwin Press.

² Scheirer MA. Is sustainability possible?: A review and commentary on empirical studies of program sustainability. *American Journal of Evaluation*, 2005,26, 320-347.



Readiness

Measuring readiness is a systematic analysis of a school's ability to undertake a transformational process or change. A readiness assessment identifies the potential challenges that might arise when implementing new procedures, structures, or processes. Furthermore, through the identification of the gaps within the existing organization, the readiness assessment provides an opportunity to remedy these gaps before, or as part of, the implementation plan.

The definition of readiness can vary depending on the organization or community, and type of change being instituted (i.e. changing workflows in a pediatric provider office, or implementing a tobacco free environment policy). Regardless of the issue or organization, readiness has some specific characteristics that are important to understand. The components below are taken from the Community Toolbox²:

- Readiness is issue-specific. A community can be more than ready to address one issue, while being at the very earliest stages of readiness in relation to another. It's measurable. It's measurable across multiple dimensions. Not only can you get an accurate assessment of community readiness, you can accurately measure where the community is on various elements of readiness.
- Readiness can vary across dimensions. A community may be more ready to address an issue in some ways than in others. A community may know a great deal about the issue and realize it's a problem, but not be able to conceive a way to fix it.
- Readiness can vary across different segments of the community. Some groups those directly affected by the issue, for example may be far more ready to deal with it than others. Addressing the issue may have a logical progression.
- Readiness is essential knowledge for addressing an issue. You can easily doom an effort by trying to push a community into something it's not ready for. People will only support what they see as reasonable, logical, beneficial and doable. You may be proposing something that is all of those, but if the community's perception is otherwise, it is unlikely to fly.

An understanding of school and community readiness to support a school health initiative is vital to its success and sustainability. There are many well-documented competing pressures on schools. Attempting to institute policies, practices and procedures within a school that does not view health as a learning support will likely not sustain past their initial four years in the program. Additionally, imposing a change process on a school that is not open to change can cause harm; school staff and leaders may get burned out or become apathetic after a number of change attempts that do not stick, community partners may become frustrated when there is little to no change, and vitally important relationships may suffer.

¹ US Department of Health and Human Services, HRSA. *Readiness Assessment and Developing Project Aims.* Available at http://www.hrsa.gov/quality/toolbox/methodology/readinessassessment/

² http://ctb.ku.edu/en



Resource Stability

Sustainability research clearly identifies stable and adequate financing as a pillar of sustainability. Sustaining school health programs without dedicated federal or state funding is a consistent challenge; paired with the reality that the education system does not always embrace health as a core function. Building strong partnerships and securing sustained funding go hand in hand for any community program. Many successfully sustained community programs report that sustained funding was a result of connecting with broad array of partners and policymakers and being in the "right place at the right time." However, leveraging strategic partnerships may be even more important for sustaining school health work, given the economic climate in which they operate. Capacity for school health is an oftencited barrier to successful implementation and sustainability. As such, we recommend funding strategies that translate into staff positions that are explicitly focused on coordinating school health work. Furthermore, demonstrating and communicating results of successful programs to gain new funding and sustain current funding is imperative.

Key components of resource stability include:

- The program exists in a supportive economic climate
- The program implements policies to help ensure sustained funding.
- Program is funded through a variety of sources.
- The program has a combination of stable and flexible funding.
- The program has sustained funding.

¹ Johnson K, Hayes C, Center H, Daley C. Building capacity and sustainable prevention innovations: a sustainability planning model. *Evaluation Program Planning* 2004, 27(2), 135-49.

² The Cornerstone Consulting Group. End Games: The Challenge of Sustainability. Annie E. Casey Foundation. 2002.

³ Basch, CE. Healthier students are better learners: High-quality, strategically planned, and effectively coordinated school health programs must be a fundamental mission of schools to help close the achievement gap. *Journal of School Health*. 2011; 81(10): 650–662.



Strategic Planning

Programs that are sustainable use strategic planning to understand where they are, where they want to go, how they will get there, and how they are making progress. Programs that use evaluation data and stakeholder input to inform their strategic planning process are significantly more sustainable than those that do not. The intentional grounding of strategic planning around lessons learned from the successes and failures of core program strategies has been found to differentiate sustainable organizations from those that struggle financially. ¹

Strategic planning is the process by which all of the other sustainability capacity components are carried out. As such, it lies at the center of the conceptual model for sustainability capacity as it represents the glue that holds them all together. Strategic planning combines elements of all of the sustainability domains into an outcome-oriented plan. Planning also ensures that the program is well aligned with the larger external and organizational environment.

While strategic planning involves developing strategies to achieve a certain goal, it is broader in scope and much more comprehensive than organizational planning. To differentiate the two, consider the "Five Ps of strategy:"²

- **Plan:** Strategy is a planned and purposeful course of intended actions or guidelines for how to get from one place to another.
- **Pattern:** Strategy is a pattern or consistency in actions and behavior over time.
- **Position:** Strategy is position within the context and environment in which the organization operates.
- **Perspective:** Strategy is collective thinking and shared vision/direction by members of the organization.
- **Ploy:** Strategy can also be a specific maneuver to overcome barriers to change.

High-quality strategic plans communicate an organization's shared vision, mission, objectives and action plans, creating a "line of sight" from day-to-day activities to the broader mission and vision. It begins with a firm understanding of an organization or program's strengths, opportunities, weaknesses and threats, and is driven by data and stakeholder input.

- The program plans for future resource needs.
- The program has a long-term financial plan.
- The program has a sustainability plan.
- The program's goals are understood by all stakeholders.
- The program clearly outlines roles and responsibilities to all stakeholders.

¹ York P. The Sustainability Formula: How Nonprofit Organizations Can Thrive in the Emerging Economy. TCC Group.

²Mintzberg, H. (1992). Five P's for Strategy. In H. Mintzberg & J. B. Quinn (Eds.), The Strategy Process (pp. 12-19). Englewood Cliffs, NJ: Prentice-Hall International Editions.