



Society for Public Health Education

Health

EDUCATION

& THE EVERY STUDENT SUCCEEDS ACT

The link between health and academic performance is closely connected and related. Health education in school curricula can reduce risky behaviors and improve healthy behaviors, better nutrition and physical activity. Health education involves promoting behaviors related to a person's wellbeing and can encompass topics such as alcohol and tobacco use and prevention, mental and physical health, injury prevention and other wellness areas.



WHAT IS IN THE EVERY STUDENT SUCCEEDS ACT?

In 2015, President Obama signed the reauthorization of the Elementary and Second Education Act, known as the Every Student Succeeds Act (ESSA), which replaced No Child Left Behind. ESSA aims to encourage more flexibility and innovation in improving education for all students. ESSA emphasizes support for the lowest-performing five percent of schools in the hopes of closing the achievement gap. In addition, ESSA promotes a more grassroots approach to education by encouraging partnerships with community organizations and other public and private entities. With this newly enacted policy, there are no guidelines or framework for health education, which could promote negative health consequences. The ambiguity of ESSA leaves states and local school boards to their own devices to implement, disseminate and evaluate their own health education curriculum.



WHY IS THIS BILL IMPORTANT TO HEALTH EDUCATION?

ESSA included health education as a well-rounded education subject. ESSA provides state and local jurisdictions more freedom - creating a unique opportunity for health educators to collaborate and promote health education in school curricula.



KEY PLAYERS IN THE ESSA

Department of Education

ED cannot mandate that states and local school boards implement a set of educational standards but can still award and administer formal grant funds once the state develops its own standards and measures. Ultimately, the ED can provide guidelines and support states in their efforts, but is unable to implement and enforce regulations.

State Education Agency

State Education Agencies (SEAs) allocate funding and resources for state and federal programs and participate in policy development as well as engage in communication activities.

Local Education Agency

While transitioning to ESSA, Local Education Agencies (LEAs) are still required to continue to implement interventions mandated under NCLB for the 2016-2017 school-year. LEAs are no longer obligated to offer public school choice, attendant parental notification, or supplemental education services during the upcoming school year 3.

Title I Schools

Title I provides federal funding for disadvantaged students and aim to eliminate barriers to academic learning and achievement.

Parent-Teacher Associations (PTAs)

The ESSA removed the requirement that parent be notified if their child's teacher was considered unqualified. PTAs have a unique opportunity to work closely with LEAs and SEAs to advocate for the needs of the student body.

WHAT CAN BE DONE?

With the new legislation, there are several opportunities to promote and support student health. It is important to educate decision makers that health education includes health-related concepts such as disease prevention, psychosocial impacts on wellbeing, and health promotion. Each level in the education system should consider using a health curriculum that incorporates these concepts. SOPHE encourages states to include measures relevant to school climate and safety and any other indicators (i.e. chronic absenteeism, student engagement or peer-to-peer relationships) that meet the requirements. Title I programming flexibility allows health education material into curricula, including evidence-based health and nutrition programs and comprehensive social-emotional support interventions. State and local education agencies are encouraged to use health education indicators - guaranteeing students get age appropriate health education weekly and increasing the percentage of schools requiring health education for high school graduation. Other non-academic indicators include measuring absenteeism due to chronic illness and tracking the percentage of students living below the poverty line. Although flexibility of the ESSA raises uncertainty for education standards nationwide, it also provides a unique opportunity to promote and support health education curricula.