January 21, 2016

John B. King, Jr. Acting Secretary of Educations U.S. Department of Education 400 Maryland Ave. SW, Room 3E306 Washington, DC 20202

Re: Docket No. ED-2015-OESE-0130

Dear Dr. King,

We write to you today on behalf of the Working to Improve Student Health (WISH) Coalition, which began in 2013 as a way to bring together like-minded advocates focused on improving student health. Started by Sanofi's Partners in Patient Health team, WISH has expanded to more than 120 advocates representing over 50 children's health and education advocacy groups and professional organizations to share ideas on improving the health of students, and collaborate across sectors to maximize the impact of these efforts. WISH members donate their time to work collaboratively to help elevate the importance of student health as a national priority, and elevate schools as important drivers to help ensure students have the necessary health services in order to maximize their learning potential.

Because of the work we do together and the impact this legislation has on students across the country, we appreciate the opportunity to comment on the Department of Education regulations and guidance related to the Every Student Succeeds Act (ESSA).

The coalition supports the premise of ESSA as a way to move towards closing the educational achievement gap and allowing all our students the opportunity to receive high quality education.

We applaud many aspects of Every Student Succeeds Act and see it as a great step forward to help bridge the health and education sectors. As child health advocates we know that the health of the whole child (physical, social, emotional) is a critical component that needs to be addressed to maximize learning potential. Further, schools are one of the most effective systems for reaching youth to provide health services and programs. We find it necessary to address the impact of Health Barriers of Learning on student ability to thrive in a school setting. We additionally highlight the importance of integrating health services and programs more deeply into the day-to-day life of schools and students. Some items included in ESSA that will help achieve this goal include:

 The emphasis on School Wide Programs and their focus on the needs of all students, but particularly the needs of those at risk students. Crucial in the development of a comprehensive plan is the involvement of parents and other various stakeholders (health practitioners, such as community or school-based pediatric providers, school nurses, community health centers or, counselors). We cannot highlight enough the need for strategies that address the whole child which will provide opportunities for all children in the school, but particularly the needs of those at risk. Providing counseling, school-based mental health programs, specialized instructional support services, mentoring services, and other strategies to improve students' skills outside the academic subject areas will aid in combating health barriers to learning.

- The focus on *Targeted Assistance Programs* and their inclusion of family support and engagement services and especially *integrated student support services* as a way of ensuring our students are healthy and prepared for academic success. We appreciate that states can apply for funds to develop and implement programs focused on managing a variety of conditions including Asthma, Allergy, Diabetes, Obesity, and others. The inclusion "integrated student supports" is important in providing states and school districts the resources and flexibility required bridge the gap between health and education.
- The inclusion of *Report Cards*, which use academic and nonacademic measures of quality, disaggregated by subgroup to take into account economically disadvantaged students, students from major racial and ethnic groups, children with disabilities, and English learners goes a long way in measuring progress and creating evidence based solutions.
- The focus on creating *Innovative Pilot programs on a state level*, which include tests as part of state accountability systems, but also require incorporation of other factors like school climate, teacher engagement, advanced course work) when evaluating students' opportunity to learn. We also appreciate the requirement that results must be disaggregated with each state, local education agency, and school by: Racial and ethnic group; Economically disadvantaged students compared to students who are not economically disadvantaged; Children with disabilities as compared to children without disabilities; English proficiency status; Gender; and Migrant status.
- Increased emphasis in *Parent Engagement* with an allotment of one percent of Title I funding program and the requirement to use the grants to support schools and nonprofit organizations providing professional development in the areas of increasing parent and family engagement. This parent engagement will be instrumental in improved student academic achievement and school performance, We are pleased to see that the funds reserved by local educational agency shall be used to carry out activities and strategies consistent with the local educational agency's parent and family engagement policy, including:
 - Supporting development for local educational agency and school personnel regarding parent and family engagement strategies.
 - Supporting programs that reach parents and family members at home, in the community, and at school.
 - Disseminating information on best practices focused on parent and family engagement, especially best practices for increasing the engagement of economically disadvantaged parents and family members.
 - Collaborating, or providing sub grants to schools to enable such schools to collaborate, with community-based or other organizations or employers with a record of success in improving and increasing parent and family engagement
- Providing more children access to high-quality preschool to give them the chance at an early start to their education to help combat inequalities and level the playing field for economically disadvantaged children.

We see the following as points that could be further emphasized or included within the current legislation:

- We appreciate the inclusion of disseminating information on especially best practices for increasing the engagement of economically disadvantaged parents and family members. We hope to see this information provided in a culturally competent way that takes into account information access issues.
- Emphasis on the inclusion of "Attendance" in Report Card testing, and use of data from report cards to track reasons for chronic absenteeism, with a special focus on attendance issues that could be tied to educational difficulties/disability, physical, social, or emotional health issues.

The WISH coalition appreciates the opportunity to comment on the implementation of ESSA and is pleased to serve as a resource of multiple health policy and education stakeholder experts to the Department of Education during this process. Our hopes are that this is just the beginning of support to address the whole child to ensure equitable, high quality education for our children.

Sincerely,

WISH (Working to Improve Student Health) Coalition Member Organizations and Individuals

Meryl Bloomrosen, MBA, MBI Senior Vice President, Policy, Advocacy and Research Asthma and Allergy Foundation of America

> Sally Schoessler, MSEd, BSN, RN Director of Education Allergy and Asthma Network

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