

WATCH OUT FOR THOSE ELEPHANTS

By David A. Watson, Ph.D.

Writing in the Wall Street Journal (“Educating from the Bench,” 4/27/2006, p. A29), Jay P. Greene, a Professor of Education at the University of Arkansas, recently argued persuasively that no correlation exists between per-pupil spending and student learning outcomes in public education. Professor Greene asserted that the flow of dollars into our schools has increased in recent years even while no reasonable proof exists that this either has, or will, lead to improved returns on investment (and that it is the courts who get to decide, via high-priced consultants, precisely what adequacy and equity of funding look like). For the many who consider money to be the major issue in the quality of public education, what often accompanies such a declaration is skepticism concerning the wisdom of sending good money after bad to schools that, in their view, clearly miss the mark. In other words, why not give vouchers to families so that more kids can have access to high-performing schools.

I believe that such a mindset begs two issues critically important in student achievement, namely the frequently deficient health and nutritional status of children in public schools, and the extent to which we, as their parents and guardians, are not living up to our responsibilities to them. To me, these represent elephants occupying our collective national living room, and we as a society are not confronting reality.

Recently, a report entitled “Code Red: The Critical Condition of Health in Texas” was released by a blue-ribbon taskforce (available at: <http://www.utsystem.edu/hea/codered/>). This group was comprised of eminent experts in healthcare from around the state, and was chaired by former White House Science Advisor and current Rice Professor, Neal Lane. Interesting reading, all of it, but what caught my eye particularly was the section concerning children’s health. The statistics are frightening. As many as 25% of Texas residents, many of them

children, have no health insurance, and only slightly more than 70% of our state's kids are appropriately immunized by age two (in the Houston/Harris County area it's just 64%). Less well-publicized is the connection between health, nutritional status and performance in school. A recent study from the UT Health Science Center in Houston (and attached to the "Code Red" report as an appendix) points out that a wealth of data now clearly demonstrate reduced performance by children on standardized testing as a result of both poor health and inadequate nutrition. Among the study's high-priority recommendations are: expanding the school breakfast program, and increasing from 30 to 60 minutes the physical activity requirement per day for all children in public schools.

It has, however, long been recognized that education begins in the home. A recent report from the National Center for Educational Statistics indicates that poverty, lack of one or both parents, and use of a primary language in the home other than English are all important risk factors for poor academic performance. In such environments children are less likely to be read to, a deficiency strongly correlated with decreased academic achievement. Data from the National Assessment of Educational Progress demonstrate that both parental involvement and academic achievement decline as the poverty rate increases. Having at least one parent or guardian actively monitoring a child's performance at all grade levels is important, yet the data show that it drops precipitously as children grow older. Among sixth through eighth graders, more than a quarter now care for themselves before or after school; the manner in which this time is spent can have a major impact on learning. By ninth grade, some 17 % of parents have no involvement at all with the schools, nearly 50 % no longer attend parent-teacher conferences, and only about one-quarter continue to volunteer in schools.

So, if these factors matter as much as I suggest, then why not confront them immediately and forcefully? Perhaps it is because they represent problems endemic to our society, and if their solutions were simple we would already have identified workable approaches. It is, I believe, easier to point the finger at the faceless public education establishment and suggest that the problem is inadequate or incompetent instruction, inefficient usage of public funds, or otherwise too few dollars actually reaching the classroom. We make such assumptions rather than taking a hard look at ourselves. Perhaps we should more closely examine the lives of our kids during the 17 hours of each day during which they are not in school, or ask what we can concretely do to improve the long-term health of the one in four of them lacking adequate health insurance. These are ultimately our responsibilities as a society. If globalization makes it less likely that good wages will be available to under-educated Americans, and if healthy children supported by parents or guardians are more likely to achieve to their full potential within our public education system, then it follows that it is in our own self-interest as a state and as a nation to do all we can to make both access to healthcare and involvement of caregivers in education universal for the next generation. These elephants simply must be shown the door.