

National Collaborative on Education + Health

Brief on Chronic Absenteeism and School Health

Prepared by the National Collaborative on Education and Health

March 2015

Chronic absenteeism—or missing 10 percent or more of school days for any reason, excused or unexcused—is a proven early warning sign of academic risk and school dropout. While the causes of chronic absenteeism are multi-fold, research shows that student health issues are a leading contributor. These health issues include physical, mental, behavioral, vision, dental, social and emotional health issues in addition to issues connected to a child’s surrounding environment such as violence, housing insecurity and food insecurity. As a result, ensuring that students are able to attend school in healthy school environments is a critical strategy for addressing chronic absenteeism. A healthy school environment means students have regular access to school health services, mental health services, healthy school food, physical education and activity, healthy school buildings and a supportive school climate. Identifying and implementing health interventions is a critical step to addressing chronic absenteeism and a key opportunity for collaboration among multiple sectors, including health, education, public health and the environment. These sectors must work together with others to ensure students are present, engaged and prepared to lead healthy, productive lives.

Chronic Absenteeism’s Impact on Education and Health Outcomes

Students’ attendance affects their progress in school, and poor attendance can lead to a failure to graduate. The long-term consequences of chronic absenteeism can lead to a population that is less educated, underemployed, less financially stable and also less healthy, because a lifetime of good health correlates with receiving more education.

Frequent absences can be devastating for a child’s school success. For example, children who are chronically absent in both kindergarten and first grade are much less likely to be reading at grade level by the third grade.ⁱ Students who are not reading at grade level by the third grade are four times more likely to drop out of high school.ⁱⁱ By sixth grade, chronic absenteeism becomes one of the leading indicators that a student will drop out of high school.ⁱⁱⁱ By high school, attendance is a better dropout indicator than test scores. A student who is chronically absent for any year between eighth and twelfth grade is over seven times more likely to drop out.^{iv}

Educational achievement is not only a predictor of adult success; it also strongly predicts adult health outcomes. Students who do not graduate have greater health risks as adults than their higher-achieving peers, creating an unfortunate and unnecessary cycle of poverty and poor health outcomes.^v The less education adults have, the more likely they are to smoke, be overweight, have diabetes and die prematurely of certain chronic conditions^{vi}. Because students raised in poverty benefit the most from being in school, one of the most effective strategies for providing pathways out of poverty is to do whatever it takes to get these students to school every day.

Addressing Chronic Absenteeism through Healthy School Environments

Effective interventions to address chronic absenteeism require a multi-pronged approach with engagement from many sectors. It is critical that the connection between health and chronic absenteeism is not overlooked in these interventions. Research has documented many effective school health interventions resulting in improvements to student attendance. Below is an overview of this research:

School Health Services

School health services, including those delivered by school nurses and in school based health centers, are a key strategy for ensuring students have access to the care they need to manage the health conditions that result in missed school, including asthma, diabetes, ADHD, dental and vision problems and obesity. As a result, providing students with access to school health services is a proven strategy for increasing student attendance. For example, Dallas School District, where 90 percent of school campuses have their own full-time nurses, has successfully shown no difference in attendance between asthmatic and non-asthmatic students. The Dallas School District requires nurses to provide asthma management plans for every diagnosed child and also provide urgent care during school hours.^{vii,viii} In addition, a literature review by the American Public Health Association found that access to a school-based health center was associated with increased student attendance and that African American males who used a school-based health center were three times more likely to stay in school than those who did not use a school-based health center.^{ix}

Mental Health Services

Researchers describe mental health conditions such as depression, anxiety and oppositional defiant disorder as being related to school avoidance behaviors for truancy and children refusing to attend school. In addition, other risk factors that can lead to anxiety and school absences include homelessness, poverty, school violence, school climate and connectedness, and parent involvement. Providing students with access to school-based mental health programs is a key strategy for improving student attendance. For example, Baltimore City Public Schools expanded the school mental health services available to students by collaborating with health providers from the school and community to implement a full array of prevention, mental health promotion, early intervention and treatment programs for students. Preliminary results of the initiative showed an increase in math and reading assessment scores and in attendance from the previous school year for students with access to the expanded mental health programming.^x

School Food

Providing students with healthy school meals, including breakfast and lunch, is a key strategy for improving student attendance. Obese children and adolescents have been found to report many more missed school days than the general student population. In addition, children who come from food-insecure families are more likely to be suspended from school, have higher absenteeism rates and have poor health compared to children who come from food-secure homes.^{xi} Ensuring students have access to healthy schools meals is a proven strategy for addressing childhood obesity and food insecurity and, as a result, improving student attendance. For example, research shows that universal breakfast programs are directly associated with reduced absenteeism for students, specifically minority students.^{xii,xiii}

Physical Education and Physical Activity

School-based physical activity programs have also been shown to improve attendance by reducing obesity—which has been associated with asthma—by increasing school connectedness and by favorably affecting the health status of children with asthma.^{xiv,xv} In addition, higher physical fitness achievement is associated with better school attendance rates and fewer disciplinary incidents involving drugs, alcohol, violence or truancy.^{xvi} HHS's Healthy People 2020 national objectives call for schools to increase the proportion of students who meet the recommended 60 minutes of physical activity each day and who participate in daily physical education and other physical activity opportunities such as recess, after-school activities and active transport. Ensuring students have the opportunity to be physically active for 60 minutes a day is a key strategy for supporting student attendance.

Healthy School Buildings

The condition of school facilities directly impacts absenteeism. Students are less likely to attend schools in need of structural repair, schools that use temporary structures and schools that have understaffed janitorial services.^{xvii} For example, researchers in California found that poor elementary school classroom ventilation rates are associated with increased student illness related absences. Student attendance can be improved by ensuring students are able to attend school in a healthy school building with clean air and quality facilities that are regularly and properly cleaned. Given that asthma is one of the leading predictors of student absences, improvements in classroom and school air quality are closely associated with improvements in student attendance.^{xviii}

Social and Emotional School Climate

The school environment plays a role in determining whether or not children feel accepted, welcome and safe at school and have a direct impact on student attendance. In a nationally representative sample, more Hispanic and African American students than Caucasian students reported missing school in the past month because of feeling unsafe either at, or traveling to or from school.^{xix} In addition, bullying is associated with lower academic achievement and absences. Interventions that seek to create positive school climates and reduce bullying have been shown to result in better school attendance and academic outcomes.^{xx,xxi}

While there is no one-size-fits-all approach to addressing chronic absenteeism, it is critical that stakeholders understand the connection between school health and chronic absenteeism and have the information necessary to implement interventions that address student health needs. Moving forward, there is an important need to educate school stakeholders about chronic absenteeism and its underlying causes and share best practices and evidence-based interventions to address the health related causes.

This brief was prepared by the National Collaborative on Education and Health. The National Collaborative on Education and Health was launched in February 2014 by Healthy Schools Campaign and Trust for America's Health to identify opportunities for the health and education sectors, individually and together with others, to contribute to ensuring that all children, regardless of income, race, ethnicity, or geography, have the opportunity to be healthy and academically successful, allowing them to reach their full potential as productive members of the United States. It has been funded by the W.K. Kellogg Foundation, the Robert Wood Johnson Foundation, Kaiser Permanente and the Conrad N. Hilton Foundation. For more information visit www.healthinmind.org.

ⁱ Ehrlich, S., Gwynne, J. A., Pareja, A. S., and Allensworth, E. M. Preschool attendance in Chicago public schools: relationships with learning outcomes and reasons for absences: Research summary. The University of Chicago Consortium on Chicago School Reform, 2013. <http://bit.ly/1nGtqg>

ⁱⁱ Hernandez, D. Double jeopardy: How third-grade reading skills and poverty influence high school graduation. Baltimore: The Annie E. Casey Foundation, 2011 April. p. 3.

ⁱⁱⁱ Balfanz, R., Herzon, L., and Mac Iver, D. J. Preventing student disengagement and keeping students on the graduation path in urban middle-grades schools: Early identification and effective interventions. *Educational Psychologist*, 2007; 42(4), 223–235.

^{iv} Utah Education Policy Center at the University of Utah. Chronic absence in Utah public schools, 2012.

^v Ready D.D. Socioeconomic Disadvantage, School Attendance, and Early Cognitive Development: The Differential Effects of School Exposure. *Sociol Educ.* 2010 Oct 26;83(4):271–86.

^{vi} Telfair J., Shelton T.L. and Reynolds H.R. Educational Attainment as a Social Determinant of Health Positive Behavior Intervention and Support: 2012;73(5):358–65

^{vii} Allen G. The Impact of Elementary School Nurses on Student Attendance. *J Sch Nurs.* 2003 Aug 1;19(4):225–31.

^{viii} Millard M.W., Johnson P.T., Hilton A., Hart M. Children with asthma miss more school: fact or fiction? *Chest.* 2009 Feb;135(2):303–6.

^{ix} Center for School Health and Education at the American Public Health Association. The Health , WellBeing and Educational Success of School-Age Youth and School-based Health Care. 2011. 2011.

^x Baltimore Mental Health Systems. Mental Health Plan Fiscal Year 2010-2011. Baltimore: Baltimore Mental Health Systems. 2011.

^{xi} Alaimo, K., Olson, C. M., Frongillo, E. A., & Briefl, A. A. Food insufficiency, family income, and health in US preschool and school-aged children. *American Journal of Public Health*, 2001; 781-786.

^{xii} Basch C.E. Healthier Students Are Better Learners: A Missing Link in School Reforms to Close the Achievement Gap. *J Sch Health.* 2010;81(10):593–8.

^{xiii} Leos-urbel J., Schwartz A.E., Weinstein M., Corcoran S. Not Just for Poor Kids: The Impact of Universal Free School Breakfast on Meal Participation and Student Outcomes. 2003 p. 1–39.

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- ^{xiv} Geier A.B., Foster G.D., Womble L.G, McLaughlin J, Borradaile K., Nachmani J, Sherman S., Kumanyika S, and Shults J. "The relationship between relative weight and school attendance among elementary schoolchildren." *Obesity* 15(8):2157-61, 2007.
- ^{xv} Hillman, Charles H. et al., *Effects of the FITKids Randomized Controlled Trial on Executive Control and Brain Function*. Pediatrics, September 29, 2014.
- ^{xvi} Welk G. Cardiovascular Fitness and Body Mass Index are Associated with Academic Achievement in Schools. Dallas, Texas: Cooper Institute, March 2009.
- ^{xvii} Branham, D. The wise man builds his house upon the rock: The effects of inadequate school building infrastructure on student attendance. *Social Science Quarterly*. 2004.
- ^{xviii} Shendell, D. G. and R. Prill. "Associations between classroom CO2 concentrations and student attendance in Washington and Idaho." *Indoor Air* 14(5): 331-41. 2004.
- ^{xix} Basch C.E. Healthier Students Are Better Learners : A Missing Link in School Reforms to Close the Achievement Gap. *J Sch Health*. 2010;81(10):593-8.
- ^{xx} Phillips, M. What makes schools effective? A comparison of the relationships of communitarian climate and academic climate to mathematics achievement and attendance during middle school. *American Educational Research Journal*, 34 1997; (4), 633-662. doi:10.2307/1163352
- ^{xxi} Zins, J.E., Weissberg, R.P., Wang, M.C., & Walberg, H.J. (Eds.). *Building academic success on social and emotional learning: What does the research say?*New York: Teachers College Press. 2004.