**Key Themes from Feedback and Questions in November 7th Webinar:**

**“Improving Children’s Health by Attending to Attendance”**

The following represent key themes from the comments and questions submitted by participants in the American Academy of Pediatrics Council on School Health webinar: “Improving Children’s Health By Attending to Attendance.”

1. Caregiver Awareness & Health Literacy
   1. Parent/caregiver’s awareness of the significance and impact of a child’s high absence rates on long-term academic achievement and health outcomes is often limited, especially for those students missing “only” several days each month. Rates are often under-reported by caregivers.
   2. Initiatives to increase health literacy on this subject are indicated in the school and clinical settings.
2. Health Care Visits and Providers Contributing to Absenteeism
   1. Physician education around the association between absenteeism, poor health, and poor academic performance is indicated. Providers inappropriately ‘excuse’ school absences for conditions which do not require extensive time away from school.
   2. Caregivers often bring children for well child visits (and dental visits, etc.) on school days, which contributes to absenteeism for not only the child, but often for siblings that accompany the child to clinic. Many listeners shared anecdotes of practices expanding and/or shifting clinic schedules to allow for appointment times that don’t interfere with school attendance.
   3. Shared knowledge between clinicians and school staff/nurse on a child’s medical diagnosis can result in school staff feeling more prepared to meet a child’s health care needs and increase attendance rates.
3. Collaboration
   1. The evidence clearly identifies chronic absenteeism as a predictor of worse education and health outcomes. Thus, it takes buy-in and a partnership between parents/families, health care professionals, school leaders/staff, and community based organizations to address this issue. Next steps for an individual clinician, practice, health or school system would include the identification of key individuals or organizations that could serve as partners and defining shared goals.
4. Data Sharing
   1. Broadly speaking, privacy policies (notably, HIPAA and FERPA) introduce challenges in creating meaningful, sustained school-and-clinician partnerships to address attendance and academic performance for individual students. However, there are examples of jurisdictions successfully coordinating care – and even piloting the sharing of attendance data – across sectors.
5. Prevention through Promotion
   1. Listeners elevated the opportunity to use traditional and social media platforms, as well as signage and other promotion tools, to raise awareness among clinicians, caregivers, and children/adolescents about the importance of school attendance and its impact on long-term health and academic achievement. Numerous respondents elevated the impact of just ASKING about attendance.
6. Resource Mobilization
   1. Evidence identifies non-clinical determinants as being majority contributors to one’s health and academic performance. Factors such as housing insecurity, domestic violence, and neighborhood violence are risk factors for absenteeism. Especially in vulnerable communities, connecting families and children to additional resources to address such social factors – and advocating for system-wide policy changes – can improve attendance rates.