MAPPING THE EARLY ATTENDANCE GAP

Charting A Course for School Success

September 2015

Attendance Works

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Acknowledgements

Foreword

Classroom teachers and school leaders have long considered student attendance in the early grades as one of the more reliable barometers of family stress, distress and functioning. The Chronic Early Absence Project was launched in 2007 to explore whether subpar attendance was more than a reliable sentinel of family-related drama and had academic repercussions as well.

Now eight years in, with the Chronic Early Absence Project having morphed in the highly regarded Attendance Works, the verdict is in. Research, anecdote and common sense all confirm the erstwhile hunch – chronic absence contributes to lower test scores and to the achievement gap. As importantly, work on the ground in school districts, communities and states across the country is producing ample evidence that chronic absence is a complicated, multifaceted but solvable problem.

The call to action embedded in *Mapping the Early Attendance Gap* is timely. The persistence and pervasiveness of the achievement gap are leading some of us to admit that there are a large and growing number of children who are falling beyond the reach of schools. (At least as schools are now understood and configured.) The tens of thousands of children who miss a month or more of school every year are prime candidates for inclusion in this group. For this population, the "wins" that ensure a standards-aligned curriculum taught by highly qualified classroom teachers in good schools with strong school leaders may be irrelevant.

When the issue is student attendance, asserting irrelevance does not evoke the queasiness and pushback reserved for full-blown heresies. Declaring that students won't benefit from even the best classroom instruction on those days when they are absent merely provokes appreciative nods. So does the more nuanced observation that the scaffolding imbedded in teaching and learning allows a compounding effect for each missed day of instruction that could last well into the future. The nods continue, especially with employers, when the habit of good attendance is linked to the "soft skills" that predict productivity in the workplace and success in life.

This common-sense consensus is broad, deep, enabling and strengthened by evidence that health challenges such as recurring asthma and tooth pain are drivers of student absence in the early grades. It can serve as a strong platform and catapult for decision makers and stakeholders who choose to take on the task of finding solutions to chronic absence, ensuring regular attendance in the early grades and bringing more children back within the reach of schools. And this is the audience that *Mapping the Early Attendance Gap* seeks to reach, engage, inspire and mobilize.

Ralph Smith, Managing Director, Campaign for Grade-Level Reading

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Introduction

As we work to close achievement gaps and reduce dropout rates, educators and policymakers often overlook another pernicious problem that is undermining success for our most vulnerable young students: the attendance gap. Across the country, an estimated 5 million to 7.5 million students are missing nearly a month of school and suffering academically for it. The problem starts early: At least 10 percent of kindergartners and first graders miss that much school, absences that can stall their progress in reading and deny them an equal opportunity to learn. Chronic absence flares again in middle and high school, when it becomes an early warning sign that students will drop out. Children from low-income families and communities of color and those with disabilities are disproportionately affected.

This isn't simply a matter of truancy or skipping school. In fact, many of these absences, especially among our youngest students, are excused and tied directly to health factors: asthma and dental problems, learning disabilities, and mental health issues related to trauma and community violence. In many cases, these attendance patterns go unnoticed because schools are counting how many students show up every day rather than looking at how many miss so much school that they are falling behind. While much of our nation's attendance policy focuses on finding and punishing students who miss school without an excuse, not enough attention is paid to preventing excused absences due to health concerns or other family and community issues.

Regardless of the reason for missing school, absenteeism in the early years can set a pattern of academic trouble and poor attendance in later grades. Chronic absence in preschool and kindergarten – defined as missing 10 percent or more of the school year – is tied to reading difficulties and weaker development of the social skills needed to persist in school. In fourth and eighth grades, national assessments reveal consistently lower scores for those who miss too much school, with alarming gaps among some student populations. By ninth grade, absenteeism is a better indicator that a student will dropout than eighth grade test scores. The student populations most affected by chronic absence – those from low-income families or communities of color and those with disabilities – are the same groups that lag behind in graduation rates.

Essentially, these early attendance gaps turn into achievement gaps that create graduation gaps. Poor attendance is among our first and best warning signs that a student has missed the on-ramp to school success and is headed off track for graduation. We must address attendance and its connection to public health early in a child's life.

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To do that effectively, we need to map our attendance gaps, starting with our youngest students. States are uniquely positioned to analyze the data they collect and determine who is missing too much school and why, when students are most likely to be absent and where the problem is most severe. State leaders can shift the focus – and the accountability metrics – from truancy to chronic absenteeism, a measure of how many students miss 10 percent or more of the school year for any reason.

And they can identify and learn from the positive outliers – the schools, districts and communities that improve or maintain high levels of attendance despite challenging conditions. These include places such as New Britain, Connecticut, where school officials cut the kindergarten absenteeism rate nearly in half after realizing that 30 percent of their youngsters were chronically absent. They include Baltimore, where new school-based health clinics are helping students with asthma avoid missing class. And they include rural Del Norte County, California, where school officials are partnering with local tribal leadership to reduce the high rate of absenteeism among American Indian students.

This brief maps the national attendance gap – the who, what, when, where and why of absenteeism – using research drawn from national sources as well as attendance data gathered across states from students taking the National Assessment of Educational Progress (NAEP). Health emerges again and again, both as a challenge and as a solution to improving attendance. Our appendices list NAEP attendance data for every state – broken down by income, race and ethnicity, and disability status – revealing large gaps in some places.

The brief documents how states can use their data to help schools and communities unpack when and why chronic absence becomes a problem in the early grades so that they can put in place solutions that work. States are especially well positioned to advance innovative practice at scale, to create accountability for reducing chronic absence and to promote learning across school districts. This brief recommends five key steps:

Step 1: Make the Case That Chronic Early Absence Matters

Step 2: Map Chronic Early Absence

Step 3: Engage Partners in Unpacking Why Early Absences Occur

Step 4: Learn from Positive Outliers

Step 5: Embed Action into Existing Initiatives

This brief concludes with a discussion about how various stakeholders across sectors can help strengthen state-level capacity to map and address the attendance gap.

Public health officials are fond of saying that disease does not occur at random or by chance, that there are always patterns. The same is true of absenteeism. The national data can point toward those patterns, but local and state leaders must diagnose what is happening in their communities before they can improve school attendance and, with it, achievement.

WHAT: Chronic Absence Is a Hidden National Crisis

With digital records stretching from pre-kindergarten to 12th grade, school districts and states have the ability to see attendance patterns across student groups, schools and communities. Many states and school districts, though, fail to leverage the information in ways that can improve student achievement. Most schools use the information that teachers collect to calculate average daily attendance, a measure of how many students show up each day. But this daily average can hide the fact that many students are chronically absent – missing 18 or more days, enough lost time to pull down academic performance. Even schools with 95 percent daily attendance rates can have dozens of chronically absent students.[i] Likewise, most schools track truancy, or unexcused absences. But truancy does not capture days lost to excused absences or suspensions. And this leads schools and districts to treat absenteeism as a matter of compliance with rules rather than seeing it as the vital early warning sign it can be.

Defining Terms

Average Daily Attendance: The percentage of a school's student body that attends on a typical day. The definition is the same nationwide, but does not provide student-level data.

Truancy: A measure of how many students miss school without an excuse. The definition varies from state to state.

Chronic absence: A measure of how many students miss a certain percentage or number of days, including excused and unexcused absences and suspensions. Researchers often track 10 percent of the school year, but there is no common definition among states.

Poor Attendance in NAEP: Missing 3 or more days in the month before the assessment.

WHEN: Chronic Absence Starts Early

Much has been written about the direct correlation between high school chronic absence and dropout rates. Recent research, though, suggests that attendance trends starting in first grade can predict graduation rates.[ii] Jason Schoeneberger's 2012 study, *Longitudinal Attendance Patterns: Developing High School Dropouts*, shows four distinct patterns of absenteeism in a large urban school district and how they influence whether a student will drop out.[iii] On the chart to the right, the blue line along the bottom represents students with satisfactory attendance

Trajectories in Early Grade Attendance

Group 1 (79.3%) Group 2 (9.8%) Group 3 (7.6%) Group 4 (3.4%)

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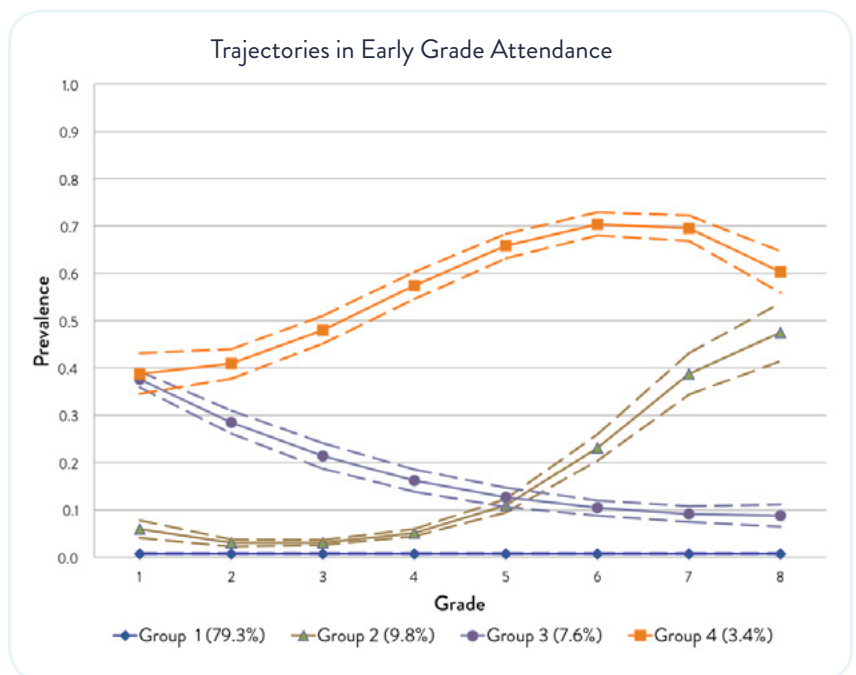
throughout elementary and middle school. Fewer than 5 percent of these students go on to drop out of high school. The green line shows those who start out with good attendance but begin to disengage and become chronically absent as they grow older. Nearly a quarter of them will eventually drop out, the highest level among the groups. The orange and purple lines represent trajectories for students who start out with poor attendance. The purple line shows those who improve their rates significantly by eighth grade, while the orange line indicates children for whom attendance becomes increasingly worse: 20 percent of those chronically absent students will drop out, compared with 10 percent of the students who turned around their attendance. Essentially, these students doubled their chance of graduating by improving their attendance. This study shows the importance of building good attendance habits in the early grades and continuing to attend regularly through middle school. It also shows that early chronic absence is not destiny: Children improve their chances for graduation when they improve attendance.

This is no small problem. The youngest students – those in preschool and kindergarten – have absenteeism rates nearly as high as teenagers. National estimates suggest that one in 10 kindergarten and first grade students misses 18 or more days of the school year, or nearly a month.[iv] Children who never attended preschool are more likely to be chronically absent in kindergarten, a new national study shows.[v] So are those who were chronically absent in preschool.[vi] Most state studies of chronic absenteeism show a similar pattern: high rates in the early years dipping down in the elementary years before rising sometime in middle school and then accelerating in high school.

These missed days in the early years can add up to weaker reading skills, higher rates of retention and lower attendance rates in later grades.[vii] This is especially true for children from low-income families, who depend on school for literacy development. Absences as early as kindergarten can also affect the development of the social skills needed to succeed in school, such as persistence.[viii] Essentially, many of these children fail to make the critical transition from learning to read to reading to learn by fourth grade. That increases the chances that they will fall behind in all their classes by middle school and ultimately drop out in high school. Research shows that children who aren't reading proficiently in third grade are four times more likely to leave school without a diploma.[ix]

Another critical juncture for absenteeism is the transition to high school. A study in Chicago that followed students through the transition found that the same students missed three times as many days in ninth

grade as they did in eighth grade. Among this age group, more absences are unexcused.[x] Similarly, analyses of attendance data from multiple states show big increases in absenteeism when students reach high school. At the same time, school districts have found that a concerted effort to reduce these absences can increase the likelihood that students will graduate on time.[xi xii]

WHY: Health Plays a Key Role in Absenteeism

Any school attendance clerk can share the countless reasons that students and parents give for missing school. But research and practice suggest three chief causes for chronic absenteeism: misconceptions about the importance of regular attendance, aversion to showing up for class, and barriers to reaching school every day. Health considerations – whether physical or mental – play a part in all three.

The misconceptions or myths often come into play in the early grades when families don't realize how important it is for children to attend school every day possible. They may pull children out of school for family vacations or simply for convenience sake. In addition, some parents don't always know when a child is too sick for school and don't have the guidance they need from school or health providers. What's more, some children complain of a stomachache when they are actually nervous about going to school, a sign of aversion that can be hard to recognize. Other families don't believe absences are a problem unless they are unexcused or all in a row. They don't realize that sporadic absences, for any reason, can add up to academic trouble. Older students, likewise, don't always recognize the connection between good attendance and graduation. Half of the middle and high school students surveyed believe they could miss school one day a week and not suffer any academic consequences.[xiii]

Absences due to aversion can result from bullying situations at school or on the way to school. They can occur when students experience undiagnosed learning disabilities and feel that they cannot succeed. Anxiety and depression can also prompt students to stay home. Maternal depression can contribute to absences in the early grades, since these children depend on the adults in their lives to get to school.[xiv] Families will sometimes report these sorts of absences as sick days. Older students may simply skip school.

That said, health remains a significant barrier to school for many students. Young children with unmanaged chronic health conditions are more likely to miss class because of the symptoms of their illness or because they are receiving medical treatment during the school day.

Why Do Students in Central Texas Miss School?

Acute Illness	48%
Skipping	5%
Chronic Illness	4%
Family Emergency	4%
Routine Dental Appt	3%
Preventative Medical	2%
Travel	2%
Mental Health Issue	2%
Suspension (not ISS)	1%
Family Responsibility	1%

Source: E3 Alliance analysis of absence data from 9 schools in PISD & HCISD, 1/14/13-3/8/13

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A detailed study of more than 23,000 missed days in several central Texas school districts found that 48 percent of absences were caused by acute illness, 4 percent by chronic illness and 3 percent by routine dental appointments. Only 5 percent were attributable to skipping school, though researchers acknowledged that could be an undercount. Absences spiked during flu seasons across several districts.[xv]

Among the leading causes nationwide are:

- **Asthma.** Nearly one in 10 children (9.9 percent) ages 4 to 14 are diagnosed with asthma.[xvi] Asthma is a leading cause of school absenteeism, accounting for about 14 million absences each school year, or one-third of all days of missed instruction. Children with persistent asthma are more than three times as likely to have 10 or more absences than their peers.[xvii] Asthma can be exacerbated by factors in the school environment, particularly mold and harsh cleaning chemicals that impact indoor air quality. Yet it doesn't have to be this way: Research show that creating healthy indoor environments and providing adequate levels of school nursing can all but eliminate the disparity in attendance between students with asthma and their peers.

- **Oral health.** A full 20 percent of children ages 5 to 11 have at least one untreated decayed tooth.[xviii] Among school-age children, tooth decay is the most common chronic disease, five times more prevalent than asthma. Children between 5 and 17 years miss nearly 2 million school days each year nationwide due to dental health problems.[xix] Children with poor oral health are nearly three times more likely than their counterparts to miss school as a result of dental pain. Tooth decay and dental pain are easily treatable if students have access to dental care; the consequences of leaving such pain untreated are significant not only for the children's lifetime health but also for their education. In California, a cost-effective model called tele-dentistry is delivering X-rays, check ups and fluoride treatments to children at school.

Of course, the problem of health-related chronic absence goes far beyond these two issues. Research indicates that other common health conditions resulting in missed school include Attention Deficit Hyperactivity Disorder (ADHD), influenza, diabetes, obesity, seizure disorders, mental health and anxiety, and vision problems.[xx] Health-related factors such as food insecurity, unhealthy housing and violence in the community also play a significant role. Some children miss school simply because they don't have the immunizations required for enrollment.

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Compounding the problem is the fact that many students do not have access to healthy school environments. For example, less than half of the nation's students have access to a full-time school nurse or school counselor, and fewer than 5 percent have access to a school-based health center.[xxi][xxii] In addition, one in five schools in the United States reports unsatisfactory indoor air quality, a known trigger of asthma attacks.[xxiii]

Despite the scale of this problem, we must remember that chronic absence related to illness is not an inevitable fact of childhood. There is much that can be done – by the education community, by the public health community and by the medical community – to relieve the lifelong burden it places on young children. Health providers are especially well positioned to help unpack and identify what is contributing to chronic absence because they see young children regularly, consult with parents about illness and can talk to families in a non-confrontational way about other challenges they face.

For instance, some students miss school when their families move frequently or become homeless.[xxiv][xxv] Transportation also presents a problem, especially among rural students reliant on school buses and among urban children dependent on public transportation. Challenging work schedules for parents can also make getting to school more difficult, particularly for young children. These challenges fall particularly hard on certain student populations, leading to persistent attendance gaps across the country.

WHO: Student Populations Most Affected

Chronic absence does not affect all students equally. In many cases, those who need school the most are attending school the least. The impact becomes clear in the gaps that appear on national testing. Although nationwide data on school absenteeism does not yet exist for schools and districts, a snapshot of attendance data from fourth and eighth graders taking the NAEP suggests that poor attendance is a significant problem affecting all states and dragging down achievement for the students least likely to graduate.

Students taking the NAEP are asked how many days they missed in the month prior to the test, typically taken from January to March. While the information is self-reported and limited to a single month, the results nonetheless reflect many of the achievement and demographic trends found in research involving data from the entire year. An analysis of two years of testing data shows that students who said they missed three or more days in that month scored 12 to 18 points lower on the NAEP than students with good attendance. Researchers estimate that 10 points on the NAEP achievement scale translate to one equivalent grade in student performance between grades 4 and 8. This achievement gap occurred in every state and city where the test was administered in 2011 and 2013. The brief notes the states with the widest gaps among student populations to signal that they should examine their attendance data for a fuller picture of what is happening. Several of these states are already tracking their data and working hard to reduce absences. See Appendix A for NAEP data charts. The data reveal:

Low-income students face an attendance gap in all states.

The 2015 *Building a Grad Nation* report makes a simple assertion: "Graduating on time is the norm for middle- and high-income students, but not for their low-income peers." The NAEP data show corresponding gaps in

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attendance and achievement years before graduation, using eligibility for federal lunch subsidies as a marker for poverty. An analysis of 2011 and 2013 NAEP data shows that 23 percent of low-income fourth graders missed three or more school days in the month prior to the test, compared with 17 percent of their peers.[xxvi] In some states the gaps were wider than in others. In eighth grade, the gap widened to 8 points: 24 percent for low-income students and 16 percent for others. This attendance gap starts as soon as children begin school. A national study found that low-income kindergartners were four times more likely to be chronically absent than their more affluent peers.[xxvii]

For all students, rich or poor, higher absenteeism correlates with lower scores on the NAEP. Low-income fourth graders with poor attendance scored 9 percentage points lower than those with perfect attendance. For fourth graders from more affluent families, the difference was 8 points.

Absenteeism rates among low-income students often reflect the challenges that accompany poverty, such as unstable housing, unreliable transportation and little access to quality health care. For instance, students in schools with high concentrations of poverty are less likely than other students to have recess and high-quality physical education.[xxviii] In addition, high-poverty schools are less likely than higher-income schools to have a school nurse and a more likely to have a higher student-to-nurse ratio.[xxix] Low-income students are twice as likely as their peers to suffer from untreated tooth decay,[xxx] and a Centers for Disease Control and Prevention survey found that low-income children are more likely than other students to miss school because they fear for their safety, a symptom of what some consider the toxic stress of living in neighborhoods with high concentrations of poverty.[xxxi]

Often, more than one risk factor is at play. A 2014 study of New York City schools identified 18 indicators of "deep poverty" that affect student achievement and correlated with chronic absence. These included adult education levels, the percentage of students living in public housing or homeless shelters, and teacher turnover, among others.[xxxii] It is not always clear whether these risk factors cause absenteeism or merely correlate with it. But in each case they predict that chronic absence could become a problem.

The problem is particularly acute for children in the early grades. Missing critical literacy instruction in kindergarten and first grade has more dire consequences for children from low-income families than for their more affluent peers, one study found.[xxxiii] Tapping a national database, researcher Douglas P. Ready found that chronically absent children gained 14 percent fewer literacy skills in kindergarten than those who attended more regularly. The negative impact, though, was 75 percent greater for a low-income student in kindergarten than for more affluent peers. A study of 25,000 preschool students in Chicago found effects on kindergarten readiness scores, including letter recognition and pre-literacy scores. The effects were particularly pronounced for the children who arrived at preschool with the weakest skills.[xxxiv]

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American Indian students have the highest rates nationally.

The NAEP figures show the highest rates of absenteeism nationally are among American Indian students, with 29 percent of fourth graders and 30 percent of eighth graders missing too much school, 10 percentage points higher than for white students. This gap starts early: American Indian kindergartners miss twice as many days as their white peers, a national analysis shows. The absenteeism rates reflect other troubling indicators. In the seven states with the highest concentrations of American Indian students, graduation rates are below 50 percent for this population, a figure that remains intractably low. The population has seen little improvement on NAEP scores for fourth and eighth graders in the past decade, even as other racial and ethnic groups improved their scores.[xxxvi]

Experts and educators cite two key reasons for poor attendance among American Indians. First, many of these students live in poverty and face the challenges that all low-income children experience in getting to school. Second, the American Indian population shares a deep distrust for public schools, given efforts in the past century to pull children off reservations and send them to boarding schools where they were forbidden to speak their tribal languages or practice their customs. Abuse, illness and even some deaths accompanied this failed attempt at assimilation.

"To this day, there is still a great deal of distrust," Danielle Grant, Executive Director of Education and Cultural Services and Indian Education for Minneapolis Public Schools and a member of the Turtle Mountain Ojibwe tribe, said in an interview with Attendance Works.[xxxvii] "The education system is still seen by many American Indians as trying to make us less Native, and more like the mainstream, and that makes for a complicated relationship."

Grant launched an initiative called Dream Big Minneapolis to engage Indian students, families and community organizations in reducing absenteeism. In the past three years, the percentage of Indian students attending school 95 percent of the time increased from 36 to 54 percent; the graduation rate rose from 17 to 32 percent.

Black students are more likely to have poor attendance rates than white students.

An analysis of NAEP data from 2011 and 2013 shows that 22 percent of black fourth graders and 23 percent of black eighth graders missed too much school, compared with 19 percent of whites. The gaps were wider in some states. Nationwide, the gap started as early as kindergarten, where black students missed more days than their white peers did.

Again, the gap in part reflects the fact that a higher percentage of black students live in poverty and face challenges in getting to school every day. But other issues are at play. Black children are more prone to some

health conditions. For instance, they are 1.6 times more likely than white students to suffer from asthma. Rates for emergency room visits and hospitalization for asthma are also higher among black children.[xxxviii]

At Tench Tilghman Elementary School in Baltimore, Stephanie Godbolt described how her grandson's asthma kept him out of school for nearly a week every month. After the school put in place a full-service health clinic, the nurse helped bring the boy's asthma under control, and his attendance improved. Children at the K-8 school also receive free dental services on campus. "Students can go to school and not worry about having an asthma attack," said Brittany Beth, a U.S. Department of Education official who toured the facility. "When mom can't take them to the doctor, they are covered, and the dental services they receive twice each year might be the only dental services they get."[xxxix]

Beyond health concerns, black children are more likely to be suspended from school, losing valuable instructional time because of disciplinary infractions. Federal data show that black students are suspended and expelled at a rate three times greater than that for white students. On average, 5 percent of white students are suspended, compared with 16 percent of black students. This is true even in preschool: black children represent 18 percent of preschool enrollment but 48 percent of the preschoolers receiving more than one out-of-school suspension.[xl]

Hispanic students are more likely to have poor attendance rates than white students.

The attendance patterns among Hispanic students are similar to those of blacks, although these children face some unique challenges. The NAEP analysis shows that 21 percent of Hispanic fourth graders and 22 percent of eighth graders missed too much school, compared with 19 percent of white students. Likewise, a national study shows Hispanic kindergartners missing more days than their white classmates. What's more, the study suggests that the impact of these kindergarten absences was greater for Hispanic children: Those who missed too much time in kindergarten had significantly lower reading scores than their peers, even when compared with other chronically absent students.[xli]

Like black students, Hispanic children are more more likely to be exposed to certain health issues and more likely to be suspended from school than other students. But this population has unique challenges that affect attendance, especially among recent immigrants. These include:

- **Language difficulties:** Some English language learners attend school regularly when they are younger but become disengaged from school if the instruction does not meet their educational needs, and they don't master higher level academic skills. If this occurs, ineffective instruction in the early grades can lead to poor attendance and eventually failure to graduate.[xlii]

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- **Visits to home countries:** Some Hispanic families have a tradition of returning to their home countries for weeks at a time to ensure that their children remain connected to family and culture. These extended trips take a toll on attendance and achievement.

- **High mobility:** Children whose parents are migrant farmworkers move frequently, disrupting their education several times a year. Other immigrant families who are in the country without proper documentation may move or keep children out of school to avoid detection.

Advocates who work with Hispanic communities say educating families about the consequences of chronic absenteeism is critical to turning around attendance. "When parents get the information about chronic absence and someone actually communicates to them and helps them understand the consequences, they'll be the first champions to see that their child is in school," said Oscar E. Cruz, president and CEO of Families in Schools. The nonprofit builds information on attendance into its parent training sessions.

Where Are the Widest Gaps?

NAEP data show that some states have wider gaps in high absenteeism rates between Hispanic and white students.

4TH GRADE

Connecticut	Rhode Island
New York	

8TH GRADE

Connecticut	New Hampshire
Massachusetts	New York
	Rhode Island

Students with disabilities are more likely to miss too much school than others.

Where Are the Widest Gaps?

NAEP scores show that some states have wider attendance gaps between students with disabilities and others.

4TH GRADE

Connecticut	New Jersey
Hawaii	

8TH GRADE

Alabama	Delaware
Hawaii	North Carolina
Michigan	

Students with disabilities have among the lowest graduation rates, with about 62 percent graduating in 2012-13, nearly 20 points below the national average. Attendance gaps show up in the fourth- and eighth-grade NAEP data, which reflect that 25 percent of fourth graders and 27 percent of eighth graders identified as needing special education miss too much school, compared with 19 percent of other students in both grades. A national study comparing elementary school absenteeism in 10 districts across the country found consistently higher rates for this population.[xliii]

Some of these absences can be attributed to the health concerns of physically disabled students, but others occur because of the lack of appropriate educational placements, bullying or school aversion that can affect learning-disabled children, particularly those with emotional issues. In addition, students with disabilities are more than twice as likely as other students to receive an out-of-school suspension.[xliv]

There is surprisingly little research about absenteeism among disabled students or the best practices for turning around attendance in this population. Pat Halle, an advocate in the Maryland Disability Law Center, supports using attendance as an element in the individualized education programs required for special education students and making afterschool programs more inclusive for these children. "Attendance is a piece of the difficulty in getting access to quality instructional programs for students with disabilities," she said.

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HOW: A Five-Step Approach for Closing Attendance Gaps

Taken together, the NAEP survey data and other research reveal significant attendance gaps that are eroding achievement for many of our most vulnerable students. While absenteeism is clearly an issue in the later grades, the problem has its roots in a student's early years and is inextricably linked both to the health of the student and the health of the community. Until we address these gaps we will not succeed in breaking the cycle of poverty that traps so many low-income children. And we will not offer all of our children an equal opportunity to learn.

The remainder of this brief focuses on steps that states can take to reduce chronic absence and narrow these gaps. The steps focus on state policy and practice, because they are essential to ensuring that chronic early absence is addressed at scale, not just in isolated pockets of innovation. State-level action can ensure that local schools, districts and communities are aware of what chronic absence is and why it matters, use their data to identify who is most affected, and have access to the most effective tools and strategies. States can take the following steps to make a difference:

Step 1: Make the Case That Chronic Early Absence Matters

Step 2: Map Chronic Early Absence

Step 3: Engage Partners in Unpacking Why Early Absences Occur

Step 4: Learn from Positive Outliers

Step 5: Embed Action into Existing Initiatives

The section below provides an overview of what we mean by each of these steps and offers concrete examples of what these concepts look like in practice. We especially draw upon insights from colleagues in states participating in Attendance Works' Network for Advancing State Attendance Policy and Practice and the Campaign for Grade-Level Reading's (GLR) Advisory Committee for Ending Chronic Absence. Representing a demographically, geographically and politically diverse mix, the states involved in the Advisory Committee – California, Connecticut, Maryland, New Mexico, Ohio, Rhode Island and Utah – have departments of education committed to working with the GLR campaign and Attendance Works to test and demonstrate how state action can make a difference.

To gain a deeper understanding of how these concepts can be applied, see these state profiles depicting the attendance journey of different states. Profiles will be added and updated over time.

Finally, the brief concludes with recommendations describing how stakeholders across different disciplines and sectors can strengthen state capacity to map and address the early attendance gap.

Step 1: Make the Case That Chronic Early Absence Matters

Inspiring action starts with being able to make the case to key stakeholders that chronic early absence is a matter of concern. That requires securing the data to show impact and scale, and engaging key champions to spread the word.

Using data to show why chronic absence matters

General Resources: The Attendance Works website provides easy access to research documenting what chronic absence is, how it is masked by truancy and average daily attendance figures, and what the consequences are from preschool through high school graduation. The resources draw from research conducted with national data sets as well as from studies carried out in various states and communities throughout the country.

State data: While this research is helpful, it is not as powerful as having state and local data to demonstrate the effects of chronic early absence. A growing number of states have completed longitudinal research showing that early chronic absence predicts lower academic performance in later grades.

The Rhode Island Data Hub, for example, produced this online brief with state-specific findings showing that children who were chronically absent in kindergarten lagged behind in later grades compared with children who attended kindergarten regularly. The chronically absent cohort:

- Were 20% less likely to score proficient or higher in reading.

- Were 25% less likely to score proficient or higher in reading

- Were twice as likely to be retained in grade.

- Were twice as likely to be suspended by the end of seventh grade.

- Were more likely to continue being chronically absent.
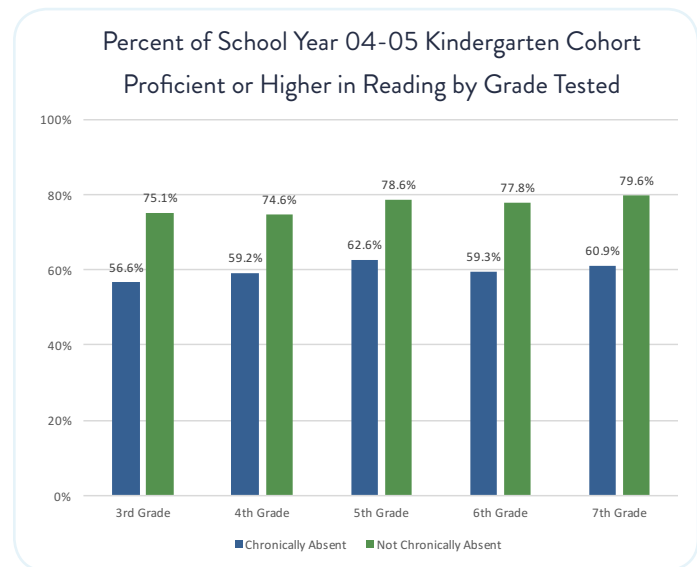
The brief also made clear that high levels of chronic absence were being hidden when schools and districts paid attention only to average daily attendance and truancy.

Most states now have data in their longitudinal student data systems that would allow for similar analysis.[xlv] Even in the handful of states that aren't collecting attendance data, similar studies can be done in local districts.

Percent of School Year 04-05 Kindergarten Cohort Proficient or Higher in Reading by Grade Tested

Grade	Chronically Absent	Not Chronically Absent
3rd Grade	56.6%	75.1%
4th Grade	59.2%	74.6%
5th Grade	62.6%	78.6%
6th Grade	59.3%	77.8%
7th Grade	60.9%	79.6%

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Different groups are positioned to analyze and publish such research. For example, in Georgia, Hawaii and Connecticut, the state departments of education produced their own analyses of the impact of poor attendance on achievement. In Indiana and Utah, universities headed up the effort. In Rhode Island, the work was carried out by the Rhode Island Data Hub coalition, which includes the state Department of Education, other state agencies and The Providence Plan, a joint effort of the City of Providence and the state to promote better collaboration among government, the private sector and academic institutions. In Oregon, a data analysis was initially released by a consortium of advocacy groups. The Oregonian newspaper then significantly promoted public awareness with a second analysis and series of articles. In many states, organizations funded by the Annie E. Casey Foundation's KIDS COUNT initiative are well positioned to conduct analysis and make the case since their core mission is to provide data to inform policymakers and advocates.

NAEP attendance data: Every two years, the National Assessment of Educational Progress draws state representative samples of about 2,500 students in grades 4 and 8 and asks the students about the number of days they were absent the prior month. Appendix A contains state-specific data showing the prevalence in certain student populations as well as the connection to lower test scores. It is not, however, a substitute for a state examining its own data. This NAEP attendance data are drawn from a representative sample, not a universal sample, of two years of data of fourth and eighth grade students from participating states. In addition, the NAEP survey takes place in the winter and early spring when the flu season is at its height, so absences may be especially high. It does provide a means of comparing rates among states. In Spring 2016 the U.S. Department of Education's Office for Civil Rights will produce full-year data showing how many students missed 15 days a year in districts across the country.

Engaging key champions

Since data alone is not sufficient to make the case, a critical early step is identifying key champions who can engage other critical stakeholders. Often champions need to be secured before or at the same time that local data is being generated. Typically the work is strongest when champions exist in multiple sectors and at multiple levels. Below is an initial list of possible champions along with the role they can play in generating attention and action.

- **State Departments of Education:** The support and leadership of the chief state school officer and his or her staff is essential in ensuring that educators and the broader community realize that reducing chronic absence is essential to improving educational outcomes, especially for the students at highest risk.

- **Elected Leaders:** Governors and other elected officials, especially legislators, can play a key role in raising awareness of chronic absence, using their office as a bully pulpit, promoting relevant legislation and calling for a variety of stakeholders to work together to find solutions.

- **Local School Districts:** Local districts can impact state policy, especially if they can demonstrate what works to reduce chronic absence and then use their experience to inform state policy and demonstrate that this issue already has traction at the community level.

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- **Advocacy Organizations and Coalitions:** Children's advocacy organizations, individually and organized into strong statewide coalitions, can educate policymakers and use tools such as state KIDS COUNT report cards and special briefs on chronic absence to generate attention from state policy makers as well as the media.

- **Parent Organizations:** Parent-teacher associations and other organizations can advocate for better policy and practice in school districts. They can also encourage families to support each other in getting children to school, as well as partner with schools to identify and address common attendance barriers.

- **Juvenile and Criminal Justice System:** Historically, attendance has been seen as the purview of the legal system since truancy (unexcused) absences are treated as a legal matter that eventually can lead to a child and the family being taken to court. Leaders from the legal system, including the state Attorney General and influential judges, can call for paying attention to chronic absence as a key tool in preventing the need for more expensive court intervention and reducing crime in the community.

- **Health Agencies:** Health agencies can expand awareness that chronic absence is an indicator of the need for school-linked health services and a problem that can affect the well-being of an individual and the entire community. They can shed light on how health challenges can lower the chances of academic success and how lower levels of educational attainment in turn lead to worse long-term health outcomes.

- **Philanthropy:** Philanthropy, whether family or corporate foundations or organizations such as United Way, can commission research or convene stakeholders and cultivate interest through their grant-making efforts.

- **Business:** Businesses can help the public and other key stakeholders understand how improving attendance is essential to a healthy, thriving economy. When students are absent, parents are less likely to be at work. Cultivation of students with good attendance is essential to having a future workforce with the needed hard and soft skills.

- **Universities:** Universities can use their credibility and capacity to produce well-designed longitudinal research demonstrating why chronic absence matters.

As the state profiles illustrate, the work can start with one or two champions who then reach out to other key partners. Often the work moves in concentric circles, expanding to new partners as the work evolves. Multiple champions become increasingly essential to ensure sustainability beyond the inevitable shifts that occur in key leadership positions.

Step 2: Map Chronic Early Absence

Understanding where, when and for whom chronic absence is a problem is essential. Knowing who is affected allows educators and community partners to target interventions to those most in need. States can promote more effective and efficient allocation of resources by monitoring which districts, schools, grades and subpopulations are experiencing the highest levels of absenteeism.

Tracking chronic absence by grade level and student population

Special care should be taken to ensure monitoring of chronic absence by grade starting in kindergarten or even preschool, even if going to school is not mandatory for these children. Keep in mind that overall school or district chronic absence rates can easily mask high levels of chronic absence in particular grades. For example, in elementary schools, chronic absence is typically highest in preschool, kindergarten and first grade, while the best attendance rates generally occur in third through fifth grade. The low levels of chronic absence in those upper elementary grades often hide the problem facing the youngest students. Consider, for example, the trends revealed by the data in the 2015 Rhode Island KIDS COUNT Factbook.

Chronic Absence Rates in Rhode Island by Grade, 2013-2014 School Year

Grade	Rate
Kindergarten	16%
1st Grade	12%
2nd Grade	10%
3rd Grade	10%
4th Grade	9%
5th Grade	10%
6th Grade	12%
7th Grade	15%
8th Grade	17%
9th Grade	22%
10th Grade	22%
11th Grade	24%
12th Grade	28%

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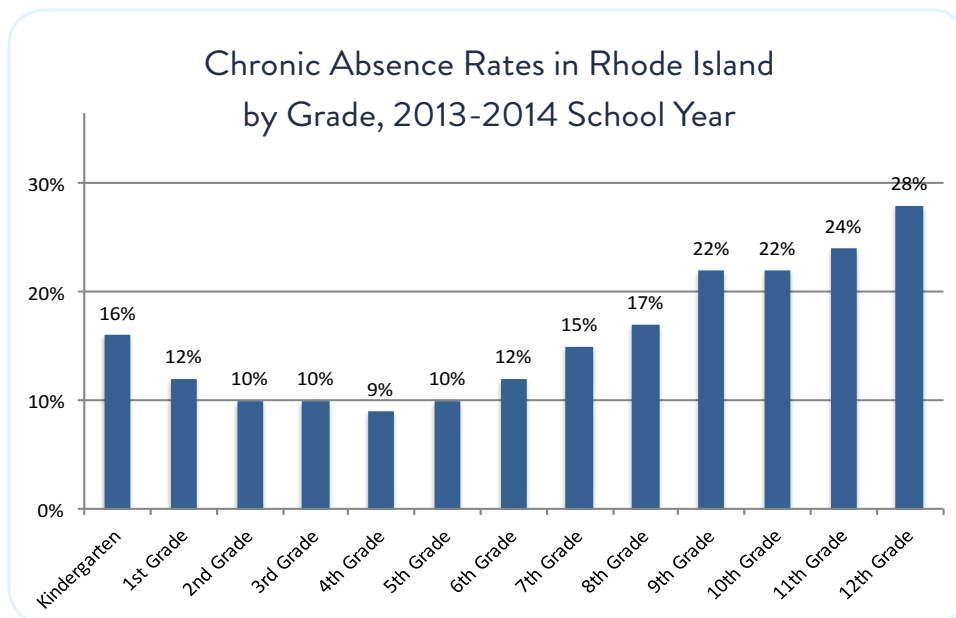
In addition, it is critical to examine patterns of chronic absence by grade for each key student population. An analysis of Oakland, California, data reveals especially high rates of chronic absence in kindergarten, particularly for black students. They also demonstrate the importance of looking at both the percentage and the number of chronically absent students. Any response would need to take into account the large number of Hispanic kindergartners missing too much school even though their rate of chronic absence was not as high as that of some other ethnic groups.
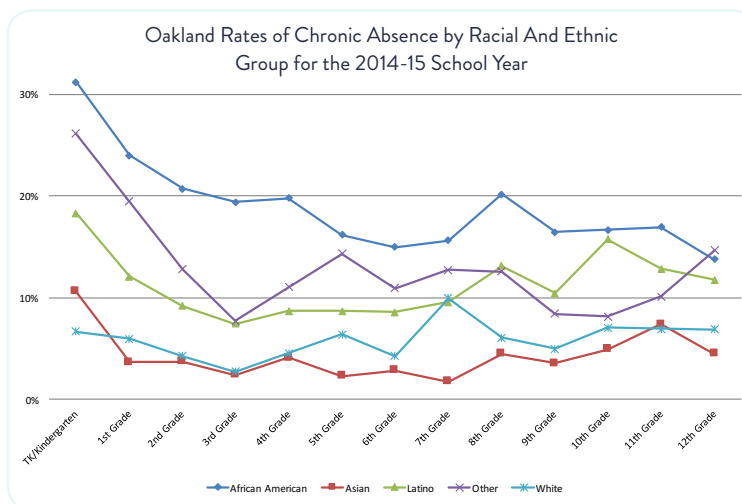
By contrast, in Rhode Island, data found that the overall rate or percentage of children chronically absent was generally highest for Hispanic (26 percent) and American Indian (28 percent) students. These two groups also had the highest percentage of chronic absence in kindergarten, first and second grades, with black students having the third-highest level in the early grades. But just looking at percentages is not sufficient, given the varying ethnic populations represented. In fact, the largest number of students who are chronically absent are white students, who still make up the majority of Rhode Island's students. In the 2014-2015 school year, 10,736 white students were chronically absent, compared with 8,629 Hispanic, 2,248 black and 256 American Indian students.
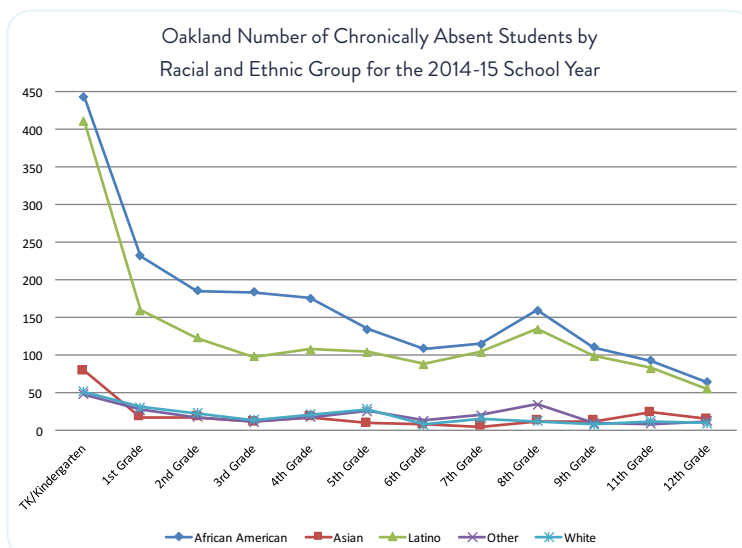
Rhode Island's information also suggest that absences reflect the challenges faced by children living in poverty: Low-income students had a level of chronic absence three times greater than that of their more affluent peers, starting in kindergarten.

Sharing the data collected

Ideally, information about overall levels of chronic absence is easy to access, preferably online so that community partners can identify which schools and students might benefit from their support. Chronic absence data are a key indicator for parents, offering clues about what is happening in their children's schools. As long as the identity of individual students remains anonymous, such aggregate data reports can be shared without concern for violating confidentiality protections.

Oakland Rates of Chronic Absence by Racial And Ethnic Group for the 2014-15 School Year

Oakland Number of Chronically Absent Students by Racial and Ethnic Group for the 2014-15 School Year

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A growing number of state departments of education have begun to calculate and share data on chronic absence. Individual school and district rates are available online in a number of states, including Hawaii, Ohio, Maryland, New Jersey and Rhode Island. The state with the longest history of providing this information is Maryland, which has published the number and proportion of students who miss 20 or more days for students in first through 12th grade. This data, along with information about average attendance and how many students miss fewer than five days of school, has been collected since 1993 and made available online for every school and district since 2004.

California is one of six states that does not collect attendance data in its longitudinal student data base. But the state now requires school districts to include chronic absence rates in Local Control Accountability Plans, which are available online and must be submitted to county offices of education in order for districts to receive funding under the state's relatively new Local Control Funding Formula.

Within California, the extent to which districts use and publicize this data varies widely. Oakland Unified School District has among the most developed set of practices. Any interested stakeholder can now go online here to see chronic absence levels district-wide, by grade and student population, including ethnicity and gender. In addition, users can review the same data for any school as part of a comprehensive data report that also covers other metrics for achievement, school climate and discipline. School staff members have access to weekly reports showing levels of chronic absence and offering a list of students who need extra support.

The Connecticut State Department of Education has begun producing chronic absence reports for 30 school districts targeted for school improvement. These reports offer a picture of chronic absence by school and grade and how it has changed over time. The state also produces a comprehensive chart of chronic absence levels by grade across all 30 districts. This comparison allows the state, as well as local districts, to see which districts appear to be struggling most or improving relative to their peers.

In Utah, Voices for Children, the KIDS COUNT grantee, released data documenting the variations in chronic absence across counties. This information was first released through its report Attendance and Early Grades: A Two-Generation Issue, which also offered important background information about why chronic absence mattered, what were the causes and an overview of how it can be addressed by taking a two-generation approach. The group then released updated chronic absence figures this past year through its annual KIDS COUNT data report.

Rhode Island KIDS COUNT has included indicators on early chronic absence and for middle and high school chronic absence in its annual *Rhode Island Kids Count Factbook* since 2010. The *Factbook* indicators use data from the state Department of Education (RIDE) which is presented for Rhode Island as a whole, for the four core city school districts, and for each of the state's 36 school districts. KIDS COUNT and RIDE work in close partnership on the issue of reducing chronic absence by collaborating on data analysis and presentation and by convening key stakeholders to address the issue.

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These examples illustrate the varied roles that state departments of education can play. Ideally, the department would calculate and publish data on chronic absence at least annually. Such a statewide approach would ensure that the metric is being calculated in a consistent manner for purposes of comparison, and allow for tracking attendance rates for highly mobile students who are moving across school districts. If a statewide approach is not possible, states can require school districts to calculate and report chronic absence levels and provide technical assistance. For example, the California Department of Education, the Californians Dedicated to Education Foundation, the California County Superintendents Educational Services Association and Attendance Works are working together to help county offices of education gain the skills and expertise needed to help their districts address chronic absence.

In all states, it is also important to build the capacity of districts and schools to develop early warning systems. These systems, which also monitor behavior and coursework indicators, trigger alerts as soon as a student shows signs of chronic absence. This allows school staff and, ideally, community partners to work together to get students back in school before they have missed so much instruction that they need academic remediation. The New Mexico Public Education Department, for example, is launching an Early Warning System Dashboard for grades K-12. The dashboard will flag when students attend school less than 90 percent of the time, along with other key data points related to behavior, course performance, student demographics, state assessment scores and special education services. The state is phasing in implementation, with a set of pilot districts and schools starting in Fall 2015 and statewide implementation anticipated in 2016.

Step 3: Engage Partners in Unpacking Why Early Absences Occur

To develop effective solutions, states should support schools, districts and communities in unpacking why students miss school in the first place. Determining the unique barriers faced by a particular family, school and community is critical. Interventions are most effective when they respond directly to the issues that are preventing students from getting to class. A variety of partners, especially parents and the students themselves, can help unearth the reasons for absenteeism.

This brief pays particular attention to the value of focusing on health-related causes of absence and leveraging the power of health partners to understand why students miss school. For young children especially, many absences are excused with parents reporting that their child was sick.[xlvi] It is also true that children miss school as a result of health challenges often related to asthma, oral health, trauma, poor nutrition or lack of access to needed medical care. Yet young children often miss school unnecessarily because parents don't realize that their children are not too sick for school. Or parents may not realize that a stomachache is a sign of anxiety that could and should be addressed by helping their child become accustomed to the school environment.

The health issues impacting student attendance vary greatly among communities and even within subpopulations of a community. For example, while the overall rate of childhood asthma in California is 15.4 percent, levels range from 5.8 percent in San Benito County to 32.5 percent in Merced County.[xlvii] While the overall childhood asthma rate in Chicago is about 13 percent, rates by neighborhood vary from near zero to 44 percent.[xlviii] To better understand the primary health issues impacting student attendance, it's key to unpack the data at a local level.

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States can play an important role in making sure that schools, districts and communities understand the connection between student health and attendance and have the resources necessary to access health data for their community and address the health-related causes of chronic absenteeism. Education departments can partner with state health departments to engage public health leaders on the local level.

The size and scale of the problem can offer clues about the nature of the attendance challenges. If only a small number of students are chronically absent, then issues are more likely to be individual in nature. When chronic absence affects large numbers of students in a particular school or neighborhood, it is often an indication of systemic challenges.

States can support schools, districts and communities in understanding the health-related causes of chronic absenteeism through the following strategies:

Offer guidance to help schools and districts partner with community stakeholders, especially health professionals.

States can identify key stakeholders in the community whom schools can work with to understand and address the health-related causes. While a variety of community partners can assist in this regard, health professionals are uniquely positioned to help because they know when children should stay home due to illness. In addition, families may be more open with a health provider about the challenges they face because they perceive the provider as a support, not a threat. States can ensure that schools know how to identify the health professionals and other partners in their community and provide them with guidance on how to engage in reducing chronic absenteeism.

Local health providers can also play a key role in communicating the importance of attendance and flagging any health factors keeping children from school. For example, during annual checkups, pediatricians can ask children and their families about absenteeism and discuss the importance of good attendance, especially in the early grades. States can share best practices for how local medical communities can communicate the importance of attendance and access student attendance data for the communities they serve.

Ensure that schools, districts and communities understand how to use education and health data to identify reasons for absenteeism.

States can ensure that districts know where to obtain data and the tools necessary to analyze it. For example, many local public health departments have data organized by ZIP code on key health issues, including asthma,

obesity, community violence and behavioral health. In addition, nonprofit hospitals are now required to conduct community health needs assessments every three years to identify and address the needs of their communities.

The Educational Costs of Unhealthy Housing, written by the Rhode Island Data Hub, offers an excellent example of how health and education data can be combined to shed light on the impact of a health concern: in this case, how unhealthy housing contributes to higher absenteeism, lower academic performance and higher levels of grade retention. An Oregon nonprofit advocacy group, Upstream Public Health, produced The Connection Between Missing School and Health report to support state and local educators.

States can also encourage districts to examine the connection between chronic absence and data they maintain on student health conditions in their own databases. For example, they can evaluate if students with asthma are more likely to be chronically absent. Or if a lack of immunizations is causing students to miss so much school that they are chronically absent. Consider this example from California revealing how the smart use of data helped ensure that a recent change in immunization policies did not adversely affect attendance: Under a state law requiring that all students be vaccinated for whooping cough, every child entering seventh grade in the fall of 2105 has to submit proof of vaccination to start school. The Los Angeles Unified School District pored over shot records during the summer and focused on middle schools that had more than 100 students with no proof of the immunization. Teams of nurses, counselors and social workers made phone calls, visited homes and updated records. The district also set up clinics at schools to see that every child who needed an immunization received one.

Encourage schools to offer school-based and linked health resources.

The services delivered by school nurses and in on-site health centers are key for ensuring that students have access to the care they need to manage their health conditions. For example, Dallas School District in Texas, where 90 percent of school campuses have their own full-time nurses, has successfully shown no difference in attendance between asthmatic and nonasthmatic students. The district requires nurses to provide asthma management plans for every diagnosed child and to provide urgent care during school hours. In addition, if health providers are based on school campuses, they can serve as a critical support for reaching out to families.

Baltimore
Tackling Asthma Through a School Clinic

Asthma kept Stephanie Godbolt's grandson home from school again and again. He missed nearly a week of school every month for six months. And he was losing ground academically. Then his school, Tench Tilghman Elementary/Middle School, opened a full-service health clinic. The nurse there worked with Godbolt on an asthma plan and helped ensure that her grandson John had the support he needed at school. His attendance improved.

With 425 students in K-8, the health clinic deals with asthma, lead exposure and other urban health challenges. Using the Community School and Elev8 models, Tench Tilghman brings health services to the campus and connects families to resources in the community. Equipped with a list of students missing required immunizations, the school clinic was able to deliver the shots on campus. Family advocate Stephanie Mack connected families with asthmatic children to the Green and Healthy Homes Initiative, which offers free home inspections to eliminate asthma triggers. Children also receive free dental services on campus.

Since the clinic opened in 2012, the chronic absence rate at Tench Tilghman has dropped from 17 percent to 11 percent.

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Consider the example set by North Carolina family nurse practitioner Jill Kerr. She was able to significantly improve the attendance rates at two elementary schools by contacting families whose children had missed more than 10 percent of school starting at the end of the first month of the school year. Kerr's intervention included sharing information about the importance of attendance and, if the family agreed, paying a home visit together with a social worker or seeing the child in the nurse's office. In several cases, Kerr was able to connect the family with needed medical support. She also found, however, that about 40 percent of the absences reported as illnesses were actually due to issues such as transportation, travel or illness on the part of another family member.[xlvix]

Insights can also be gained when school-based health or linked providers, including the staff of school health clinics or mobile vans, also take care to ask about attendance when students seek their medical help. By asking about how much school a student has missed due to a health challenge, providers can begin collecting information about how illness is affecting attendance. They can also prevent unnecessary absences by clarifying when students with a mild health condition should continue going to school.

States can make sure that there are policies and resources in place that support the delivery of school-based health care and help ensure that students have access to providers during the school day.

Help schools understand where to access resources to assist with absences due to physical and mental health problems.

The health and public health sectors can also equip educators to understand and unpack causes of absenteeism. Mental health professionals can train educators to recognize early warning signs and to understand the impact of violence and trauma on student behaviors and learning. Health and public health partners can share data with schools about the mental health and trauma-related risk factors in the community surrounding a school, and they can work with schools to ensure that students have adequate support to navigate those factors.

Given the high levels of health-related challenges, as well chronic absence among students in special education, it makes sense for health personnel to be available as school teams develop IEPs for students. This way the plan can include health supports that might help the child miss less school.

Step 4: Learn from Positive Outliers

States can analyze their attendance data to identify districts and schools that are positive outliers. These are schools with a high level of students at risk for chronic absence (e.g., large numbers of low-income students, children from communities of color and students with disabilities), but maintain good attendance rates. State officials can find out what is happening in these schools and districts that are achieving better-than-average results.

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Searching Data for Bright Spots

For example, when the analysis of chronic absence for Oregon was first conducted in 2011-12, researchers at ECONorthwest used state data to predict, based on demographics, anticipated levels of chronic absence for schools. Then, the firm used actual data to identify schools that "beat the odds" because they had lower-than-predicted levels of chronic absence. The firm also identified underperforming schools (those with higher-than-expected levels of chronic absence). The findings demonstrate that demographics do not equal destiny, and that school-level practices matter.

Several years later, The Children's Institute in Oregon drew upon this idea to identify and document best practices for reducing chronic early absence in particular districts and schools. The resulting report, Showing Up, Staying In, shares inspiring stories and guidance about what works, as well as uses insights gained to make recommendations for state policy and practice.

The Connecticut State Department of Education provides data on levels of chronic absence on its state website. One report offers three-year trends for all of the state's school districts, allowing readers to identify those districts with consistent reductions. One notable example, is New Britain, which is engaged in a concerted effort to reduce chronic absence by producing actionable data, offering professional development to principals, creating student attendance teams at each school and expanding outreach and engagement to families.

> ### New Britain, Conn.
> ### Tackling Early Absenteeism
>
> *When the Consolidated School District of New Britain crunched the numbers on chronic absenteeism, the big surprise came in kindergarten: An alarming 30 percent of kindergartners were considered chronically absent – missing 10 percent or more of the school year.*
>
> *With the help of the state and a local foundation, the district hired two outreach workers who coordinate with families, social workers, teachers and community agencies to engage and support the parents of kindergartners. Data reports are sent to principals every 10 days, and school teams track students with at-risk attendance.*
>
> *These efforts have yielded powerful and convincing results. Kindergarten absenteeism has dropped by nearly half. And as absenteeism rates went down, early literacy scores went up. The past year's historic snow wreaked havoc with attendance, but New Britain remains committed to reducing chronic absence rates. Connecticut is now asking districts to track chronic absences as part of the school improvement process.*
>
> *"Our children in kindergarten – and even in preschool –are covering a lot, academically and socially," said Joe Vaverchak, the district's attendance director. "Now everyone is aware, and everyone is working together."*

Unpacking What Works

In Los Angeles Unified School District, Debra Duardo, now the executive director of Health and Human Services, conducted research to examine why some schools in the district's Attendance Improvement Program were more effective than others. She examined practices in six schools, three of which had better outcomes than their peers. Through a comprehensive set of interviews with staff at all levels, she discovered that in schools with better outcomes, the site leaders made attendance a high priority. Those interviewed shared the belief that everyone plays a role in improving attendance. Parent engagement was higher. Staff focused on student strengths, had more positive perceptions of parents and expressed a deeper level of commitment to implementing programs and delving into the causes of absence.[l]

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By investigating what is working, states can spot effective practices that other schools and districts can replicate, as well as identify innovative site and district leaders who can inspire others to make needed reforms. These local leaders can also offer insights on what the state might do to encourage more schools and districts to adopt effective attendance practice. Finally, positive outliers serving students with similar demographics provide concrete proof that schools and communities working together can improve attendance, even for student populations that others may perceive as beyond reach. Attendance Works offers this Positive Outliers Toolkit to help with documenting what works at particular school sites.

Step 5: Embed Action into Existing Initiatives

Embedding action within existing initiatives is critical, given the tremendous number of responsibilities and new initiatives already being thrust upon schools. Too often, something that requires new organization or infrastructure simply does not get acted on, while action related strategically to work already underway is seen as much more doable. Attention to chronic early absence is increasingly gaining traction because states are finding ways to integrate attention into existing reform efforts such as Positive Behavioral Intervention and Supports (PBIS), Response to Intervention (RTI), school improvement planning and community partnership efforts.

School Climate and Tiered Systems of Support

In Maryland, for example, the work on chronic absence is being integrated into the state's efforts to improve school climate through the adoption of multi-tiered systems of supports (MTSS). The state is integrating attention to attendance into its materials and technical assistance, including equipping the coaches responsible for helping schools adopt MTSS to understand what chronic absence is and how it can be reduced.

Attendance is also an explicit component of Georgia's School Climate Star Rating system, part of the state's College and Career Ready Performance Index. A diagnostic tool for determining if a school is on the right path to student achievement, the school climate rating is calculated using data from surveys of students, parents and school staff as well as student discipline data and attendance records for students, teachers, staff and administrators.

School Improvement

In Connecticut, the work on chronic absence is embedded into its targeted investment in the state's 30 lowest-performing districts. To receive additional resources to improve their schools, districts must submit plans to the state Department of Education on an annual basis. The state then reviews the plans to ensure they are aligned to the goals of the program. Annual plan approval is predicated upon district implementation and performance during the prior year. All districts with higher than 10 percent levels of chronic absence must address how they will improve attendance in their plans.

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Third Grade Reading

Reducing chronic absence is among the three priority solutions emphasized by the Campaign for Grade-Level Reading, which has nurtured the development of more than 200 community campaigns in 42 states to increase the number of low-income children reading proficiently by the end of third grade. The other priorities include improving school readiness and preventing summer learning loss. Although schools must be accountable for helping all children achieve and for providing effective teaching for all children in every classroom every day, the GLR campaign asserts that schools cannot succeed alone. They also need engaged communities mobilized to remove barriers, expand opportunities and assist parents to serve as full partners in the success of their children.

ReadySet*Soar*, a component of a broader cradle to career initiative in the Montgomery County Dayton, Ohio, region, first heard about chronic absence when participating in a GLR Campaign convening. Inspired, ReadySet*Soar* convinced seven districts with high poverty rates to find out how many students in grades K-3 were chronically absent and what impact it had on reading proficiency. The results, showing one out of five students were chronically absent and its correlation with lower reading and math scores are depicted in this infographic. The data quickly made it clear that addressing chronic absence was an integral part of their local campaign. It gained greater urgency when the state legislature passed its Third Grade Reading Guarantee, which calls for holding back any third grader who is not reading proficiently. It also seeks to ensure struggling readers are identified in kindergarten and provided with needed supports.

Cleveland, another GLR Campaign community, has also launched a comprehensive effort to reduce chronic absence starting with a focus on community awareness. Eric Gordon, the CEO of Cleveland Metropolitan School District, has issued a call to action to fight chronic absenteeism through a citywide campaign: Get To School – You Can Make it! #GET2SchoolCLE. In the meantime, the Ohio Department of Education expanded its efforts to monitor chronic absence by adding it to publicly available school report cards in Spring 2015.

Community Schools and Afterschool

A focus on chronic absence is also a common feature of the Community Schools initiatives in many states and localities. The schools, which focus on engaging the entire community often on the school site, can use chronic absence as a concrete, achievable measure of collective impact. At the same time, such initiatives can offer an opportunity for schools to identify and partner with other agencies whose resources are so crucial to removing barriers to getting to school. In Utah, for example, the work on chronic absence initially began because of strong interest among the state's afterschool community in identifying an indicator that they could use to strengthen their ability to collaborate with schools.

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Using Chronic Absence Data to Help States Chart a Course for Student Success

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 include policymakers, government agencies, philanthropies, nonprofits, civic organizations and businesses.

This section offers a framework for working together to achieve the long-term goal of ensuring that students across the country 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.

This framework is divided into four components that 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

2. Positive Messaging: Changing the Narrative

3. Capacity Building: Developing and Implementing Early Interventions

4. Shared Accountability: Setting Performance Standards
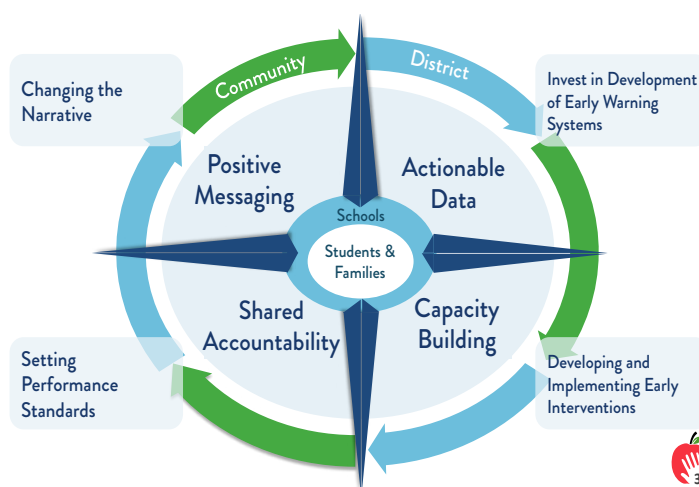
While all of these components eventually need to be in place to sustain improvement over time, actionable data is listed first because it is a key starting point for action. It is what allows states and districts to understand where they should target efforts related to positive messaging and capacity building. Actionable data must also be in place to make the concept of shared accountability operational.

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

Rationale: Supporting the collection of actionable data that can be used to create early warning systems that identify students and schools at risk and create a better overall understanding of patterns of chronic absence in order to identify when and where poor attendance is a problem.

Possible Actions:

a. 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.

b. Support learning and development of data reports that are easy to use and understand.

c. Offer information and resources to promote data sharing while respecting confidentiality.

2. Positive Messaging: Changing the Narrative

Rationale: The dominant student absenteeism narrative blames parents and punishes students. Neither of these strategies is effective in supporting families and students so that students attend school and are ready to learn. As a result, the narrative should be changed 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:

a. Develop new messages that raise awareness about chronic absenteeism without placing the blame on students and families; promote a commitment to unpacking the underlying reasons for students missing school; help families understand the adverse consequences of absences adding up; and ensure that communications are culturally and linguistically meaningful and relevant.

b. Build a national coalition of key stakeholders – including school superintendents, state decision makers, principals, teachers, health professionals, parent leaders and others – to deliver the new messages via their organizational channels.

c. Identify and mobilize key spokespeople to reinforce the new public narrative.

3. Capacity Building: Developing and Implementing Early Interventions

Rationale: In order for schools and communities to feel that they have the knowledge and support necessary to map early chronic absence and implement effective interventions, they must have access to model practices, 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 that

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these resources are in place. A collective impact model should be used to ensure that a unified strategy engages multiple sectors in a community addressing chronic absenteeism.

Possible Actions:

a. Provide a robust set of tools and a strong complement of training opportunities for key stakeholders at the state and local levels.

b. Define model strategies for unpacking and addressing chronic early absence that can be used to guide efforts across the country.

c. Highlight case studies of effective efforts and articulate the strategies and best practices that can be learned from these examples.

d. 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 provide incentives for 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:

a. 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.

b. Promote the inclusion of chronic absenteeism data in school turnaround efforts.

c. Support the inclusion of chronic absenteeism measures in state school report cards and other state accountability systems.

d. Offer models to states for working with school districts to integrate chronic absenteeism into their school improvement plans.

e. Integrate chronic absenteeism into community health needs assessments.

Conclusion

As we head into another school year, we have the opportunity to make significant strides in closing achievement gaps by shrinking early attendance gaps. By investing early, we can ensure that students, especially our most vulnerable children, avoid missing so much school that they fall behind before they even have a chance to learn and experience the benefits of doing well in the classroom.

Schools cannot do this alone. A wide variety of community stakeholders, especially health providers, can make a tremendous difference. Mapping and addressing the early attendance gap takes concerted effort at the state level, with the right policies and professional development in place. It takes innovative practice at the district level, providing data for school sites and support for families. Done right, these local examples can inform the state's approach and establish a cycle of innovation and progress that ensures that every child has an on-ramp to school success with an equal opportunity to learn.

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References

[i] Bruner, Charles, Anne Discher and Hedy Chang, *Chronic Elementary Absenteeism: A Problem Hidden in Plain Sight*, Child & Family Policy Center and Attendance Works, November 2011.

[ii] Balfanz, Robert, Lisa Herzog and Douglas J. Mac Iver, *Preventing Student Disengagement and Keeping Students on the Graduation Path in Urban Middle-Grades Schools: Early Identification and Effective Interventions*, Educational Psychologist, 42(4), 223–235, 2007.

[iii] Schoeneberger, Jason A., *Longitudinal Attendance Patterns: Developing High School Dropouts*, The Clearing House: A Journal of Educational Strategies, Issues and Ideas, 85:1, 7-14, November 2011.

[iv] Chang, Hedy N., and Mariajosé Romero, *Present, Engaged, and Accounted For: The Critical Importance of Addressing Chronic Absence in the Early Grades*, National Center for Children in Poverty, September 2008.

[v] Gottfried, Michael A., *Can Center-Based Childcare Reduce the Odds of Early Chronic Absenteeism?*, Early Childhood Research Quarterly, April 2015.

[vi] Connolly, Faith, and Olson, Linda S., *Early Elementary Performance and Attendance in Baltimore City Schools' Pre-Kindergarten and Kindergarten*, Baltimore Education Research Consortium, March 2012; and **Ehrlich, Stacy B**., et al. *Preschool Attendance in Chicago Public Schools: Relationships with Learning Outcomes and Reasons for Absences*, University of Chicago Consortium on Chicago School Research, May 2014.

[vii] Connolly and Olson.

[viii] Gottfried, Michael A., *Chronic Absenteeism and its Effects on Students' Academic and Socioemotional Outcomes,* The Journal of Education for Students Placed at Risk , 19(2), pp. 53-75, 2014.

[ix] Hernandez, Donald A., *"Double Jeopardy: How Third-Grade Reading Skills and Poverty Influence High School Graduation."* Annie E. Casey Foundation, April 2012.

[x] Rosenkranz, Todd et al., *Free to Fail or On-Track to College: Why Grades Drop When Students Enter High School and What Adults Can Do About It*, University of Chicago Consortium on Chicago School Research, April 2014.

[xi] Ibid.

[xii] Balfanz, Robert and Vaughan Byrnes, *Meeting the Challenge of Combating Chronic Absenteeism: Impact of the NYC Mayor's Interagency Task Force on Chronic Absenteeism and School Attendance and Its Implications for Other Cities*, Everyone Graduates Center, Johns Hopkins University School of Education, November 2013.

[xiii] Get Schooled Foundation *Skipping to Nowhere: Students Share Their Views About Missing School*, August 2012.

[xiv] Romero, Mariajosé and Young-Sun Lee, *A National Portrait of Chronic Absenteeism in the Early Grades*, National Center for Children in Poverty, Columbia University. October 2007.

[xv] Wiseman, Amy, and Susan Dawson, *Why Do Students Miss School? The Central Texas Absence Reasons Study*, E3 Alliance. June 2013.

[xvi] National Health Interview Survey. Centers for Disease Control and Prevention; 2013. http://www.cdc.gov/asthma/most_recent_data.htm Accessed May 1, 2015.

[xvii] Ibid.

[xviii] Dye BA, Xianfen L, Beltrán-Aguilar ED. Selected Oral Health Indicators in the United States 2005–2008. NCHS Data Brief, no. 96. Hyattsville, MD: National Center for Health Statistics, Centers for Disease Control and Prevention; 2012.

[xix] Pourat Nadereh, and Gina Nicholson. Unaffordable Dental Care is Linked to Frequent School Absences. UCLA Health Policy Research Brief. November 2009:1–6.

[xx] Balfanz Robert, and Vaughan Byrne. The Importance of Being in School, A Report on Absenteeism in the Nation's Public Schools. 2012;(May):1–46.

xxi Burkhardt Research Services. School Nursing in the United States: A Quantitative Study. Silver Spring, MD: National Association of School Nurses; 2007.

xxii Lofink, Hayley, et al., *2010-2011 Census Report of School-Based Health Centers*, Washington, D.C.: School-Based Health Alliance. 2013.

xxiii Alexander, D., and Lewis, L. Condition of America's Public School Facilities: 2012–13 (NCES 2014-022). National Center for Education Statistics. 2014.

xxiv Utah Education Policy Center at the University of Utah, *Research Brief: Chronic Absenteeism*, July 2012.

xxv *In School and On Track 2014: Attorney General's 2014 Report on California's Elementary School Truancy and Absenteeism Crisis*, Office of Attorney General, California Department of Justice, September 2014.

xxvi DePaoli, Jennifer et al. Buildlng a Grad Nation 2015, Civic Enterprises and Everyone Graduates Center, May 2015.

xxvii Romero and Lee.

xxviii Carlson, J. A., et al., Socioeconomic disparities in elementary school practices and children's physical activity during school. American Journal of Health Promotion, 28(Suppl 3), S47-53. 2014.

xxix Basch, C. E.(2010). Healthier students make better learners: A missing link in school reforms to close the achievement gap. Equity Matters Research Review #6, A Research Initiative of the Campaign for Educational Equity, New York, NY: Teacher's College, Columbia University.

xxx Griffin SO, et al. 2008. The effectiveness of sealants in managing caries lesions. *Journal of Dental Research* 87(2):169–174. http://www. ncbi.nlm.nih.gov/pubmed/18218845.

xxxi Youth Risk Behavior Surveillance – United States, 2013 (YRBS); Morbidity and Mortality Weekly, Centers for Disease Control, June 13, 2014.

xxxii Nauer, Kim et al, *A Better Picture of Poverty: What Chronic Absenteeism and Risk Load Reveal About NYC's Lowest-Income Elementary Schools*, Center for New York City Affairs at the New School, November 2014.

xxxiii Ready, Douglas D., *Socioeconomic Disadvantage, School Attendance, and Early Cognitive Development, The Differential Effects of School Exposure*, Sociology of Education, October 2010.

xxxiv Ehrlich et al.

xxxv Romero and Lee.

xxxvi National Congress of American Indians website, accessed July 31, 2015 at http://www.ncai.org/policy-issues/education-health-human-services/education.

xxxvii *Chronic Absence and Native American Students: Unique Challenges*, Attendance Works blog, accessed August 7, 2015 at http://www.attendanceworks.org/chronic-absence-and-native-american-students-unique-challenges/.

xxxviii Youth Risk Behavior Survey.

xxxix U.S. Department of Education, *Community School Supporting Students in Baltimore*, DOE blog accessed August 10 at http://www.ed.gov/edblogs/oii/2014/11/community-schools-supporting-students-in-baltimore/.

xl U.S. Department of Education Office for Civil Rights, *Data Snapshot: School Discipline*, accessed August 11, 2015. http://ocrdata.ed.gov/Downloads/CRDC-School-Discipline-Snapshot.pdf.

xli Chang and Romero.

xlii Kim, Jonak, *Relationships Among and Between ELL Status, Demographic Characteristics, Enrollment History, and School Persistence*, National Center for Research on Evaluation, Standards and Student Testing,UCLA, December 2011.

xliii Ibid.

xliv U.S. Department of Education Office for Civil Rights, *Data Snapshot: School Discipline.*

xlv Monitoring Chronic Absence, Data Quality Campaign, February 2014.

Mapping the Early Attendance Gap

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[xlvi] Kerr, Jill et al., Does Contact by a Family Nurse Practitioner Decrease Early School Absence?, The Journal of School Nursing, September 14, 2011.

[xlvii] Asthma Diagnoses, accessed at Kidsdata.org on August 23, 2015.

[xlviii] Gupta, Ruchi S. et al., *Geographic variability in childhood asthma prevalence in Chicago.* Journal of Allergy and Clinical Immunology , Volume 121 , Issue 3 , 639 – 645.e1.

[xlvix] Kerr.

[l] Duardo, Debra Lou, "Solutions to Chronic Absenteeism: An Evaluation of Kindergarten Attendance Improvement Program in LAUSD" (Unpublished Doctoral Dissertation) submitted to University of California, Los Angeles 2013.

The reference for this report is:

Mapping the Early Attendance Gap: Charting a Course for Student Success. Attendance Works & Healthy Schools Campaign, September 2015.

Appendix A

Methodolgy

The tables on the following pages reflect an analysis by researcher Alan Ginsburg of absenteeism data reported by students who took the National Assessment of Educational Progress (NAEP) in 2011 and 2013. Every two years, the NAEP assesses the reading and math skills of students in grades 4 and 8 across the country, using a representative sample in each state of about 2,500 students at each grade. In addition to testing, NAEP asks the sampled students about the numbers of days they were absent the prior month. Analysis shows that missing three or more days in the prior month (high-absenteeism) is associated with lower test scores for students in every state and city tested. Using information NAEP collects about students, the percentages of high-absentee students were broken out for three different school-reported student characteristics:

(1)   Eligibility for the national school lunch program;

(2)   Race/ethnicity used to report trends (White, Black, Hispanic, Asian and American Indian); and

(3)   Disability status of student, which includes students who have 504 plans.

A gap analysis identified the states with the widest gaps between higher at-risk students (e.g., students eligible for school-lunch; Black, Hispanic and American Indian students; and students identified with disability) and less at-risk students.

To improve the accuracy of the NAEP state estimates of the percentage of students absent three or more days by the different student groups, our analyses pooled the 2011 and 2013 NAEP surveys and reported the average of the high-absenteeism percentages over the two years.

Percentage of grade 4 and 8 students with poor attendance by race/ethnicity

Exhibit 1. Percent of grade 4 students absent 3 or more days last month by race/ethnicity of students and state, 2011-13*

	All (percent)	White (percent)	Black (percent)	Hispanic (percent)	Asian (percent)	American Indian (percent)
National	20	19	22	21	14	29
Alabama	21	21	22	18	‡	‡
Alaska	‡	‡	‡	‡	‡	‡
Arizona	23	20	23	26	17	34
Arkansas	24	24	26	24	19	‡
California	19	19	22	20	12	‡
Colorado	21	19	32	25	21	‡
Connecticut	20	17	26	27	14	‡
Delaware	20	20	22	21	8	‡
District of Columbia	28	18	30	26	‡	‡
Florida	19	19	17	19	13	‡
Georgia	18	17	19	18	10	‡
Hawaii	23	19	20	21	24	‡
Idaho	20	19	‡	22	‡	‡
Illinois	19	17	23	21	14	‡
Indiana	19	19	23	18	‡	‡
Iowa	19	17	25	24	19	‡
Kansas	20	19	26	23	15	‡
Kentucky	20	20	20	13	16	‡
Louisiana	22	21	22	25	‡	‡
Maine	21	21	18	‡	‡	‡
Maryland	20	18	21	22	11	‡
Massachusetts	17	16	18	24	11	‡
Michigan	23	21	32	28	16	‡
Minnesota	19	17	26	24	18	‡
Mississippi	21	22	21	25	‡	‡
Missouri	20	18	24	22	18	‡
Montana	24	23	‡	26	‡	33
Nebraska	19	18	24	22	15	‡
Nevada	21	20	24	21	15	‡
New Hampshire	18	18	‡	27	12	‡
New Jersey	21	19	25	26	14	‡
New Mexico	25	23	31	25	‡	31
New York	21	18	27	28	13	‡
North Carolina	21	20	23	23	15	30
North Dakota	18	17	17	21	‡	27
Ohio	19	18	25	25	‡	‡
Oklahoma	23	22	24	22	15	26
Oregon	22	22	24	24	20	‡
Pennsylvania	20	18	27	25	14	‡
Rhode Island	22	19	23	29	17	‡
South Carolina	21	20	22	22	‡	‡
South Dakota	18	16	20	22	‡	27
Tennessee	21	21	22	23	8	‡
Texas	17	17	15	17	14	‡
Utah	22	21	‡	24	19	‡
Vermont	22	22	‡	‡	‡	‡
Virginia	19	18	22	21	12	‡
Washington	21	20	23	24	15	‡
West Virginia	23	24	22	‡	‡	‡
Wisconsin	19	18	28	22	16	‡
Wyoming	25	24	‡	25	‡	32
DoDEA	19	19	20	21	18	‡

*Data shown are the mean of the percent of students absent 3 or more days on the 2011 and 2013 NAEP reading assessments.

‡ Reporting standards not met.

Source: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

Exhibit 2. Percent of grade 8 students absent 3 or more days last month by race/ethnicity of students and state, 2011-13*

	All (percent)	White (percent)	Black (percent)	Hispanic (percent)	Asian (percent)	American Indian (percent)
National	20	19	23	22	11	30
Alabama	20	20	21	18	‡	‡
Alaska	‡	‡	‡	‡	‡	‡
Arizona	26	26	25	26	10	32
Arkansas	22	21	24	19	‡	‡
California	19	21	22	19	9	‡
Colorado	25	23	28	30	12	‡
Connecticut	19	17	23	29	9	‡
Delaware	21	20	23	21	10	‡
District of Columbia	30	17	32	27	‡	‡
Florida	23	23	23	23	12	‡
Georgia	17	17	19	18	7	‡
Hawaii	24	26	‡	25	24	‡
Idaho	21	21	‡	23	‡	‡
Illinois	17	17	18	18	9	‡
Indiana	18	17	25	19	‡	‡
Iowa	19	18	22	25	13	‡
Kansas	21	20	24	21	13	‡
Kentucky	20	20	19	23	‡	‡
Louisiana	23	22	25	21	‡	‡
Maine	21	22	22	‡	‡	‡
Maryland	20	18	24	24	11	‡
Massachusetts	16	14	18	27	7	‡
Michigan	22	20	32	26	11	‡
Minnesota	20	19	24	23	16	‡
Mississippi	20	20	20	17	‡	‡
Missouri	19	18	24	21	‡	‡
Montana	27	25	‡	29	‡	42
Nebraska	20	19	27	24	‡	‡
Nevada	22	22	22	22	14	‡
New Hampshire	19	19	‡	32	13	‡
New Jersey	18	17	20	21	6	‡
New Mexico	28	25	26	28	‡	35
New York	22	18	28	29	13	‡
North Carolina	21	20	24	21	8	‡
North Dakota	22	20	‡	‡	‡	35
Ohio	20	19	27	23	‡	‡
Oklahoma	24	24	22	26	8	29
Oregon	24	24	‡	27	14	‡
Pennsylvania	21	19	28	25	13	‡
Rhode Island	21	18	21	31	18	‡
South Carolina	20	21	20	19	‡	‡
South Dakota	19	17	‡	18	‡	34
Tennessee	20	19	24	17	‡	‡
Texas	18	18	19	19	5	‡
Utah	25	23	‡	29	26	‡
Vermont	17	17	‡	‡	‡	‡
Virginia	19	19	20	21	11	‡
Washington	22	21	20	27	14	‡
West Virginia	22	22	19	‡	‡	‡
Wisconsin	19	17	30	24	14	‡
Wyoming	27	27	‡	31	‡	‡
DoDEA	18	19	20	20	12	‡

*Data shown are the mean of the percent of students absent 3 or more days on the 2011 and 2013 NAEP math assessments.

‡ Reporting standards not met.

Source: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

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Percentage of grade 4 and 8 students with poor attendance by lunch eligibility

Exhibit 3. Percent of grade 4 students absent 3 or more days last month by school lunch eligibility of students and state, 2011-13*

	All (percent)	Eligible for school lunch (percent)	Not eligible for school lunch (percent)
National	20	23	17
Alabama	21	24	17
Alaska	‡	‡	‡
Arizona	23	26	20
Arkansas	24	28	19
California	19	20	17
Colorado	21	25	18
Connecticut	20	27	16
Delaware	20	24	17
District of Columbia	28	30	20
Florida	19	21	15
Georgia	18	20	14
Hawaii	23	28	17
Idaho	20	22	17
Illinois	19	22	17
Indiana	19	23	15
Iowa	19	24	15
Kansas	20	24	17
Kentucky	20	23	16
Louisiana	22	23	17
Maine	21	25	18
Maryland	20	24	16
Massachusetts	17	23	14
Michigan	23	29	18
Minnesota	19	23	16
Mississippi	21	23	17
Missouri	20	24	15
Montana	24	28	21
Nebraska	19	24	16
Nevada	21	22	18
New Hampshire	18	23	16
New Jersey	21	27	17
New Mexico	25	27	20
New York	21	25	17
North Carolina	21	24	18
North Dakota	18	21	16
Ohio	19	25	15
Oklahoma	23	25	20
Oregon	22	24	20
Pennsylvania	20	25	16
Rhode Island	22	28	16
South Carolina	21	24	16
South Dakota	18	23	14
Tennessee	21	25	16
Texas	17	18	15
Utah	22	25	19
Vermont	22	26	18
Virginia	19	24	16
Washington	21	24	17
West Virginia	23	26	19
Wisconsin	19	25	16
Wyoming	25	27	19
DoDEA	19	‡	‡

*Data shown are the mean of the percent of students absent 3 or more days on the 2011 and 2013 NAEP reading assessments.

‡ Reporting standards not met.

SOURCE: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

Exhibit 4. Percent of grade 8 students absent 3 or more days a last month by school lunch eligiblity of students and state, 2011-13*

	All (percent)	Eligible for school lunch (percent)	Not eligible for school lunch (percent)
National	20	24	16
Alabama	20	25	15
Alaska	‡	‡	‡
Arizona	26	27	24
Arkansas	22	25	17
California	19	20	17
Colorado	25	30	22
Connecticut	19	27	15
Delaware	21	26	17
District of Columbia	30	33	23
Florida	23	26	18
Georgia	17	20	14
Hawaii	24	29	19
Idaho	21	24	19
Illinois	17	20	15
Indiana	18	23	15
Iowa	19	26	15
Kansas	21	26	17
Kentucky	20	24	15
Louisiana	23	26	18
Maine	21	27	17
Maryland	20	27	16
Massachusetts	16	23	12
Michigan	22	30	16
Minnesota	20	25	17
Mississippi	20	22	16
Missouri	19	25	15
Montana	27	32	24
Nebraska	20	24	17
Nevada	22	24	19
New Hampshire	19	26	17
New Jersey	18	22	16
New Mexico	28	30	24
New York	22	27	16
North Carolina	21	26	16
North Dakota	22	28	19
Ohio	20	28	14
Oklahoma	24	28	20
Oregon	24	27	22
Pennsylvania	21	27	17
Rhode Island	21	30	14
South Carolina	20	22	18
South Dakota	19	25	15
Tennessee	20	23	16
Texas	18	20	15
Utah	25	30	22
Vermont	17	21	15
Virginia	19	23	17
Washington	22	27	18
West Virginia	22	26	16
Wisconsin	19	27	15
Wyoming	27	32	25
DoDEA	18	‡	‡

*Data shown are the mean of the percent of students absent 3 or more days on the 2011 and 2013 NAEP math assessments.

‡ Reporting standards not met.

SOURCE: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

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Percentage of grade 4 and 8 students with poor attendance by disability status

Exhibit 5. Percent of grade 4 students absent 3 or more days last month by disability status status of students and state, 2011-13*

	All (percent)	Identified with disability (percent)	Not identified with disability (percent)
National	20	25	19
Alabama	21	27	21
Alaska	‡	‡	‡
Arizona	23	30	22
Arkansas	24	31	23
California	19	25	19
Colorado	21	25	21
Connecticut	20	30	19
Delaware	20	27	19
District of Columbia	28	36	27
Florida	19	23	18
Georgia	18	24	17
Hawaii	23	31	22
Idaho	20	24	19
Illinois	19	23	19
Indiana	19	23	18
Iowa	19	25	18
Kansas	20	25	20
Kentucky	20	25	19
Louisiana	22	27	20
Maine	21	26	20
Maryland	20	19	20
Massachusetts	17	23	16
Michigan	23	31	23
Minnesota	19	23	18
Mississippi	21	28	20
Missouri	20	25	19
Montana	24	28	24
Nebraska	19	26	18
Nevada	21	25	20
New Hampshire	18	23	17
New Jersey	21	30	20
New Mexico	25	29	25
New York	21	27	20
North Carolina	21	28	21
North Dakota	18	20	18
Ohio	19	27	18
Oklahoma	23	28	22
Oregon	22	28	22
Pennsylvania	20	25	19
Rhode Island	22	30	21
South Carolina	21	29	20
South Dakota	18	20	17
Tennessee	21	28	20
Texas	17	23	17
Utah	22	27	22
Vermont	22	25	21
Virginia	19	27	18
Washington	21	27	20
West Virginia	23	28	23
Wisconsin	19	25	19
Wyoming	25	28	24
DoDEA	19	25	19

*Data shown are the mean of the percent of students absent 3 or more days on the 2011 and 2013 NAEP reading assessments.

‡ Reporting standards not met.
SOURCE: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

Exhibit 6. Percent of grade 8 students absent 3 or more days last month by disability status of student and state, 2011-13*

	All (percent)	Identified with disability (percent)	Not identified with disability (percent)
National	20	28	19
Alabama	20	36	19
Alaska	‡	‡	‡
Arizona	26	34	25
Arkansas	22	30	20
California	19	24	18
Colorado	25	33	24
Connecticut	19	25	18
Delaware	21	32	19
District of Columbia	30	35	30
Florida	23	30	22
Georgia	17	23	17
Hawaii	24	37	23
Idaho	21	27	21
Illinois	17	23	16
Indiana	18	24	17
Iowa	19	30	18
Kansas	21	22	20
Kentucky	20	25	19
Louisiana	23	28	22
Maine	21	28	20
Maryland	20	24	19
Massachusetts	16	22	15
Michigan	22	34	21
Minnesota	20	26	19
Mississippi	20	29	19
Missouri	19	25	19
Montana	27	34	26
Nebraska	20	26	19
Nevada	22	29	21
New Hampshire	19	23	18
New Jersey	18	27	16
New Mexico	28	36	27
New York	22	29	20
North Carolina	21	33	20
North Dakota	22	27	21
Ohio	20	28	19
Oklahoma	24	33	23
Oregon	24	29	24
Pennsylvania	21	27	20
Rhode Island	21	30	19
South Carolina	20	25	20
South Dakota	19	27	18
Tennessee	20	29	19
Texas	18	25	17
Utah	25	33	24
Vermont	17	23	16
Virginia	19	30	18
Washington	22	29	21
West Virginia	22	32	20
Wisconsin	19	27	18
Wyoming	27	34	27
DoDEA	18	24	18

*Data shown are the mean of the percent of students absent 3 or more days on the 2011 and 2013 NAEP math assessments.

‡ Reporting standards not met.

SOURCE: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

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Difference in scores based on attendance in grade 4 and 8

Exhibit 7. Difference in NAEP scores for 4th grade reading between students with no absences minus students with 3 or more days absent last month by school-lunch status of student and state, 2011-13*

	All	Eligible for school lunch	Not eligible for school lunch
National	**12**	**9**	**8**
Alabama	12	10	8
Alaska	‡	‡	‡
Arizona	14	10	15
Arkansas	11	7	9
California	11	11	8
Colorado	10	6	6
Connecticut	15	11	8
Delaware	11	8	8
District of Columbia	18	14	11
Florida	11	8	10
Georgia	11	10	4
Hawaii	17	12	11
Idaho	11	10	8
Illinois	11	8	8
Indiana	10	6	8
Iowa	14	10	9
Kansas	10	6	6
Kentucky	11	7	8
Louisiana	14	11	12
Maine	9	6	6
Maryland	10	8	6
Massachusetts	13	8	8
Michigan	13	9	6
Minnesota	12	11	7
Mississippi	10	7	8
Missouri	14	11	8
Montana	8	7	6
Nebraska	14	14	7
Nevada	10	8	7
New Hampshire	8	5	6
New Jersey	12	10	6
New Mexico	10	8	7
New York	13	11	8
North Carolina	11	9	7
North Dakota	9	9	7
Ohio	14	10	8
Oklahoma	12	10	10
Oregon	11	8	9
Pennsylvania	15	13	8
Rhode Island	18	10	12
South Carolina	14	10	9
South Dakota	16	14	10
Tennessee	12	9	7
Texas	10	10	7
Utah	12	13	8
Vermont	9	8	4
Virginia	14	11	10
Washington	14	11	8
West Virginia	11	9	8
Wisconsin	12	7	7
Wyoming	5	4	3
DoDEA	6	‡	‡

*Data shown are the mean of the NAEP scores on the 2011 and 2013 NAEP assessments.

‡ Reporting standards not met.
SOURCE: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

Exhibit 8. Difference in NAEP scores for 8th grade math between students with no absences minus students with 3 or more days absent last month by school-lunch status of student and state, 2011-13*

	All	Eligible for school lunch	Not eligible for school lunch
National	**18**	**15**	**15**
Alabama	17	13	12
Alaska	‡	‡	‡
Arizona	16	14	15
Arkansas	15	11	13
California	18	16	18
Colorado	17	14	13
Connecticut	22	15	17
Delaware	19	17	14
District of Columbia	16	11	18
Florida	15	13	13
Georgia	17	13	16
Hawaii	21	18	19
Idaho	13	12	11
Illinois	18	14	17
Indiana	20	14	18
Iowa	17	14	14
Kansas	13	10	9
Kentucky	16	9	15
Louisiana	14	14	8
Maine	16	11	14
Maryland	22	17	18
Massachusetts	22	17	14
Michigan	23	18	17
Minnesota	14	14	9
Mississippi	13	10	10
Missouri	17	12	14
Montana	14	13	10
Nebraska	16	13	13
Nevada	17	16	17
New Hampshire	16	15	11
New Jersey	20	14	17
New Mexico	15	12	17
New York	23	21	18
North Carolina	17	14	13
North Dakota	13	13	10
Ohio	22	14	18
Oklahoma	17	16	13
Oregon	13	11	11
Pennsylvania	21	14	17
Rhode Island	25	15	21
South Carolina	12	10	9
South Dakota	16	17	10
Tennessee	20	17	16
Texas	19	17	16
Utah	15	13	12
Vermont	15	12	12
Virginia	22	12	23
Washington	19	15	16
West Virginia	17	13	15
Wisconsin	17	13	11
Wyoming	11	13	9
DoDEA	12	‡	‡

*Data shown are the mean of the NAEP scores on the 2011 and 2013 NAEP assessments.

‡ Reporting standards not met.
SOURCE: NAEP Data Explorer (2015). Prepared by Alan Ginsburg for Attendance Works.

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