



CONSORTIUM FOR CITIZENS WITH DISABILITIES

WELL DESIGNED SCHOOLS MAY PREVENT DIMINISHED HEALTH AND DISABILITY

A forum was held at the Center for American Progress (CAP) on “Turning around the Nations Lowest Performing Schools”. Participant representation was from the CAP staff and representatives through a school superintendent and chief financial officer.

Summary

There have been unprecedented federal resources directed through “School Improvement Grants” to fix the nations least successful schools. These grants are based on an input based compliance oriented management system layered on top of existing policies, programs and staffing schedules, without addressing underlying flaws. A comprehensive way in which school districts use money, people, and time to support all schools in the district. not just the struggling ones, was presented. The design provided a strategic map of overhaul of resource allocation that served to support greater equity and student performance. A prescriptive approach for using funds and program design was presented.

A five point design included a process that contained the following: 1) what each school needs, 2) quantify what each school gets and how it is used, 3) invest in the most important changes first, 4) customize the strategy to the school, 5) change the district not just the school (i.e. county and city schools merge into one district)

Disability Prevention Issues

The design for school improvement recognized that health is a prerequisite to optimal learning and that school performance is associated with incidence of special schools, poverty and special education populations. Schools often do not receive the supports they need to meet basic social, emotional and health needs of at risk students. There is need for supports for at risk students. Customized sustained interventions are needed to adequately serve these vulnerable populations.

The population based health of school age population is of concern to prevent disability. Overweight and obesity are rampant among the school population and half of students view their own health as below average and their health gets worse as they move through adolescence to adulthood (i.e. greater sedentary lifestyles, greater prevalence of mental illness and substance abuse, and risky behavior). This period is particularly devastating to vulnerable population in that it contributes to diminished health and disability. These data call for the need for student population health as a goal of education. However, this socially valid goal of education is missing from school designs for improvement as are others goals associated with independent life in the community.

Activity

There is ongoing study of population based health of the school age population with respect to diminished health and disability

Principle

Population based health of school children should be a high priority of public education.