



How do we return Ohio's children to 'normal'?

Dr. Tracy Nájera, executive director, Children's Defense Fund-Ohio

Childhood trauma, child hunger, chronic absenteeism, lack of technology, learning loss. These are all issues we have heard about repeatedly over the past year and will no doubt hear about more in the coming months as Ohio and other states plan to and begin reopening schools. But how do we return to normal?

Even before the pandemic, mental and behavioral health problems such as depression and anxiety were on the rise in children ages 6 to 17, according to the Centers for Disease Control and Prevention. Further research shows that social isolation can make these symptoms worse. However, we have the tools, and in many cases the resources to focus our attention and energy on supporting the well-being of children and meeting them where they are.

The Ohio Department of Education's (ODE) Each Child Our Future strategic plan, combined with its Whole Child Framework, put forth a road map and model for whole child well-being that can guide us in this moment. Adapted from research by the international educator-support organization ASCD, the framework provides an overview of what we know to be true based on human experience and the research: children don't come in pieces. Children, like adults, are affected by what's going on in their lives, from housing instability, the financial hardships of parents and caregivers losing employment and hunger to the grief of

losing loved ones. Because children don't come in pieces, neither should our policy and budget decisions to support their overall well-being.

We know schools can't solve all of these issues or fully address them, but they do serve a unique role. In many ways, schools are a critical gateway to help, support and community connections.

For many children, school is where they receive nutrition, forge trusting relationships with caring adults and receive behavioral health services. Emotional well-being and the ability for families to meet their basic needs has diminished in this past year. For many families and children, this loss has been traumatic and can have lifelong impacts on emotional and physical health.

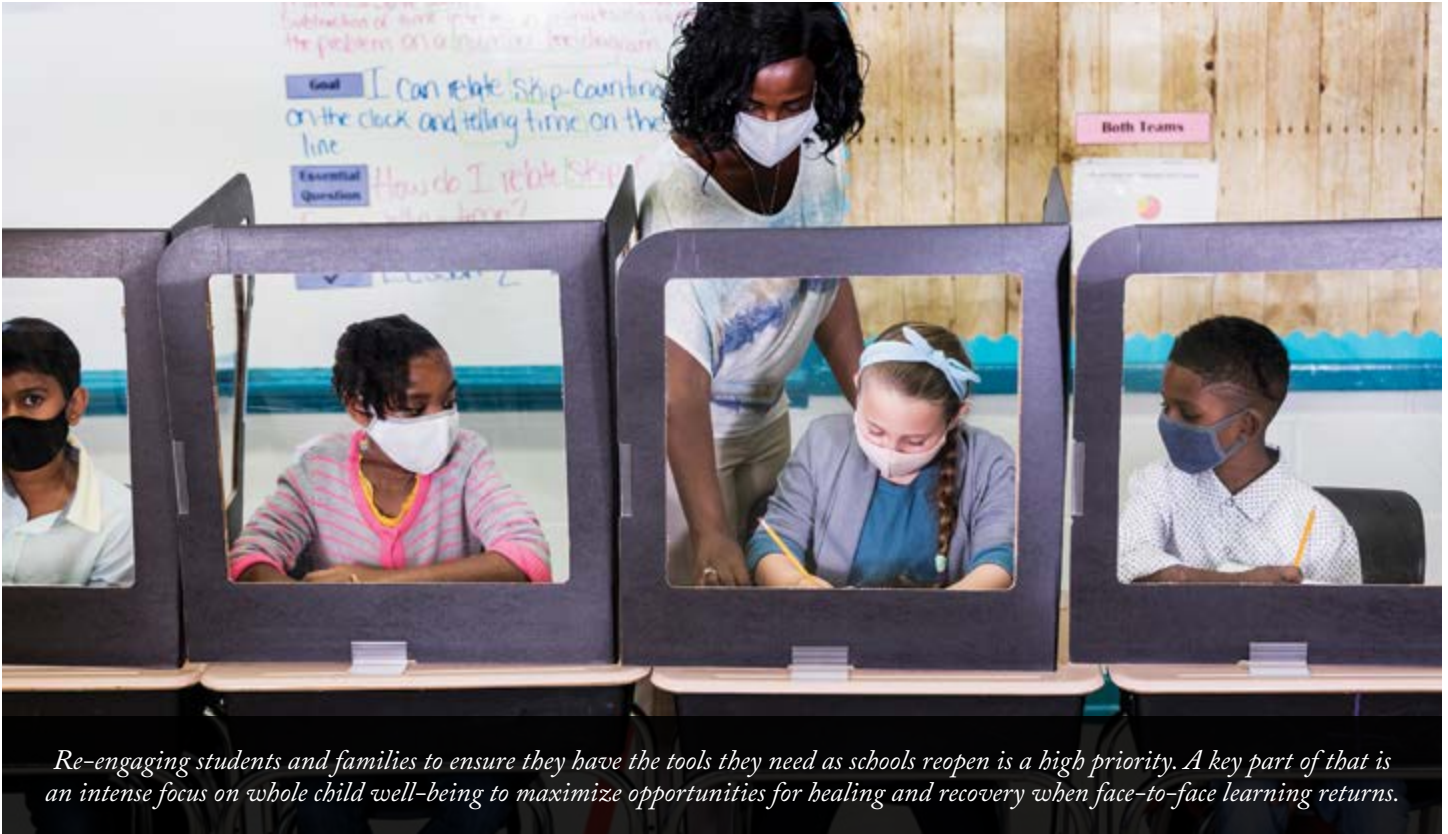
With the ramping up of vaccine distribution and planned reopening of schools throughout Ohio, there is hope and a cautious optimism for children to return to some semblance of "normal." However, as adults and educators, it is our responsibility to ensure this new normal heeds lessons learned from the last year about student well-being and success. We must be focused on the noninstructional as well as academic aspects of child well-being to maximize opportunities for healing and recovery that returning to face-to-face learning represents.

The U.S. Census Bureau's Household Pulse Survey reported the following:

- 14% of Ohio families with children reported in October that there was sometimes or always not enough to eat in their household
- 15% of Ohio families with children said they had only slight confidence or no confidence at all that they would be able to make their next rent or mortgage payment on time
- 7% of Ohio families with children lack health insurance
- 23% of Ohio respondents with children in their household reported that they had felt down, depressed or hopeless

In February, Gov. **Mike DeWine** announced \$2 billion in one-time federal funding to address learning loss and get Ohio students back on track. The learning loss was not surprising; in fact, we expected this. However, what has been surprising is the absence rate — nearly 1 in 4 students across Ohio are "chronically absent," meaning they have missed more than two days each month or 18 days for the school year. In fact, enrollment in pre-K-12 public schools declined by 3% between fall 2019 and fall 2020, due mostly to parents delaying preschool and kindergarten.

Re-engaging students and families to make sure they have the tools they need to return to school is a high priority.



Re-engaging students and families to ensure they have the tools they need as schools reopen is a high priority. A key part of that is an intense focus on whole child well-being to maximize opportunities for healing and recovery when face-to-face learning returns.

This is especially important, considering the infrastructure and attendance challenges that have come to light. These challenges have had a disparate impact on children and communities of color and those who are economically disadvantaged. These include:

- Limited internet connectivity and a lack of technology devices created significant barriers to learning despite the efforts of school districts. This was revealed in August 2020’s Remote Learning Plans that ODE asked districts to submit.
- According to ODE data, chronic absenteeism is up in both rural and urban districts since last year by 5% and 13%, respectively.
- The data also shows how the pandemic’s challenges have had disparate impacts on Black children and other children of color. For instance, in a sample of 10 Ohio school districts, nearly half of all Black students were chronically absent, missing more than 10% of the school year so far.

Also, while a majority of students did take fall assessments, those who were not able to take the tests in person were predominantly students of color. And, these students also were more likely to be disabled and economically disadvantaged, demonstrating the intersectionality of systems of disadvantage that have created inequities in educational access.

So, as conversations around learning loss dominate

educational spaces, press conferences, webinars and everywhere in between, it really begs the question: What does learning loss actually mean and how important is it when we consider whole child well-being and returning to “normal”? In other words, what have our children really lost that we must prioritize in this time?

A recent article in Education Week featured a piece written by **Neema Avashia**, a veteran eighth-grade civics instructor in Boston Public Schools. During distance learning, Avashia created spaces for her students to share what they were going through and, in one of those sessions, she asked them “During the pandemic, what are things that you feel like you’ve lost?”

Brain development in adolescence

According to a report by Child Trends, trauma experienced in childhood and adolescence can have a significant effect on brain development. This disruption can have an impact on a youth’s attention and focus, self-regulation, impulse control and physical health if not addressed and treated.

Before the pandemic, the report found that Ohio was one of the five states with the highest rates of childhood trauma, with one of the highest rates of children under age 17 who experienced three or more adverse childhood experiences.



Here are some of her students' responses:

- "I lost my ability to be happy. Staying in the house is not for me. Basketball really helped my depression, and I can't play it now. I've lost a lot of interest in my friends. I stick to myself."
- "I lost family, I lost myself, and what hurts me more is that I lost everyone who said they were going to be there for me."
- "I lost time I could have been enjoying my childhood."
- "I have less motivation for school."
- "I've lost myself."

What have our children really lost? Relationships. Loved ones. A sense of belonging and connection. Opportunities for socialization and play. Supportive adults and communities.

Although adolescence offers a key window of opportunity in the brain's development to rewire itself and heal from trauma, this is much more difficult ground to recover, more than grade levels and hard skills, especially as time passes. Research conducted on child well-being after recent natural disasters found that unaddressed mental and behavioral health in the aftermath of traumatic events can persist for years and into adulthood. Unaddressed childhood trauma could potentially affect later relationships as well as the ability to be successful in higher education, the military, the workforce and other facets of life.

In a recent survey that the Children's Defense Fund-Ohio conducted with the Ohio PTA, preliminary findings indicate that an overwhelming majority of respondents believe that schools should prioritize the mental and behavioral needs of students followed by a focus on

School district supports for whole child focus:

- Positive behavioral interventions and supports
- School safety training
- Get 2 School Network
- School-based health care
- Ohio Student Wellness and Success Funds

socialization and face-to-face interactions. When asked about instructional support that is needed, parents responded with overwhelming support for smaller class sizes, more personal attention and greater access to tutors and instructional supports for their children.

As a community, we absolutely should be concerned about the pandemic's impact on children and their learning. However, there is much more to children's well-being and their ability to be successful than just the notion of learning loss. Further, children who are healthy and have their basic needs met are more prepared to learn and ready to make up lost ground.

The following are recommendations of what must be done at both the federal and state levels to support child well-being.

Help from the American Rescue Plan Act of 2021

Federal funding in the Biden educational proposal will help schools reopen more quickly and more safely, with funding dedicated to helping schools avoid layoffs, increasing access to school nurses and ensuring schools can socially distance with essential personal protective equipment as more and more people are vaccinated.

Protect student wellness and success funding in Ohio's executive budget

Simply reopening schools will not guarantee students are in a better position to learn. Traumatized, anxious and depressed brains do not easily absorb information, engage in critical thinking and focus on learning. Fortunately, DeWine's proposed executive budget not only protects the \$675 million for the Ohio Student Wellness and Success Funds allocated during the last budget but also increases investments in these wraparound services for school districts by \$100 million in each fiscal year of the upcoming biennium.

These dollars need to be protected and used to address whole child well-being. We also need to consider how these funds might be used more effectively to forge partnerships between schools and local health professionals to address gaps in care. Further, more data is needed from the last biennium on their use by school districts to understand how we can further support child well-being and health equity in Ohio communities during the pandemic and beyond.



In a recent survey, parents responded with overwhelming support for smaller class sizes, more personal attention and greater access to tutors and instructional supports for their children as schools reopen.

Expand school-based health and community-connected care

Healthy children are better learners. My colleague, **Kelly Vyzral**, Children’s Defense Fund-Ohio senior health policy associate, published a report recently outlining the importance of school-based health care in ensuring children have access to critical health services. School-based health care, coupled with community-connected care, can ensure children and their families have medical homes that provide high-quality, continuous and comprehensive coverage, even when schools are closed or not in session.

Survey students to collect data on what they want and need

Policymakers should listen to students and make children’s mental and behavioral health the priority right now as we reopen and plans are made to address learning gaps. The only people who have experienced pandemic education as learners in our schools are our children. We should value their lived expertise by listening to them and making them part of the process to recover and emerge from this pandemic. Valuing youth voice and using tools to address children’s feedback and insights can create a fuller perspective of their well-being and provide additional approaches to meeting their needs.

For example, the Ohio Youth Experience Survey, developed

by the state of Ohio and free to school districts, can provide critical information on behavioral health, mental health and other risk factors. When paired with the support and partnership of Alcohol, Drug Addiction and Mental Health boards and other community providers, children and families have access to the fuller array of services needed to meet diverse needs. The survey is posted at <https://ohyes.ohio.gov>.

Children represent the future of Ohio and can make a difference in the prosperity of our state, much more so than any marketing efforts can. The well-being of our children rests, in large part, on the decisions that adults make on their behalf. Let’s make decisions that ensure children feel seen, heard, loved and nourished. As such, let’s focus on their needs and set up our children for their best shot of success and one that meets their whole well-being. ■

About the author: Dr. Tracy Nájera is the executive director of Children’s Defense Fund-Ohio, a nonprofit child advocacy organization that has worked relentlessly for more than 40 years to ensure a level playing field for all Ohio children. The organization champions policies and programs that lift children out of poverty; protect them from abuse and neglect; and ensure their access to health care, quality education and a strong moral and spiritual foundation.



“When you educate one person you can change a life, when you educate many you can change the world.”

Shai Reshef

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