

Closing the Gap Between School & Community Partnerships

*An assessment of schools
in Indianapolis* 2021



Closing the Gap Between School & Community Partnerships

AN ASSESSMENT OF SCHOOLS IN INDIANAPOLIS

2021

Marion County Commission on Youth, Inc.

www.mccoyouth.org

Acknowledgments

The work outlined in this report was a collaborative effort carried out by the Education Action Team. However, specific acknowledgment is given to the following individuals for their expertise, generosity, and support:

Richard Bray – Community Partnerships Manager, IUPUI Office of Community Engagement

Idamarie Collazo – Manager of Outreach & Partnerships, MCCOY, Inc.

Andrea S. Cotton, LCSW – Social Services Specialist, Indianapolis Public Schools

Angel Crone, MPH – Prevention Intern, MCCOY, Inc.

Addison Crouch, MPH – Prevention Intern, MCCOY, Inc.

Dr. Chris Duzenbery – Director of College and Career Readiness, MSD of Decatur Township

Dr. Silvia Garcia – Director of Research and Assessment, IUPUI Office of Community Engagement

Jim Grim – Director of University/ Community School Partnerships, IUPUI Office of Community Engagement

Madelyn Gregory – Communications Director, MCCOY, Inc.

Ariana Gurrola – Prevention Intern, MCCOY, Inc.

Rujuta Parekar – Prevention Intern, MCCOY, Inc.

Kate Roelecke, MPH, CHW – Early Intervention and Prevention Director, MCCOY, Inc.

James Taylor, MSW – Director of Student/ Social Services, MSD of Warren Township

Sarah Williams – Policy and Advocacy Director, MCCOY, Inc.

About the Early Intervention Planning Council

The overarching goal of the Early Intervention Planning Council (EIPC) is to reduce the number of children entering the Marion County child welfare and juvenile legal systems by improving the coordination of and access to youth services in the county. Research indicates that early intervention services, which help children and families address problems before they become crises, can make a critical difference to young people and families at risk.

The City-County Council of Indianapolis- Marion County, as described in City-County Ordinance No. 70, established the EIPC in 2005. The Marion County Commission on Youth, Inc. (MCCOY) became the designated convener for the EIPC in 2009 and works with the Council and its partners to study the complex issues that contribute to child and family involvement in the welfare and legal systems and develop strategies for preventing that involvement. The mission of the EIPC is to eliminate and prevent child abuse, neglect, and youth involvement with the juvenile legal system through comprehensive efforts that coordinate, build capacity, and advocate for high-quality early intervention and prevention services in Marion County, Indiana.

We envision a community where all children are safe and free from abuse or neglect, receiving the care, support, and resources they need to grow into healthy and fully contributing members of society. We believe all caregivers need to have the necessary supports and resources to provide a safe and healthy environment for children, thus eliminating and preventing child abuse, neglect, and involvement with the legal system.

The EIPC carries out its mission through the following activities:

- **Bringing about systems change** by digging into the harder problem-solving work that no single agency can complete on their own.
- **Building capacity for the youth-serving workforce** by providing appropriate training and development to staff.
- **Utilizing data for continuous learning** and improvement to make policy and practice decisions.
- **Promoting service and resource coordination** to increase access and utilization of services.
- **Advocating for prevention and early intervention resources**, including an equipped workforce of youth-serving professionals.
- **Partnering with youth and families** as key stakeholders and decision-makers in systems change.

A list of the Early Intervention Planning Council Members can be found in **Appendix A**.

About the Education Action Team

The Education Action Team is a subset of the Early Intervention Planning Council formed in 2017 to carry out activities from the 2017-2020 Strategic Plan:

- Support the education of school leadership and staff on prevention and early intervention (protective factors), trauma-informed care, and cultural competency.
 - Assess training needs for school personnel to create connections to training providers in the community.
 - Share best practices and key learnings in moving towards positive school discipline and trauma-informed school practices.

Additionally, a Culture of Health Leadership Team was convened in 2017 by the Family, School, and Neighborhood Engagement (FSNE) department in the Office of Community Engagement at IUPUI, supported by the Robert Wood Johnson Foundation and Coalition for Community Schools. This interdisciplinary group featured university representatives from the Schools of Medicine, Public Health, Dentistry, Nursing, Education, Social Work, and Optometry, in collaboration with Interprofessional Education, community schools, the public health department, parents, and 10 key community groups including MCCOY. The Culture of Health Team focused on the five Near-Westside community schools engaged in a \$2.4 million U.S. Department of Education Full-Service Community Schools project facilitated by Mary Rigg Neighborhood Center. A related project through Robert Wood Johnson Foundation funding, engaged doctoral nursing students to support school communities in creating trauma-responsive environments, demonstrating a community-engaged, university-assisted approach to helping neighborhoods solve problems they identify [1].

The Culture of Health Leadership Team merged with the EIPC's Education Action Team in 2020, based on the shared focus on social/emotional learning, mental health, chronic absenteeism, and creating trauma-responsive school communities. The representatives of multiple school districts throughout the city, mental health providers, Communities in Schools Indiana, and other vested partnering organizations take a broader perspective beyond the Near-Westside and explore the more expansive approach to collectively address the social and emotional needs of students and families throughout Marion County.

This report outlines the assessment process, key findings, and recommendations to help create stronger connections between schools and community resources that support student success. The assessment process and the resulting recommendations extend beyond training needs.

A list of the Education Action Team Members can be found in [Appendix B](#).

Table of Contents

Table of Contents	4
Executive Summary	5
Overview	5
Connecting Recommendations to Key Findings	6
Introduction.....	10
Methods and Results.....	18
Survey Results.....	18
Discussion of Survey Findings.....	27
Community Conversations Results.....	32
Discussion of Community Conversations Findings	36
Key Informant Interviews	37
Discussion of Key Informant Interview Findings.....	43
Recommendations.....	44
Adopt Whole Child Approaches.....	46
Engage Families through Strengths-Based Practices.....	49
Support and Strengthen Community Schools.....	53
Increase Investment in Public Education	57
Future Directions	60
References Cited	61
Appendices	67
Appendix A: 2020 Early Intervention Planning Council	68
Appendix B: 2019 – 2020 Education Action Team.....	69
Appendix C: 2019 School Needs Assessment Online Survey	70
Appendix D: 2019 School Needs Assessment Survey – Requested Trainings	76
Appendix E: Community Conversations Protocol	77
Appendix F: The Socioecological Model (SEM).....	82
Appendix G: Maslow’s Hierarchy of Needs.....	83
Appendix H: Key Informant Interview Protocol.....	84

Executive Summary

Overview

Our children spend a significant amount of time in school – and success in school sets the foundation for successful careers and contribution to our communities. However, in recent decades, we have seen what the disinvestment to public education has done to individual schools and school systems. The past year, during the Covid-19 global pandemic, schools have faced even more challenges, navigating school closures, virtual learning, and hybrid models. Research clearly connects multiple external factors and academic success. With a global pandemic layered onto limited funding and capacity, schools continue to struggle to provide the supports students and their families need to address the challenges and struggles reflected in the classroom.

In 2018, the Education Action Team of Marion County's Early Intervention Planning Council launched an assessment to identify the issues impeding student success from the perspective of school personnel. Additionally, we sought to identify barriers to building stronger partnerships with community resources. **Marion County, Indiana is resource rich but systems poor** – our community lacks a cohesive network of community services for schools to tap into, thus teachers and staff navigate a fragmented system.

Through an online survey, three community conversations, and key informant interviews, we were able to identify key findings that can inform strategic actions moving forward to strengthen the ability of schools to meet student needs – whether they develop within the classroom or not. Our findings show some of the top issues impacting student success are challenges that all exist outside of the school building:

- Social and Emotional Health
- Trauma and Violence
- Mental Health
- Chronic Absenteeism
- Social Media and Internet

School staff are often left trying to address the symptoms of these complex, adaptive challenges, yet they do not have the capacity to fully tackle the root causes nor should they be expected to do so alone. This emphasizes the need to build strong partnerships with community resources, in addition to building the capacity of school personnel to carry out effective solutions inside the classroom. Moreover, schools realize that family engagement is a proactive strategy to support students and building trust with families is paramount.

Stronger school-community partnerships and networks will more effectively work towards the systems change necessary to support learning. The recommendations put forth in this report work across multiple levels to provide holistic solutions to the complex problems discussed in our findings from the assessment. Schools and community organizations can join us in taking the necessary steps to building supportive community networks around our schools and advocating for the investment needed to create safe, healthy learning environments for our children.

Connecting Recommendations to Key Findings

Adopt Whole Child Approaches

Social and Emotional Health/ Mental Health are significant issues of concern to school personnel.

Social and emotional health plays a critical role in the classroom by providing students with a foundation for safe and positive learning and enhancing students' abilities to succeed in school, careers, and life.

In recent years, mental health challenges have been increasing amongst Indiana youth. The Indiana Youth Institute reports that 5.4% of Indiana children ages 3 – 17 years have been diagnosed with depression at some point in their life (compared to 4.2% nationally) [2]. The percentage of students who seriously considered suicide has been steadily increasing [2]. Schools are making every effort to connect students to the services they need to mitigate the consequences of mental, social, and emotional health challenges.

In the whole child approach, every aspect of a child's life is taken into consideration, including their mental, social, and emotional health. By focusing on giving children the skills they need to be successful in the long term, schools can ensure that children create lifelong habits of health, both physically and mentally [3].

The challenges impacting student success are interrelated and connected.

A study completed by the Learning Policy Institute summarizes the effects a positive school climate, social emotional learning, and productive teaching strategies can have on academic achievement [4]. The entire school experience impacts learning – in addition to experiences outside of school. The challenges impacting student success are interrelated and connected. The whole child approach is centered on addressing the various needs of children, in the classroom and beyond.

Educators and school personnel we talked with commonly referenced the fragmentation of the education system and how there is often a narrow focus on the symptoms of problems, rather than root causes. The Learning Policy Institute report recommended focusing on system-level strategies that provide developmental supports for young people, in addition to designing school settings for healthy development [4]. When schools align efforts through the whole child approach, various parts of the system work together to address root causes of academic challenges.

Engage Families through Strengths-Based Practices

School personnel understand the importance of family engagement.

Across the various methods we collected information for our assessment, family engagement was a preeminent topic. Each of our key informant interviews identified family support and engagement as a critical component to student success. However, school personnel also identified several of the barriers highlighted by Search Institute's research: time, transportation, embarrassment or stigma, and lack of trust [5]. Teachers and support staff expressed wanting a partnership with parents but experiencing pushback, and they expressed that if community resources are hard to access, families will not try.

Shifting the approach school sectors take for family engagement will require intentionality and a deliberate commitment to putting new practices in place. Implementing the practices promoted by the Search Institute could help school personnel build trust with families, something mentioned multiple times in our key informant interviews.

Trauma and Violence are key issues of concern to school personnel.

Strengths-based approaches complement the trauma-informed practices many schools are working to implement. In addition, trauma-informed trainings and resources were one of the top requests gathered through our community conversations (refer to [Appendix E](#)). Key informants also acknowledged the impacts of trauma, sharing stories of their own experiences interacting with students and families.

Trauma-informed approaches ask, “What happened to you and how did you survive?” [6]. Strengths-based approaches seek to understand how someone’s behavior is impacted by the resources available to them. Both approaches work together as they are sensitive and respectful, allow for genuine trust, bring hope, invite curiosity rather than criticism, resolve shame, and build resiliency [6].

Support and Strengthen Community Schools

Social and Emotional Health/ Mental Health are key issues of concern to school personnel.

Our assessment identified the need for more mental health services and increased focus on students’ social and emotional health. Community schools provide the opportunities to increase access to resources, such as mental health services, social and emotional supports, family stability programs, peer conflict resolution, and positive discipline practices [7]. Students can make deeper connections and build social supports among staff at the school and with community members because these opportunities extend outside of school and are available before, during, and after school [7].

Schools face complex systemic challenges and lack of resources.

Teachers and student support staff are overworked, underpaid, and often expected to do jobs falling outside their expertise and professional role. They are stretched thin and often feel there is not enough time or resources for them to help individual students, let alone the larger systemic problems surrounding that student. Throughout our community conversations, it was expressed that there was a need for more training and professional development to meet students where they are and offer support. Our school professionals want to do this, but either do not know how or are not able due to limited resources and capacity.

Additionally, our key informant interviews highlighted how important family engagement is to the education process. Parents may be struggling or lack important skills that ultimately impact the student and their success in school. Until parents and caregivers are included in the conversation, given a voice, and the support they need, students needs cannot be fully addressed.

The Community School Model builds partnerships between the school and existing resources and assets within the community to meet student **and** family needs [7]. In a study completed by the Center for American Progress in 2012, more than 70% of students in a California community school were receiving one or more supports, including extended learning, family engagement, and social support services – a significant increase from before the community school model was implemented [8].

This model also values inclusive leadership and shared ownership across the school community, ultimately shifting accountability and allowing parents and community leaders to have an active and empowered role in the school [7]. This redistribution of responsibility empowers family and community voice while allowing school personnel to get back to their mission – educating students.

Building trust is a critical step to establish partnerships with parents and community services.

In research on school improvement, Tony Bryk describes relational trust as “the connective tissues that holds improving schools together” [7]. Throughout the community conversations and the key informant interviews, trust and strong relationships came up time and time again. The Community School Model depends on trust to maintain stakeholder engagement.

Relational trust is built by ensuring that families and the community are treated as equal partners and have true say in the vision and decision-making of the school, then continue to work collaboratively to assess data and plan improvement strategies [7]. In the Community School Model, relational trust is built upon four attributes: respect, personal regard for others, competence, and integrity [7].

Chronic Absenteeism is a key issue of concern to school personnel.

Our survey identified chronic absenteeism as one of the top five challenges most impacting student success. According to the U.S. Department of Education, 16% of the student population missed 15 or more days of school in the 2015-2016 school year [9]. Policies and procedures addressing chronic absenteeism were discussed at length during our community conversations, with little consensus of a successful remedy. Research indicates that the integrated student supports provided by Community School Models are associated with positive student outcomes [10]. Students receiving counseling, basic health care, dental services, and transportation assistance have shown remarkable improvements in attendance, behavior, social functioning, and academic achievement [10].

Increase Investment in Public Education

School personnel express a lack of capacity and resources to address challenges.

Researchers outline four categories of school capacity: human capital, social capital, program coherence, and resources [11]. All four categories are enhanced through the investment of funding. Human capital includes the knowledge and abilities of the school staff – funding supports teacher salaries and professional development. Social capital is the network of relationships that the school fosters – both within the school and the surrounding community. Program coherence is the degree to which the instruction, resources, and staff in the school are coordinated and integrated into a common framework. Finally, resources are the physical or organizational tools that a school has at its disposal to make its improvement goals reality – classroom supplies, textbooks, technology, and other needed resources [11].

Schools with higher capacities are often from districts with higher wealth. In high-capacity schools, class sizes are small, and the school hires a greater number of support staff [11]. This is also evident in our assessment findings – suburban schools who participated in our survey indicated the support of school psychologists, school resource officers, and school counselors at a higher percentage than Indianapolis Public Schools, Decatur Township, and other schools within Marion County. Within our own community, we can see the divisions between school districts across township and county lines.

When schools are adequately funded, they are clearly more effective. We must move beyond common frameworks of equality and adequacy to evaluate equitable school funding policies [12]. While it costs more to educate low-income students and support them by providing resources, the return on investment far outweighs the investment. Using funding to strengthen core services such as early childhood education, quality teachers, and exposure to rigorous curriculum benefits student achievement and the future of our economy and democracy [12].

When schools are adequately funded,
they are clearly more *effective*.



Introduction

More than half of Indiana’s public-school districts closed November 19, 2019 for more than 15,000 school personnel and supporters to participate in the Red for Ed Action Day organized by the Indiana State Teachers Association (ISTA) and other labor groups. ISTA had specific goals for the day of action; however, many teachers and school personnel expressed more far-reaching reasons for participating that day.

Teachers want what children need.

Randi Weingarten, President of the American Federation of Teachers¹

Schools across the country face similar challenges. Disinvestment in K-12 funding since the 2008 recession has affected school inputs such as teacher salaries and student resources while also significantly impacting outcomes such as academic achievement and opportunity [13]. Cutting positions such as school psychologists, counselors, social workers, and academic interventionists puts additional stress on teachers, who have fewer resources to support students with behavioral or emotional challenges [14].

I’m here to stand up for my students. My babies, our babies, need more.

Willandra Malone, 4th Grade Teacher, Edinburgh¹

School counselors and psychologists address the variety of barriers that impact student success. Research studies confirm the links between mental health, psychological distress, and trauma and multiple measures of student success, including homework trouble, absenteeism, course failure, and lower standardized test scores. Professionals in these support roles work with teachers and families to address social, behavioral, and emotional student challenges; lead support groups; implement prevention programming; and assist schools during times of crises, such as student suicide [14].

It’s a combination specialty. The solution to a psychology problem may be an academic intervention, and the solution to an academic problem may be a psychological intervention. Recognizing the connection between these worlds is important.

Frank C. Worrell, Director of the School Psychology Program at University of California, Berkley [14]

¹ Courtesy of IndyStar: ‘We will fight’: Thousands of Red for Ed teachers rallied inside and outside Statehouse, published November 19, 2019. Written by Arika Herron and MJ Slaby.

Disinvestment in Indiana Schools

A report from the American Federation of Teachers (*A Decade of Neglect: Public Education Funding in the Aftermath of the Great Recession*) explains how Indiana's tax and education reforms have left public schools, teachers, and students behind.

In 2000, Indiana began shifting investments from traditional public schools to charter school and voucher programs. In 2002, the state had 11 charter schools and no voucher programs; by 2016 there were 80 charter schools enrolling about 40,000 students. Charter schools received more than \$300 million in taxpayer dollars per year, while nearly 35,000 additional students received \$150 million in private-school vouchers.

In 2009, Indiana capped property taxes. Combined with a \$300 million cut in the state education budget in 2010, school districts – and ultimately, students – suffered. In 2013, then-Governor Mike Pence signed legislation that eliminated the state's inheritance tax and reduced the personal and corporate income tax rates. The policies resulted in Indiana reducing its tax funding by 12% between 2008 and 2015.

Such changes in the state's tax code mean the three systems – the traditional public-school districts, charter schools, and voucher programs – all compete for less and less revenue. Today, Indiana has among the 10 most regressive state and local tax systems in the country, and many school districts still struggle to raise necessary revenue because of the property tax caps [15].

School districts and communities do not compete for this revenue equally. Communities with higher socioeconomic populations generate more tax revenue for schools to benefit from, while lower-income communities generate a smaller tax base for schools to access. This funding structure creates a vicious cycle – better property taxes beget better schools, which ultimately leads to better property taxes down the road. Lower property taxes can result in struggling schools, harming the community further.

If education is truly to be an engine of opportunity and economic mobility, states and the federal government must invest far more in the communities that need resources most.

Center for American Progress [13].

Resource Rich but Systems Poor

Marion County, Indiana is not immune to complex adaptive challenges. With state agencies, city offices, county initiatives, social services, nonprofit organizations, faith-based organizations, neighborhood associations, and so much more, Indianapolis is a tangled web of services and resources that families still seem to slip through – a safety net with gaping holes. Schools are often viewed as a pipeline for community resources to connect with students and families. With the continued disinvestment in schools and proliferation of community resources, effective partnerships between the two sectors are more critical than ever.

This report aims to identify the challenges students in Marion County face, assess the barriers that keep schools and community resources from connecting, and identify opportunities to collaborate to support student and family success. We identify the issues that students face outside the classroom that impede their academic success, the existing resources and services accessible through schools, and the barriers to establishing more effective partnerships with community resources and services. The findings from this assessment led us to develop recommendations centered on strengthening partnerships between schools and community resources, effectively closing the gap so more families can access the support they need to help their children succeed academically and throughout life.

Area of Focus: Marion County

Marion County, the most populous urban county in Indiana, is home to the state capital (Indianapolis) as well as the largest school district in the state, Indianapolis Public Schools. More than 235,000 children ages 0 – 17 years live in Marion County (see Figure 1) [16]. Marion County is one of the most diverse counties in the state (see Figure 2) and faces complex challenges due to its urban setting. The county had the highest number of juveniles (103) committed to the Department of Corrections in 2019 [17]. Marion County also has the highest percentage (46%) of single parent families [17].

FIGURE 1: CHILD POPULATION BY AGE GROUP IN MARION COUNTY

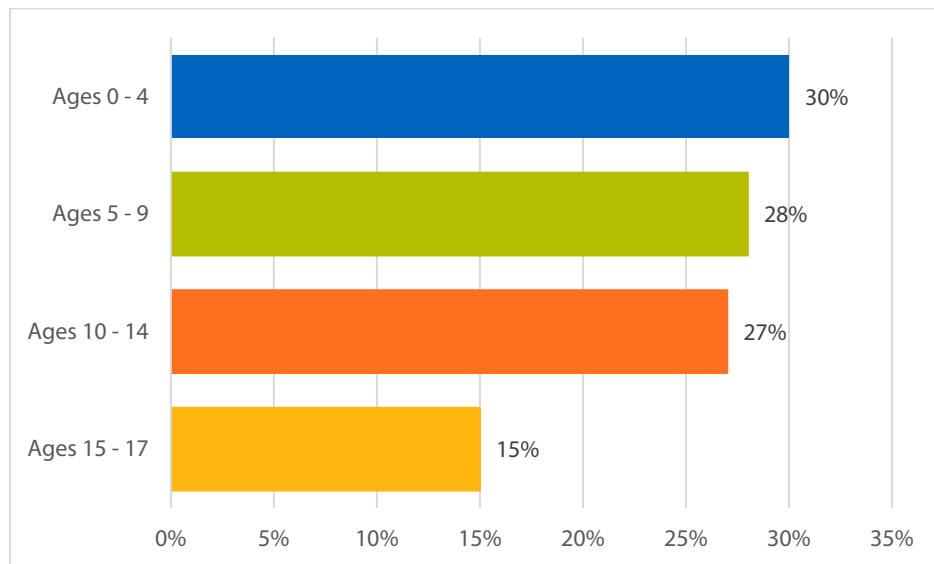
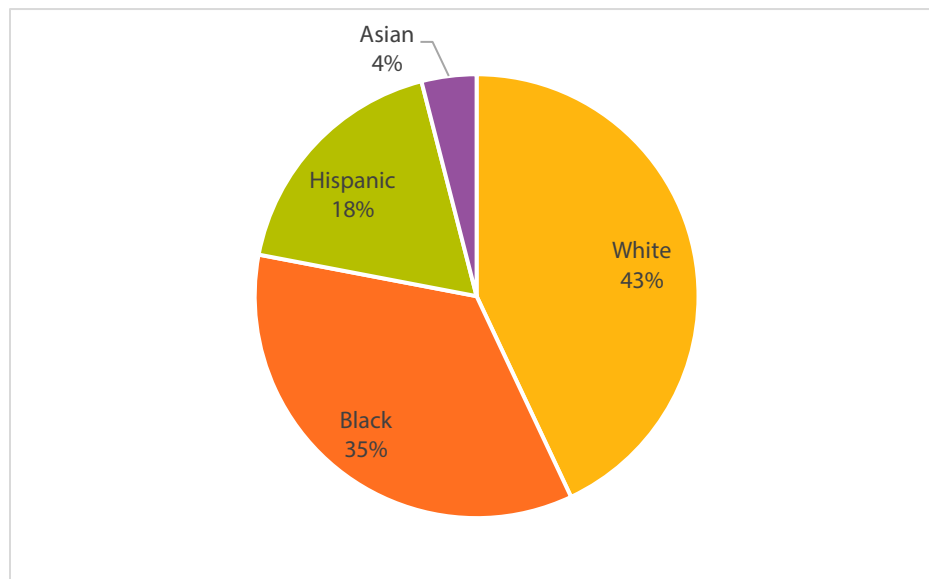


FIGURE 2: CHILD POPULATION BY RACE AND ETHNICITY IN MARION COUNTY



Like many urban communities, Marion County is a dichotomy of economic wellbeing. While Marion County's per capita personal income is more than \$50,000, the county poverty rate is 17.2% [18]. In 2019, an average of 1,020 families received Temporary Assistance for Needy Families (TANF) and 129,001 families received SNAP benefits [18]. **Childhood poverty is a significant issue in Marion County**; 25% of children ages 0 – 17 years are growing up in poverty and the county has the state's highest percentage (58%) of students receiving free lunch and the highest number (4,942) of students experiencing homelessness [17].

Marion County Schools

Multiple types of schools exist in Marion County, including traditional public, private, charter, and township schools. The largest school corporation is Indianapolis Public Schools (IPS), serving more than 25,000 students in 75 schools in the center area of the county overlapping Center Township. Beyond Center Township, the outer communities of the county are broken into eight additional townships: Decatur, Franklin, Lawrence, Perry, Pike, Warren, Wayne, and Washington. Each outer township has a Metropolitan School District (MSD) serving the students within that area. In addition to these public-school systems, there are about 135 private schools in Marion County, including 32 high schools.

In recent years, policymakers have supported the charter school movement. While these charter schools remain tuition-free (unlike private schools), they independently control their own curriculum, staffing, organization, and budget. Charter schools usually are headed by a tax-exempt nonprofit board recognized by the Internal Revenue Service. In Indiana, charter schools must have an authorizer. This entity could be a four-year public or private university, the Indianapolis Mayor's Office, the Indiana Charter School Board, or districts can request authorization from the Indiana State Board of Education. Authorizers may collect up to 3 percent of a school's state funding to pay for its authorizing work. There are about 90 charter schools in Marion County, nearly all within the IPS district.

Our report, while encompassing Marion County as a whole, shares specific data from community conversations held in three districts: Indianapolis Public Schools, MSD of Decatur Township, and MSD of Warren Township. Brief descriptions of each district are provided below (see Figures 3 – 8).²

Indianapolis Public Schools

Indianapolis Public Schools was incorporated in 1853. The school system experienced a significant amount of growth between 1920 and 1960 due to population increases in Indianapolis – eight new high schools and several elementary schools were added during that time. Since its peak in the late 1960s, enrollment fell by nearly 70% due to demographic shifts, leading to the subsequent closure of multiple IPS high schools. In the 2010s, IPS significantly restructured its school district, consolidating school facilities, and closing additional high schools. Of the original 11 IPS high schools, only four remain: Shortridge, Arsenal Technical, Crispus Attucks, and George Washington [19].

Today, IPS remains the largest school district in Indiana, serving more than 25,000 students. Most of the students are non-White. IPS serves a diverse student population and nearly 30% of IPS students are English learners. Within the district, 66% of students are economically disadvantaged. With a population of students experiencing numerous challenges of poverty, systemic racism, and structural violence, only 75% of all students graduate within four years and 27.9% of students are chronically absent [20]. The median household income within the district is \$37,403 [21].

Decatur Township

MSD of Decatur Township serves the Southwest corner of Marion County. The first school in Decatur Township was constructed in the 1870s in the small town of Valley Mills near Highway 67. The graduating class of 1890 consisted of eight people. The school building was constructed of brick and had three rooms and a bell tower above the entrance. The Township Trustee managed the school and hired its teachers [22]. Today, Decatur Township has an overall population of about 34,000 residents, with a median household income of \$54,588 [23].

Decatur Township schools enroll 6,825 students, 63% of whom are White. Within the district, 68.8% of students are economically disadvantaged and 7.6% are English learners. Despite a high percentage of students facing economic challenges, Decatur Central High School has a graduation rate within four years of 85.3%. However, the district is also challenged by absenteeism – 18.8% of students are chronically absent [24].

Warren Township

MSD of Warren Township is a grades PreK – 12 public school district serving the Far Eastside of Indianapolis. The township is named for Dr. Joseph Warren, an American physician who played a leading role in the American Revolution. The first school building went into operation in 1827. In 1951, the Township Trustee divided Warren Township into nine areas – Warren’s current nine elementary schools are on or nearby these original school sites [25]. There are 105,177 residents in Warren Township and the median household income is \$47,925 [26].

Warren Township schools enroll 11,830 students, with a diverse student population of 53.8% Black, 20.4% White, 17.2 % Hispanic, and 7.9% multiracial students. In Warren Township, 63.1% of students are economically disadvantaged and 9.9% are English language learners. The graduation rate in Warren Township is 85.2%, while 19.2% of students are chronically absent [27].

² Information reflects data from the 2018 – 2019 school year, which aligns with our primary data collection process.

FIGURE 3: STUDENT ENROLLMENT

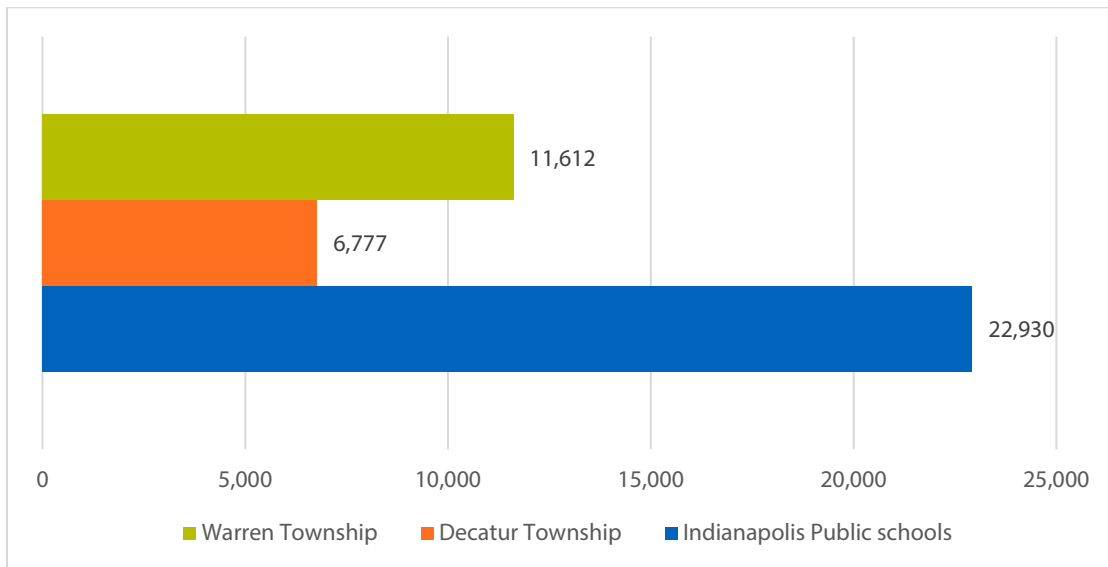


FIGURE 4: STUDENT POPULATIONS BY RACE

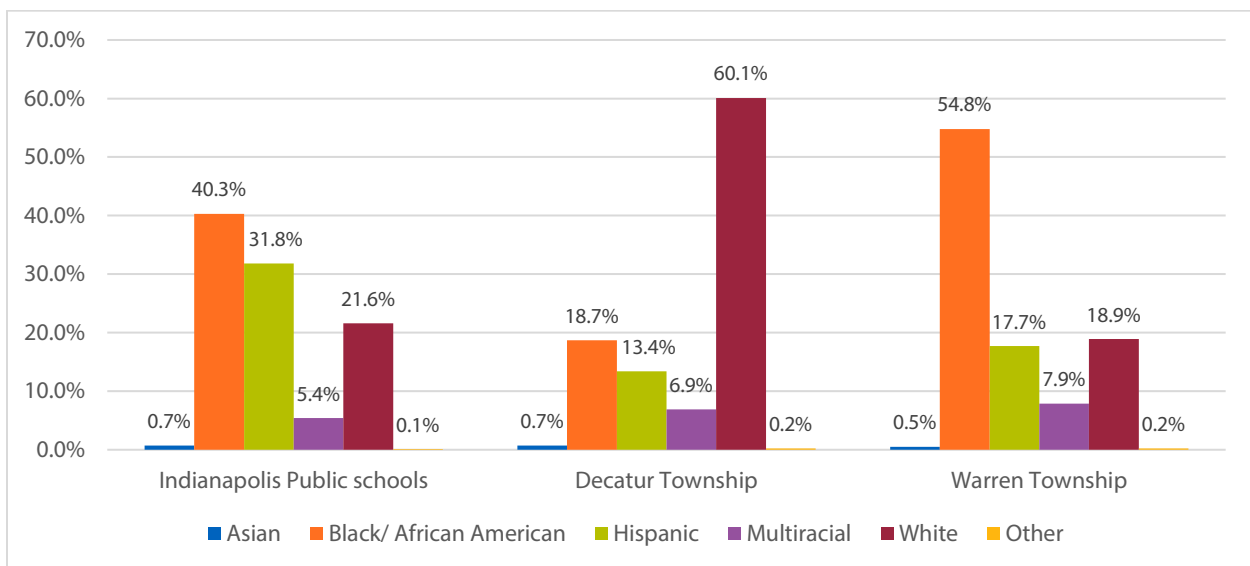


FIGURE 5: MEDIAN HOUSEHOLD INCOME BY SCHOOL DISTRICT

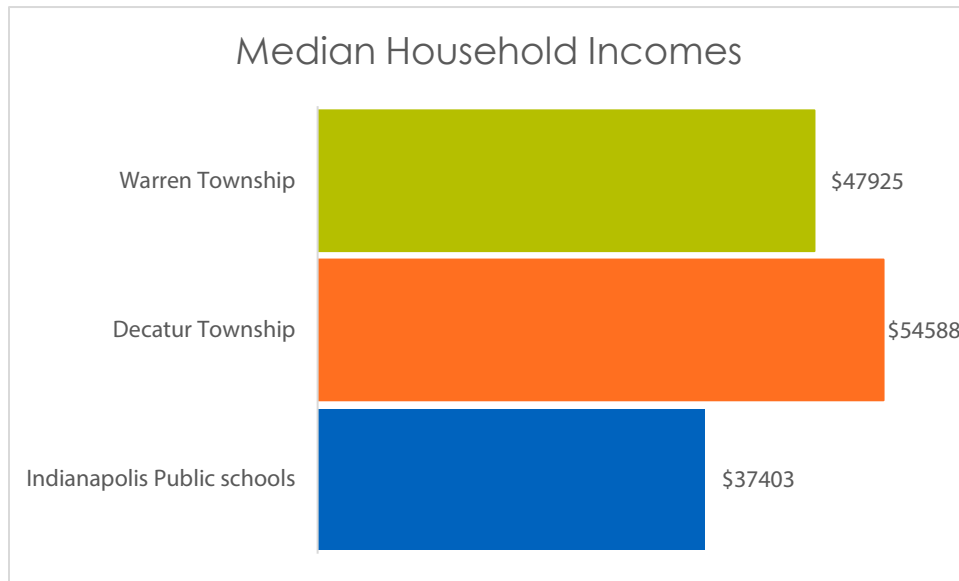


FIGURE 6: PERCENT OF ECONOMICALLY DISADVANTAGED STUDENTS

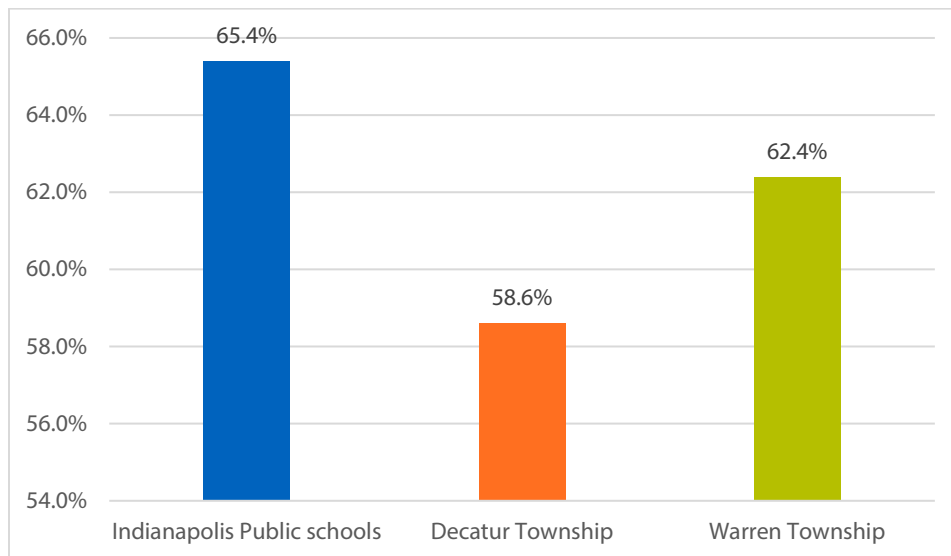


FIGURE 7: GRADUATION RATES BY SCHOOL DISTRICT

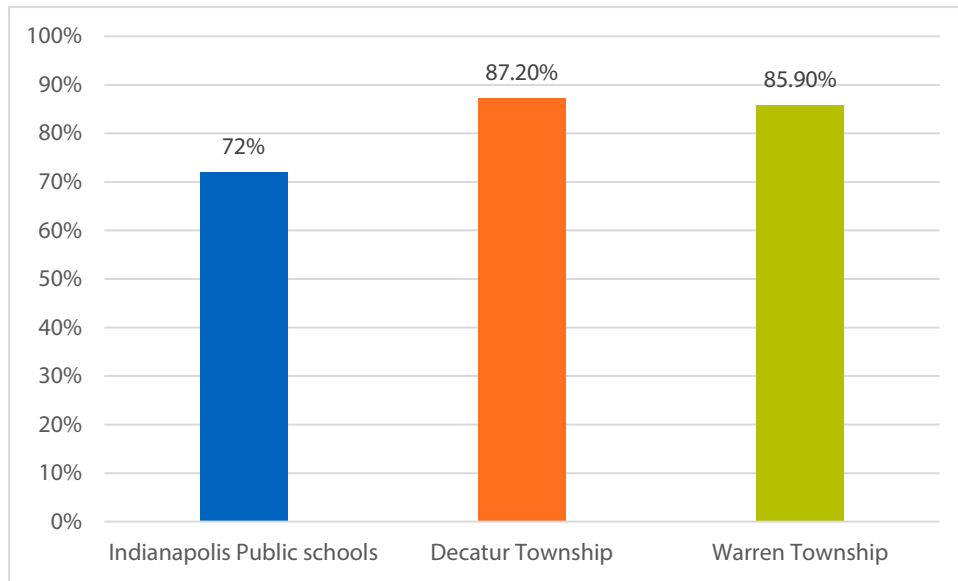
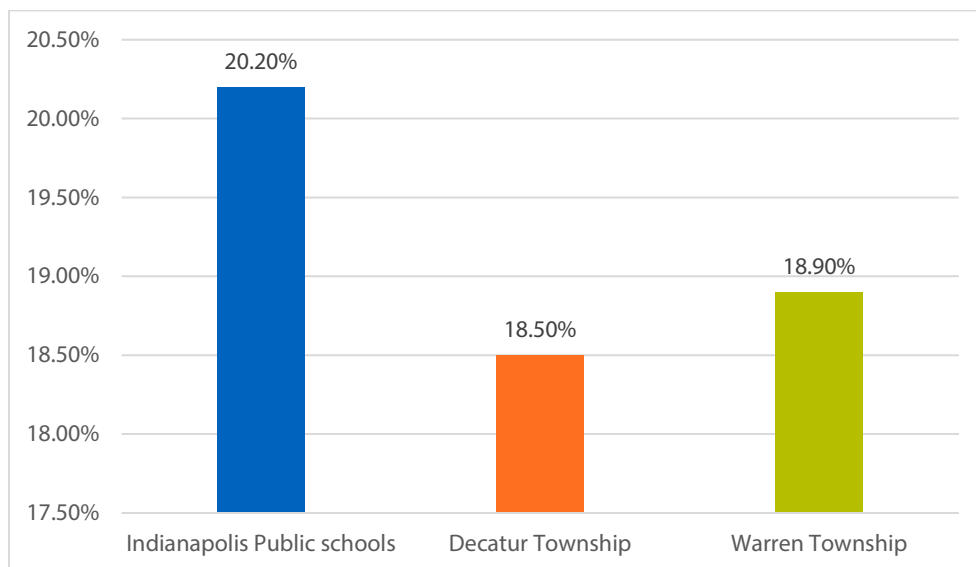


FIGURE 8: CHRONIC ABSENTEEISM RATES BY SCHOOL DISTRICT



Methods and Results

The Education Action Team, in collaboration with MCCOY Staff and IUPUI's Office of Community Engagement, collected data through three primary methods: an online survey sent to school personnel; community conversations held in three school districts; and key informant interviews with school and mental health professionals. Secondary data was reviewed to supplement the primary data collected and to support key findings.

In April 2019, the Education Action Team released an online survey (see [Appendix C](#)) to school administrators in Marion County (and surrounding counties) to identify challenges and seek feedback about the resources and support schools need. While the short-term intent of the survey was to identify collaborative actions our team could initially carry out to support school personnel through training opportunities and other resources, the information shared identifies long-term systems changes that could improve student outcomes and support school personnel through the education process.

Once survey results were collected and analyzed, the Education Action Team, in collaboration with IUPUI's Office of Community Engagement, planned three community conversations in the following school districts: MSD of Decatur Township, MSD of Warren Township, and Indianapolis Public Schools. Participants included teachers, administrators, and support staff (such as guidance counselors or social workers). These conversations aimed to identify ways of strengthening the connection between schools and community resources, trainings, and programs that address barriers to student success. Data was also collected to identify what school personnel wished for their students – or what they wished to see as a future result of education.

Finally, the team conducted three key informant interviews in April 2020. The interviews were completed virtually, using Zoom, due to the Covid-19 Pandemic. Each interview was recorded for note-taking purposes.

Survey Results

A total of 354 individuals across 28 different schools, ranging from private institutions, charter schools, township schools within Marion County, and districts in the suburbs surrounding Indianapolis completed the survey. Of the 354 respondents, 45% were teachers (see Figure 9) with a somewhat even distribution across grade levels (see Figure 10).

FIGURE 9: SURVEY RESPONDENTS BY ROLE³

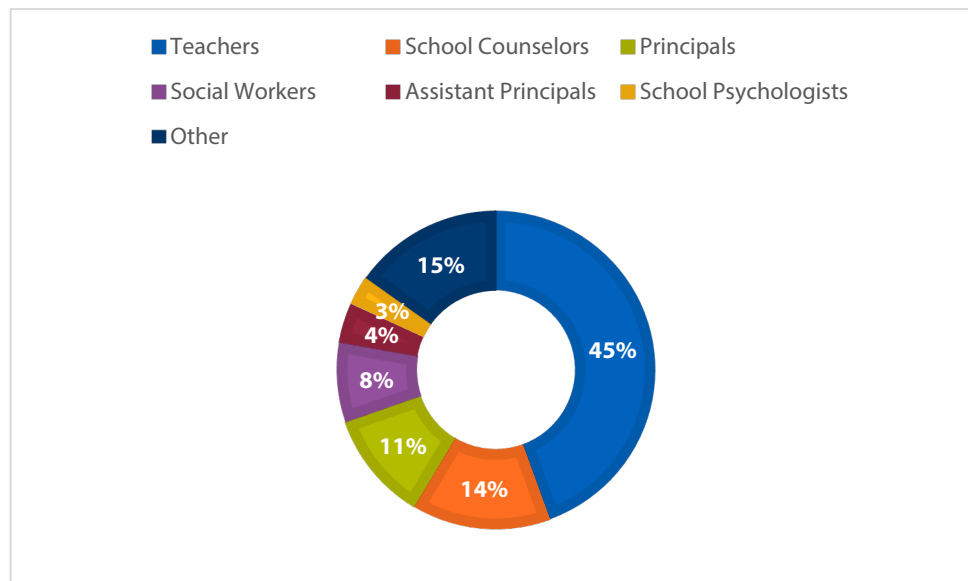
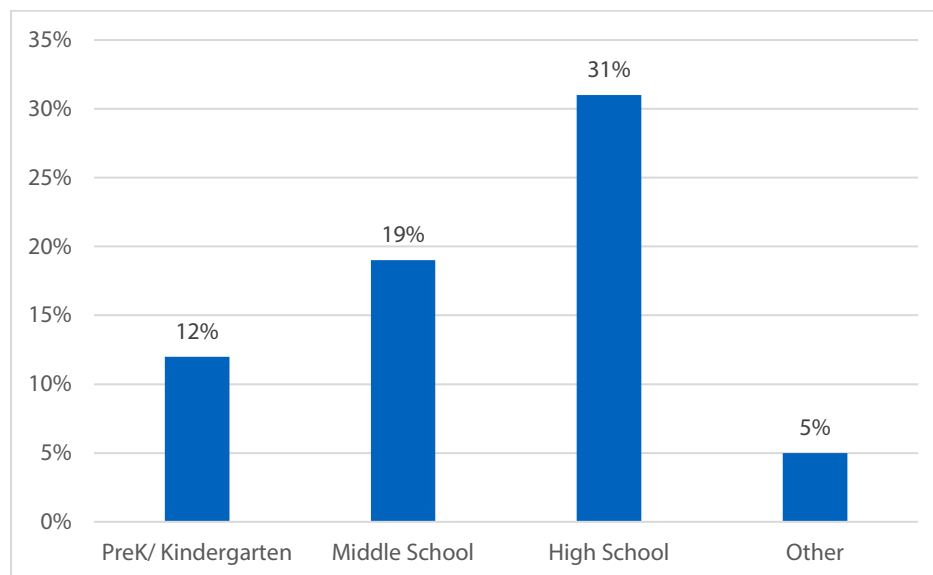


FIGURE 10: SURVEY RESPONDENTS BY SCHOOL GRADE⁴



³ The "Other" category was comprised of instructional assistants, speech pathologists, teachers' aides, special education teachers, nurses, family liaisons, Communities in Schools Coordinators, behavior specialists, dean of students, site coordinators, community coordinators, central office administrators, assistants, directors, district administrators, and special education instructional assistants.

⁴ This "Other" category included the following responses: Intermediate school; Grades 2 – 11; Kindergarten – 8th; Central Office; Charter School; Preschool.

Respondents were asked to identify the effect of a variety of social support issues impact on student success (see Table 1). Each issue on the provided list was selected as having a major issue on student success by a portion of the respondents. We limit the analysis to the top five issues identified by respondents to have a major effect on students and their success in school. These five issues guided further data collection in the form of community conversations at three of the school districts, as well as key informant interviews.

TABLE 1: ISSUES IMPACTING STUDENT SUCCESS

Issue	# of Major Effect Responses	Percentage
Emotional/ Social Health	101	12.2%
Trauma/ Violence	99	11.9%
Mental Health	92	11.1%
Chronic Absenteeism	82	9.9%
Social Media/ Internet	76	9.2%
Conflict Resolution	63	7.6%
Access to Healthcare	62	7.5%
Child Abuse/ Neglect	57	6.9%
Substance Misuse (Family or Student)	51	6.1%
Community Violence	47	5.7%
Food Insecurity	39	4.7%
Bullying/ Harassment	38	4.6%
Physical Health	23	2.8%
Gender Identity/ Sexual Orientation	9	0.2%

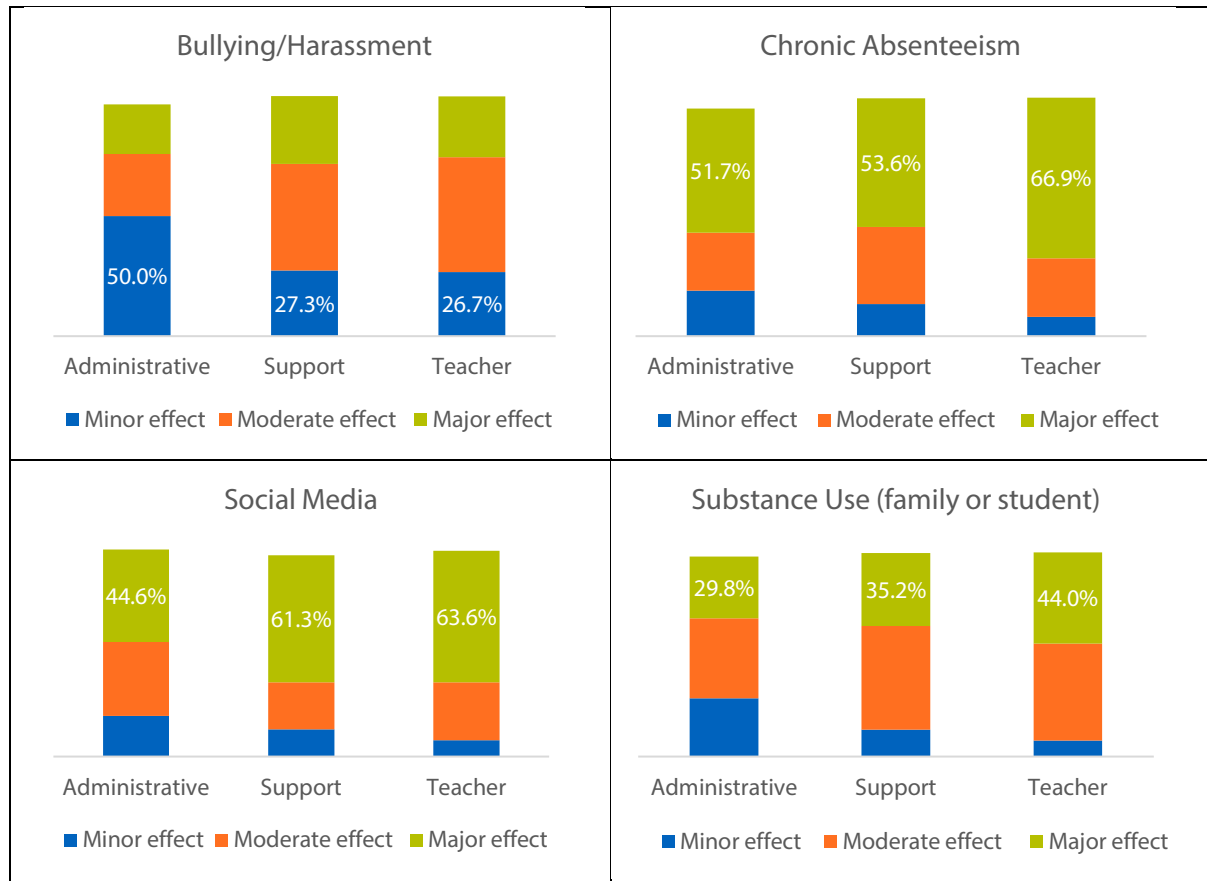
Statistical analysis determined differences in responses depending on 1) who the respondent was (teachers, support staff – counselors, social workers, psychologists – and administrative staff) and 2) where respondents work (Charter schools, IPS, private schools, suburban schools outside Marion County, or township schools).⁵

This additional analysis found significant differences in how teachers, administrators, and support staff rate the effects of bullying/ harassment; chronic absenteeism; social media; and substance abuse on students' life and success.⁶ Figure 11 shows that, in general, administrators tend to perceive issues differently than support staff and especially teachers, perhaps because teachers and support staff are more frequently in contact with students on a day-to-day basis than administrative staff.

⁵ The statistical analysis used was the Kruskal-Wallis ANOVA test at a significant level of .05.

⁶ Survey Question: "Please indicate the degree to which the following issues have an effect on your students and their success in school."

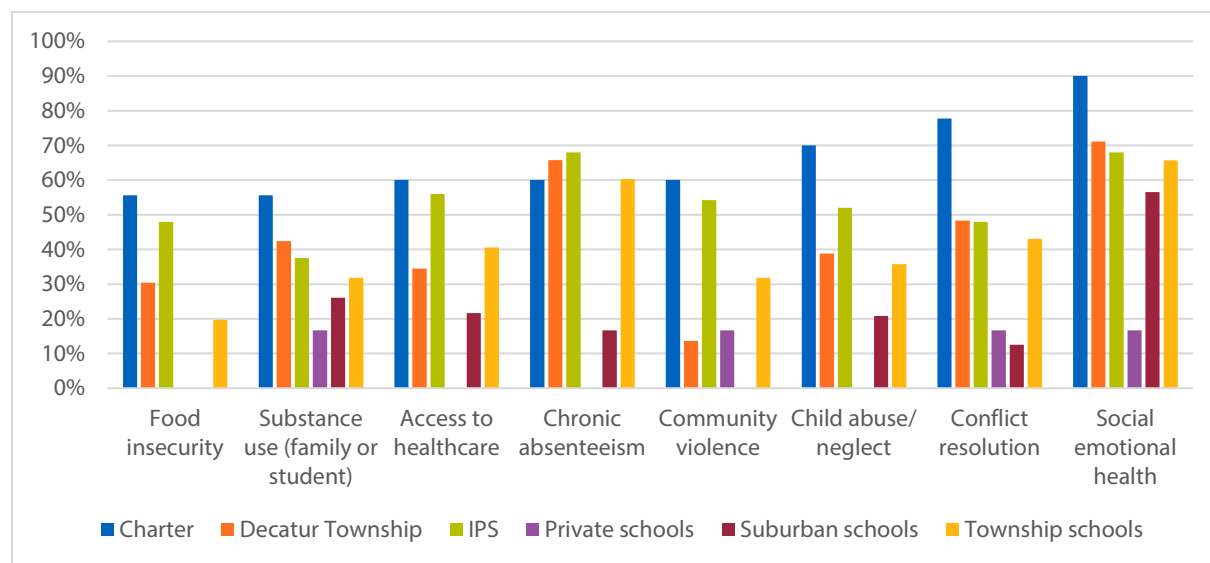
FIGURE 11: PERCEPTIONS BASED ON ROLE



The analysis also found significant differences in the way respondents from various types of schools rate these issues from the same question. It was found that in comparison with other schools, student life and success in charter schools were particularly affected by issues such as emotional and social health, conflict resolution, child abuse or neglect, and community violence. In addition, chronic absenteeism is an issue of major importance affecting students in IPS, as shown in Figure 12.⁷

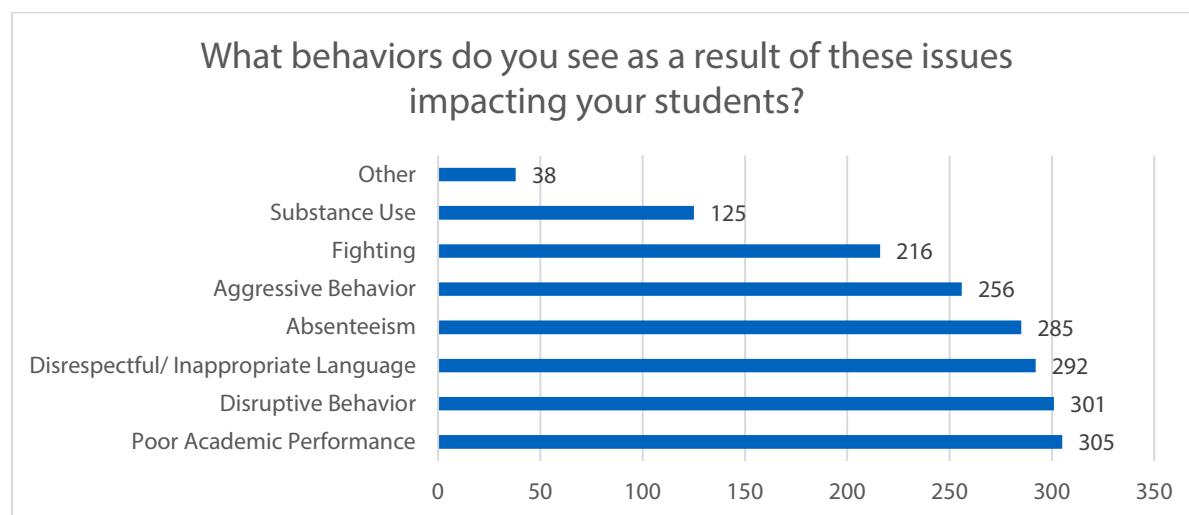
⁷ Since we received a high number of responses from Decatur Township, they are counted as a separate group to avoid bias.

FIGURE 12: PERCENTAGE OF RESPONDENTS INDICATING THE ISSUE AS HAVING A MAJOR EFFECT, BY TYPE OF SCHOOL



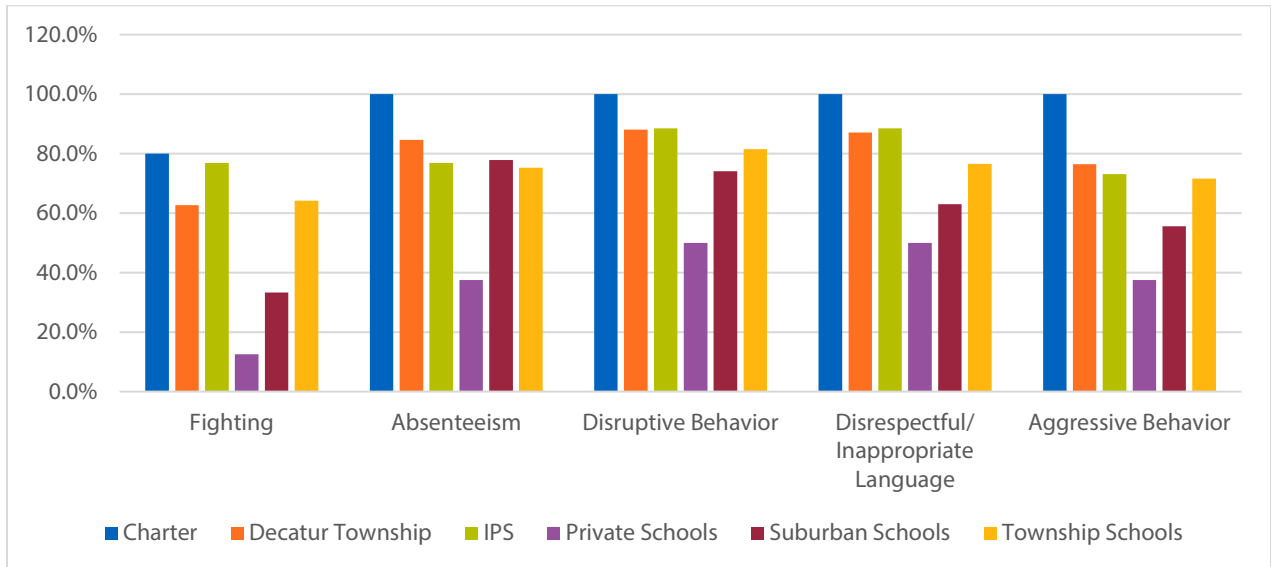
To the question about behaviors that they saw as a result of these issues impacting students, respondents selected from the following options: fighting, substance abuse, absenteeism, poor academic performance, disruptive behavior, disrespectful/ inappropriate language, aggressive behavior, and a fillable “other” option.⁸ Figure 13 illustrates the total responses (respondents could select multiple behaviors). In addition, we used Chi Square analysis to find out whether responses about student behavior were significantly different depending on the grade levels or type of school (township, suburban, private, or charter school). We found that both township and type of school are significantly related ($p = <.05$) to the behaviors respondents see as a result of the issues impacting schools. Figures 14 illustrates where the differences are in each case. Note that again Decatur Township results are shown separately to avoid bias. These figures only include the factors where significant differences were found.

FIGURE 13: RESULTING BEHAVIORS FROM IDENTIFIED ISSUES



⁸ “Other” responses for student behavior included hopelessness/ apathy, withdrawing, difficulty regulating emotions, lack of control, unhealthy relationships, mental illness (depression or anxiety), self-harm, chronic illness, sexually inappropriate behaviors, suicide ideation, impaired concentration, trauma, fatigue, and misuse of social media.

FIGURE 14: BEHAVIORS IMPACT STUDENTS BY TYPE OF SCHOOL



To know if schools are equipped to address these and other related issues, we analyzed the results of the question, “Does your school implement any of the following types of policies, practices, or programs?” by type of school. Figures 15 and 16 reflect the responses as percentages – the further to the outside edge of the polygraph, the higher percentage of that type of school responding to a particular answer. For example, Figure 15 shows that charter schools seem to be implementing more programming to address issues identified in the previous question. In reference to support roles, however, suburban and township schools report a wider diversity of specialized staff (Figure 16). In both graphs, private schools responded less implementation of policies, practices, programs, and support roles than other types of schools.

FIGURE 15: POLICIES, PRACTICES, AND PROGRAMS BY TYPE OF SCHOOL

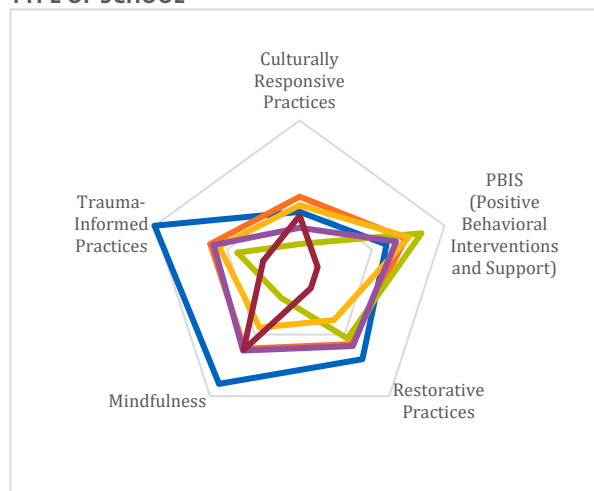
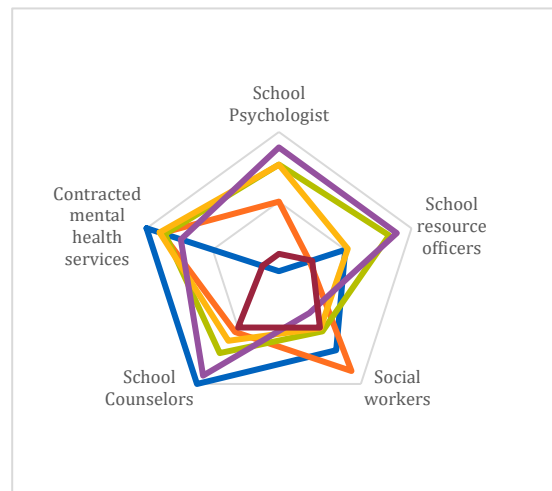


FIGURE 16: SUPPORT ROLES BY TYPE OF SCHOOL



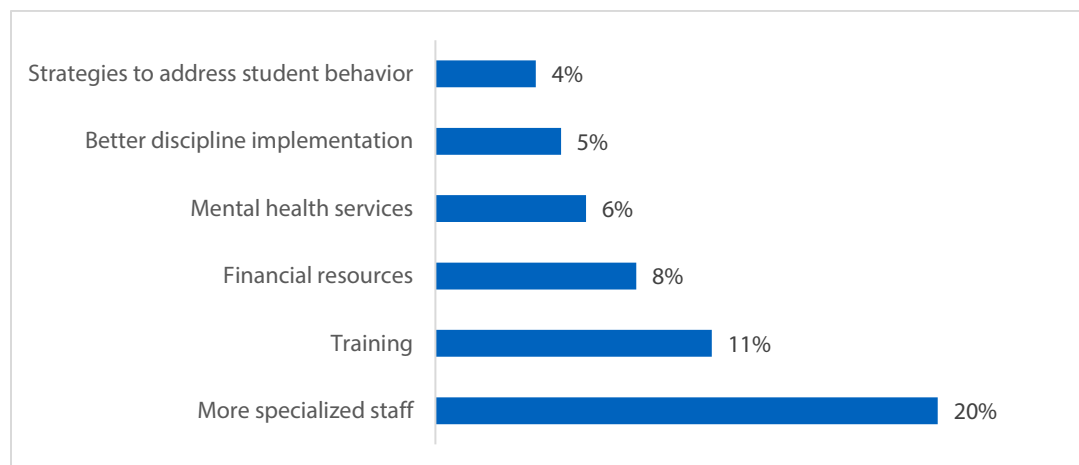
— Charter — IPS — Decatur Townhsip
 — Township Schools — Suburban Schools — Private schools

Respondents were also asked to identify resources that are needed for students, families, teachers, and administrators. Table 2 and Figure 17 summarizes the most frequent responses.⁹

TABLE 2: RESOURCES NEEDED FOR STUDENTS, FAMILIES, TEACHERS, AND ADMINISTRATORS

Resources for Students	
1.	Mental Health Services/ Access (17.4%)
2.	More Counseling Services/ Access to Counseling (12.1%)
3.	Mentors/ Mentoring (8.9%)
4.	Resources/ Education for Social Emotional Health (8.5%)
5.	Resources to Meet Basic Needs (6.5%)
Resources for Families	
1.	Parent Education/ Support (includes workshops, resources, home visits, support groups) (19.8%)
2.	Access to Mental Health Services (17.1%)
3.	Support to Meet Basic Needs (includes food, clothing, hygiene products, housing) (8.9%)
4.	Access to Health Care (6.6%)
5.	Housing Assistance/ Affordable Housing (4.7%)
Resources for Teachers	
1.	Training/ Professional Development/ Toolkits (63.6%) ¹⁰
2.	Specialized Staff/ Support to Teachers (8.2%) ¹¹
3.	Classroom Supplies (3.6%)
4.	Discipline Policies/ Practices (3.1%)
Resources for Administration	
1.	Training/ Professional Development (47%) ¹²
2.	Additional Staff (11.1%) ¹³
3.	Funding Assistance (3.4%)
4.	Resources (3.4%)

FIGURE 17: RESOURCES NEEDED FOR SCHOOLS OVERALL



A list of requested trainings can be found in [Appendix D](#).

⁹ Original responses were coded to group similar responses into broader categories.

¹⁰ Areas of training included: Tools to address extreme and violent behaviors; Social Emotional Learning; Brain research; Cultural competence; Empathy/ Compassion; Mindfulness; Trauma Informed Care; Student motivation; Implicit bias

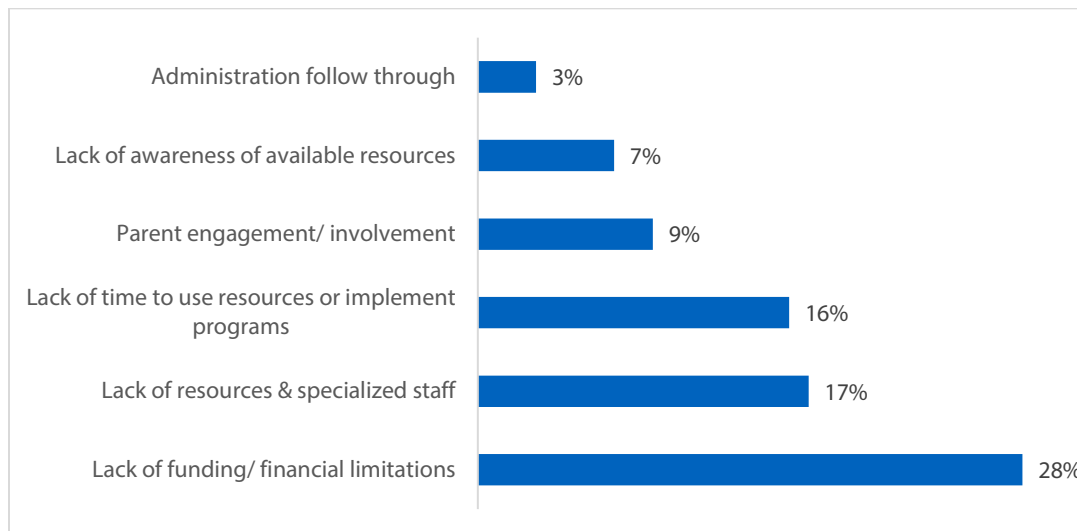
¹¹ Includes counselors; social workers; behavior support in the classroom; instructional aids; peer support

¹² Areas of training included: Cultural competence; Discipline; How to help teachers motivate kids; Leadership skills; Mindfulness and PBIS training; Social Emotional Learning; Trauma Informed Care

¹³ Includes counselors; therapists; social workers; behavioral specialists; assistant administrators

Collecting data to inform future actions of the Education Action Team, we asked respondents to identify barriers to accessing resources for schools.¹⁴ The responses are summarized in Figure 18.¹⁵

FIGURE 18: BARRIERS TO ACCESSING RESOURCES



Finally, respondents were asked to reflect on the status of the current school-community relationship and how these partnerships have helped meet the needs of students, but also how these relationships could be improved. These survey questions were not required, yet both questions had over 250 valid responses each.¹⁶ In addition the summaries provided in Table 3.

¹⁴ Survey Question: What barriers do you experience to accessing resources for your school?

¹⁵ Original responses were coded for similar themes.

¹⁶ Some responses were not viable as written, such as "N/A" or "Not Sure" (and similar responses). Additionally, some responses did not address the question accurately, giving an opposite response (for example, indicating a needed improvement for the "helped meet the needs" question or a generally positive responses for the "improve" question. Overall, 50 responses were omitted for the first question ("helped meet the needs") and 44 were omitted for the second question ("improve to meet the needs").

TABLE 3: SCHOOL COMMUNITY RELATIONSHIPS

In what ways has the school-community relationship <i>helped meet the needs of your students?</i>		In what ways can the school-community relationship <i>improve to meet the needs of your students?</i>	
Coded Response	Frequency (Percentage)	Coded Response	Frequency (Percentage)
Resources	108 (50%)	Resources	38 (21%)
Youth Development	19 (9%)	Family Engagement	30 (17%)
Mental Health	18 (8%)	Personnel	19 (11%)
Personnel	16 (7%)	Family Supports	16 (9%)
Connectedness	15 (7%)	Mental Health	15 (8%)
Family Engagement	14 (6%)	More Partnerships	15 (8%)
Social Emotional Learning	14 (6%)	Youth Development	13 (7%)
Funding	7 (3%)	General	12 (7%)
General	7 (3%)	Policy/ Practice	12 (7%)
		Community Buy-In	8 (4%)
		Cultural Competency	8 (4%)
		Communication	7 (4%)
		Funding	6 (3%)
		Social Emotional Learning	6 (3%)
		Proactive/ Intentional Action	5 (3%)
		Environmental Improvements	4 (2%)
		Training	2 (1%)
		School Buy-In	1 (1%)



Discussion of Survey Findings

School personnel identified the following key issues that impact student success:

1. **Emotional and Social Health**
2. **Chronic Absenteeism**
3. **Trauma and Violence**
4. **Social Media and Internet**
5. **Mental Health**

We provide a brief overview of each of these challenges, including a limited literature review and available state data for context.

Emotional/ Social Health (66%)

According to the Collaborative for Academic, Social, and Emotional Learning (CASEL), “Social and Emotional Learning” is the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions” [28]. Currently, states have the power to decide whether they want to require Social and Emotional Learning (SEL) curriculum in schools [29]. Indiana only has SEL standards for preschool [29]. As of 2018, only eight states had SEL requirements for preschool and K-12 [29]. **SEL interventions have been proven to increase students’ academic performance by 11%** compared to students who did not participate in SEL programs [30]. SEL programs can have a positive impact on academics, behavior problems, emotional distress, and drug abuse [30]. CASEL research indicates that **for every \$1 invested in evidence-based SEL programs, there is an \$11 return** [30].

Chronic Absenteeism (58%)

Chronic absenteeism is typically defined as a student missing more than 10% of school days [31]. This includes excused and unexcused absences. More than 15% of all students in the United States are chronically absent [31]. In Indiana during the 2018 – 2019 school year, the state average for chronic absenteeism was 13.7%, placing Indiana within the top 10 in the nation for chronic absenteeism rates [32]. Though widespread throughout essentially all communities, chronic absenteeism disproportionately affects students of color, English language learners, and students with disabilities [33].

Chronic absenteeism has many unwanted effects, the most obvious being students falling behind in their academic learning. Frequent absences can become a long-term habit and children who miss school when they are younger are more likely to skip school when they are older [31]. **This ultimately impacts graduation rates and is predictive of high school incompleteness or dropping out. Additionally, students who are chronically absent are more likely to become engaged with the criminal justice system** [33].

Trauma and Violence (57%)

Adverse Childhood Experiences (ACEs) are stressful or traumatic events in childhood and are used to assess the long-term impact of abuse and household dysfunction on later-life health [34]. **ACEs have a lifelong impact: as the number of ACEs increases, so does the likelihood of experiencing negative effects such as depression, obesity, and other chronic conditions in adulthood** [34]. Almost half (46.2%) of all children in Indiana have experienced one or more ACEs, and Indiana children have a higher prevalence than their peers nationally in seven out of nine ACEs measured (see Figure 19) [34].

A specific Adverse Childhood Experience, **youth violence, is a significant public health problem that impacts thousands of young people every day** and, in turn, their families, schools, and communities. Homicide is the third leading cause of death for young people ages 10 – 24 years. Each day in the United States, about 14 young people are victims of homicide and about 1,300 are treated in emergency rooms for nonfatal and assault-related injuries [35].

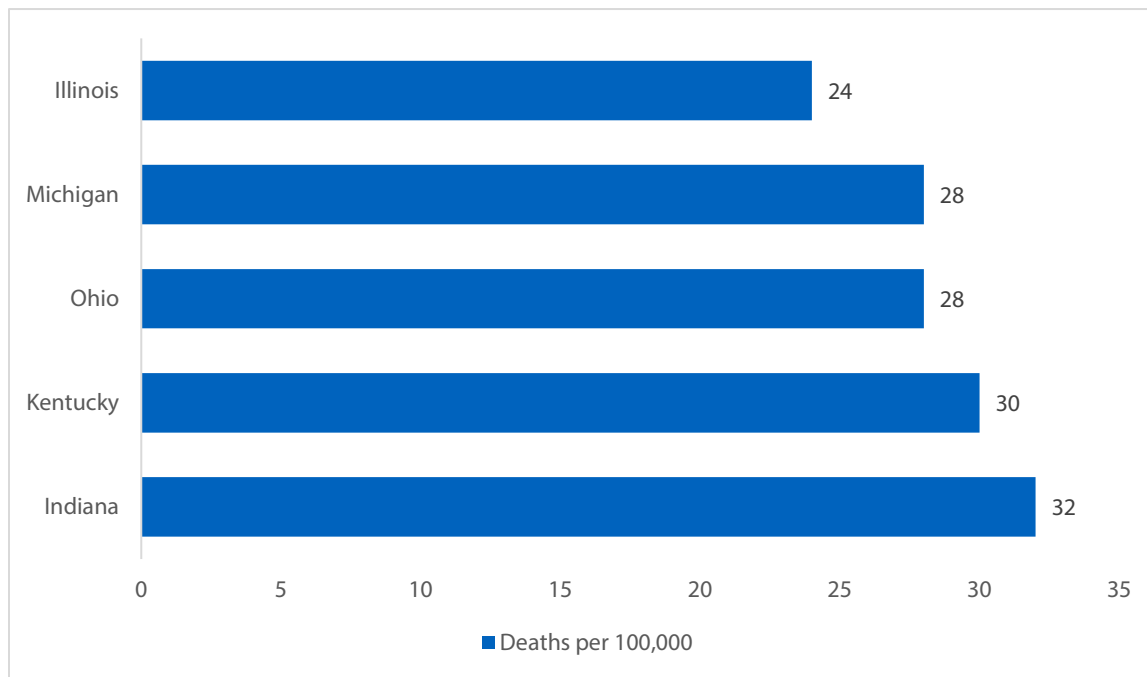
FIGURE 19: ADVERSE CHILDHOOD EXPERIENCES IN INDIANA

Adverse Childhood Experiences: 2016-2017	Indiana	United States
Parent divorce	26.2%	24.0%
Parent death	5.2%	3.5%
Parent served time in jail	10.0%	7.7%
Lived with anyone who was mentally ill, suicidal, or severely depressed	9.1%	7.4%
Lived with anyone who had a problem with alcohol or drugs	9.2%	8.5%
Treated unfairly because of race/ethnicity	3.3%	3.7%
Witnessed domestic violence	6.3%	5.3%
Victim or witness of neighborhood violence	4.7%	3.8%
Somewhat or very hard to get by on family's income	22.9%	24.3%

Source: National Survey of Children's Health

Annually, more than 1,000 Hoosier children and youth die before their 20th birthday. Youth who have contact with the juvenile legal system have higher mortality rates than the general population, regardless of sex or race. Indiana's child and teen death rate (32 per 100,000) is higher than the national rate (25 per 100,000). Among neighboring states, Indiana has the highest child and teen death rate (see Figure 20) [34].

FIGURE 20: STATE COMPARISONS OF CHILD AND TEEN DEATH RATE (PER 100,000)



When it comes to weapons and firearms, youth carrying a weapon are at increased risk of injuries requiring medical treatment, repeat injuries, and injuries requiring hospitalization. In Indiana, one in five high school students (19.6%) carried a weapon such as a gun, knife, or club in the past month. This is higher than the national average (16.2%) of all students carrying a weapon in the last month [2].

Adverse Childhood Experiences, including youth violence, can be prevented by:

- **Placing an emphasis on strengthening economic supports to families,**
- **Changing social norms to support parents,**
- **Providing quality care and education early in life,**
- **Enhancing parenting skills, and**
- **Intervening to lessen harms and prevent future risk [35].**

Social Media and Internet (55%)

Nearly 75% of teens have a smartphone and 76% use at least one social media site. This amount of **technology use and screen time can have multiple adverse effects on youth development**. Technology can cause disruption in sleep, resulting in negative performance at school. In addition, overuse of technology can lead to a decreased interest in offline, real life relationships. It can also increase risk for other risky behaviors such as substance abuse, self-injury, sexual activities, and eating disorders. Technology also provides a platform for cyberbullying that has negative social and academic effects [36].

Mental Health (54%)

According to the Indiana Youth Institute, mental disorders are characterized by serious changes in the ways children typically learn, behave, or handle their emotions. **Without early diagnosis and treatment, children with mental disorders can experience problems at home, in school, and in forming relationships.** Indiana is ranked 28th in the nation for the prevalence of mental illness among youth [34]. Without treatment, mental illnesses can have dire consequences, and 85% of Indiana's overall population live in mental health professional shortage areas [34].

One of the most serious consequences of mental illness is suicide. Suicide is the second leading cause of death for youth ages 10 – 14 years and the fourth leading cause of death for youth ages 15 – 19 years [34]. Suicide risk is higher among people who have experienced child abuse, bullying, or sexual abuse or assault and disproportionately impacts LGBTQ+ youth [34].

Final Thoughts

School administrators, teachers, and staff perceive that certain issues impact student success differently – specifically, chronic absenteeism and social media/ internet from the list of key issues above. This might be due to teachers and support staff having more daily contact with students. Generally, charter schools seem to be experiencing these challenges to a greater degree than other types of schools in our sample (township schools, private schools, suburban schools outside Marion County, Indianapolis Public Schools, and Decatur Township). Suburban schools outside Marion County generally experience these challenges the least.

Different types of schools also utilize different policies and practices to address challenging issues. Charter schools seems to employ more mindfulness programming and trauma-informed practices than the other types of schools, while township and suburban schools employ more specialized staff, such as counselors and school resource officers. Programmatic approaches tend to last only if key personnel, staff, resources, and funding are continued. Once these factors are discontinued, programmatic approaches tend to leave the school system unchanged [37]. Individual programs that teach or address important skills must not be carried out in a vacuum, but rather should be components of a broader holistic approach incorporated through every level of the education process [37]. Recommended strategies like the whole child approach or community schools have been proven to have positive results in school health environments, policies, and practices [38].

Respondents identified that both students and families need mental health services and access to basic needs (including health care access, food, clothing, and housing support). Reflecting Maslow's Hierarchy of Needs, decades of research demonstrate basic needs must be met as necessary conditions for learning [39].

Teachers desire more professional development and training, while administrators wish to hire more support staff. Professional development of teachers is affected by many factors: people and interpersonal relationships, institutional structures, personal considerations and commitments, and intellectual and personal characteristics [40]. One barrier we have heard of most often in our conversations with school partners falls within the institutional structures, which can include insufficient time or resources [40]. Additional challenges identified include time allotted for courses, the requirement to teach mandated curriculum, language learning, and classroom management barriers [41].

Inequitable Impacts

Across these issues, multiple groups of young people are disproportionately impacted due to the color of their skin, immigration status, or gender identity and sexual orientation. Below, we discuss specific communities and the complex and systemic forces behind some of these inequities.

Chronic Absenteeism

Students experiencing homelessness, students with disabilities, students of color, and economically disadvantaged students are more likely to be chronically absent from school. Health issues are often associated with absenteeism, but among homeless youth this is exacerbated due to lack of access to medical care [42]. Housing instability causes major disruptions in the academic life of a child, whether associated with homelessness, the foster system, or transient employment. Health issues are also connected with the absenteeism of students with disabilities, due to the comorbidity of chronic illness and visible/ invisible disabilities. Chronic illnesses are three times more common among students with an Individualized Education Program (IEP) than others without one [43]. Additionally, medications may cause fatigue or increase anxiety, making school more of a challenge. Students of color tend to have higher rates of chronic absenteeism, specifically Hispanic English language learners and Black students [31]. Black students are suspended at rates more than twice as high as White and Hispanic students. The higher rates of suspension among Black students may contribute to the higher rates of chronic absenteeism [44].

Trauma and Violence

Among groups who experience trauma or violence, LGBTQ+ students are disproportionately impacted due to interpersonal and systemic discrimination. Studies indicate that LGBTQ+ young people are more than twice as likely to be homeless compared to their heterosexual peers, potentially due to family issues, poverty, mental health or substance abuse, loss of a parent due to death or incarceration. One study found that LGBTQ+ homeless youth said they had been forced to have sex (38%), had exchanged sex for food, housing or other basic needs (27%), or had been physically harmed by others (62%) [45], [46]. The 2017 National School Climate Survey from the Gay, Lesbian, and Straight Education Network (GLSEN) reported 83.7% of transgender and 69.9% of gender nonconforming students were bullied or harassed at school because of gender identification [47].

Mental Health

Depression and thoughts of hopelessness disproportionately affect Hispanic students, who are more likely to attempt suicide than Black, Multiracial, and White youth [2]. Hispanic Americans report higher rates for most psychiatric disorders than Hispanic immigrants. An estimated 1 in 10 Hispanics with a mental disorder use mental health services from general health care providers, while 1 in 20 receive services from a mental health specialist. There are many barriers to accessing mental health care for Hispanic communities, including: cultural stigma, language, lack of knowledge/ awareness about mental health problems or services available, shortage of bilingual mental health professionals, and lack of culturally tailored services and culturally competent mental health professionals [48].

Community Conversations Results

Community Conversation Format & Data

After a brief time to greet one another and enjoy refreshments, participants were given a synopsis of survey data to review. They were then asked to participate in three different dialogue activities. For each activity, participants were asked to respond to one or two questions (see Community Conversation Protocol in [Appendix E](#)).

Dialogue Activity A

Survey data was shared with attendees – specifically the results identifying the five key issues most identified to have a major impact on students and their success in school. Attendees were then asked the following questions:

1. What are your responses and reflections from the survey data?

Most participants reported the data reflected what they see in schools. Some participants pointed out they felt there may be discrepancies due to the perspective of the respondent, specifically between teachers and administrators. This supports the findings from our survey analysis that indicated a statistically significant difference in the perception of some issues between administrative staff and teachers.

Across each of the conversations in different districts, a need for more training and professional development to meet students where they are and offer help was expressed. Participants mentioned the need for support for teachers who can also experience secondary trauma and the need to understand how that impacts their teaching. Overall, participants highlighted the need for trauma-informed training and resources.

2. Think back to a time when these issues affected student success and describe that situation.

Survey results identified five issues that had a major effect on student success:

- **Emotional and Social Health**
- **Chronic Absenteeism**
- **Trauma and Violence**
- **Social Media and Internet**
- **Mental Health**

Participants reviewed these results and shared experiences when one or a combination of these issues impacted student success. Participants said they have seen each of these issues affect their students' success at some point. Moreover, participants shared the belief that these issues are interrelated and that while the symptoms of these issues are addressed by schools, the root causes are not. Generally, there is a lack of systemic response for these issues.

Dialogue Activity B

Attendees were placed in small groups and asked to complete a worksheet to guide their conversation (the worksheet can be found in **Appendix E**). The small groups then reported out highlights from their conversation. The worksheet guided them to discuss the following questions (responses are captured in Table 4).

1. **What policies, practices, or programs are working to address these issues?**

2. **What could be done different to address these issues?**

TABLE 4: COMMUNITY CONVERSATIONS - POLICIES, PRACTICES, AND PROGRAM DISCUSSION

Mental Health/ Social and Emotional Health	
Policies/ Practices/ Programs	What Could be Different
<ul style="list-style-type: none"> Partnerships with mental health providers (such as Cummins, Eskenazi, etc.) Social-Emotional Learning Programs Restorative Practices and Calming/ Reset Rooms 	<ul style="list-style-type: none"> Professional Development – including strategies to deal directly with mental and social health issues Daily interaction between teachers and students to determine better strategies Space for teachers to practice new skills
Chronic Absenteeism	
Policies/ Practices/ Programs	What Could be Different
<ul style="list-style-type: none"> Reinforce current policies and make the policies accessible on school websites Positive Behavioral Interventions and Supports (PBIS), including incentives Stress the importance of building adult/ student relationships Family Nights – parents fill out a planning document about increased attendance 	<ul style="list-style-type: none"> Walking School Busses District-wide initiatives should align Move bus stops closer to students’ homes Meet with families one-on-one Clearer policies and expectations regarding attendance, coupled with administrative follow up on policies
Notes: Generally, participants feel that the problem is bigger than the resources available. They agreed there is an overall need for more proactive approaches, rather than reactive ones.	
Trauma and Violence	
Policies/ Practices/ Programs	What Could be Different
<ul style="list-style-type: none"> Zones of regulation in classrooms (a framework that helps students identify and self-regulate their emotions) Positive Behavioral Interventions and Supports (PBIS) Social-Emotional Learning Programs Alternative programming instead of expulsion Restorative practices 	<ul style="list-style-type: none"> More access to services that can be a bridge to the family Community Hub for services where families can go to get assistance with whatever they need Consistent and culturally relevant training on trauma and violence
Notes: Participants talked about the need to build trust between students and various staff to create a feeling of safety at school.	

Dialogue C

Attendees were then asked to reflect individually and share responses to the following questions. Responses were captured on large Post-It notes by the facilitators and later typed into a Microsoft Excel spreadsheet for coding. There were 153 responses to these two questions. Responses were initially coded and categorized by similar responses.¹⁷ Table 5 provides the frequency and notes about each category.

1. *List all the things you want for your students.*
2. *Imagine a successful student 10 years from now. What does this look like?*

TABLE 5: COMMUNITY CONVERSATIONS - WHAT SCHOOL PERSONNEL WANT FOR THEIR STUDENTS

Coded Category	Count	Percentage	Notes
Academics	19	12.3%	Specific mentions of academics, schools, or education
Self Esteem	16	10.3%	Pride, confidence, self-worth
Social-Emotional Skills	14	9.1%	SEL competence, emotional regulation, age-appropriate skills
Self-Actualization	14	9.1%	Goals, success, a sense of future, dreams
Belonging	11	7.1%	Cared for and loved, family, feeling accepted
Mentorship/ Advocacy	11	7.1%	Role models, trusted adults, teachers helping beyond classroom
Community Engagement	10	6.5%	Giving back, productive, contributing to community
Basic Needs	9	5.8%	Health and happiness
Career	8	5.2%	Employment and career
Self-sufficiency	8	5.2%	Self-sufficiency, financial stability, ability to provide for selves
Learning	6	3.9%	Lifelong learner, engaged, thirst for learning
Safety	6	3.9%	Safety (including emotional security)
Self-advocacy	6	3.9%	Advocacy for self, education, self-defined success, entitlement to edu.
Behavior	5	3.2%	Respect and civility
Equity, Inclusion, Representation	4	2.6%	Representative teachers, equal access to education, diverse populations
Opportunities	4	2.6%	Future options, opportunities, traveling
Access	3	1.9%	Access to systems, mental health, all that life has to offer

¹⁷ The true sample size was 154 total responses; however one response was removed as an extreme outlier. It should also be noted that due to a change in facilitation method, Decatur Township participants did not participate in this activity.

Responses were coded through two lenses – the Socioecological Model (see [Appendix F](#)) and Maslow’s Hierarchy of Needs (see [Appendix G](#)). The SEM coding informs us to what degree participants viewed the future success of students as an individual responsibility or having individual-level impact versus the role community systems have in creating that future for a student. Maslow’s Hierarchy of Needs provides us the opportunity to categorize these hopes and dreams for students across areas of need, giving us an idea of what participants might see has priorities for students and their future success.

Coding across the SEM provides the opportunity to identify community and society-level interventions that could be applied in school and community settings – reducing the burden on individual teachers and better establishing sustainable and long-lasting impacts for students. The codes and frequencies are shared in Table 6.

TABLE 6: SEM CODED RESPONSES AND FREQUENCIES

Category	Count	Percentage
Individual	76	49.3%
All Four	24	15.6%
Relationships	23	14.9%
Societal	18	11.7%
Community	4	2.6%
Community/ Societal	4	2.6%
Individual/ Relationships	3	1.9%
Individual/ Community	1	0.6%
Total	153	

Most participants looked at student success from the lens of the individual (49.3%). Community factors were the least identified (2.6%). Some responses were coded as all four levels (15.6%) based on their complexity and the inability to tease out which SEM level might have the most significant impact.

Responses were coded across the tiers of the Maslow’s Hierarchy of Needs to identify the potential values and priorities of school personnel in relation to student needs and successes. Based on the frequencies shared in Table 7, self-actualization was the most identified need (26%), which potentially overlaps with the high number of responses coded under Academics in Table 5. It also aligns with the SEM coded responses emphasis on individual factors, as self-actualization is an internal need. However, this model illustrates a critical truth that is also reflected in the SEM: certain needs must be met to achieve the higher levels of the hierarchy, just as certain external factors can greatly impact us at an individual level.

TABLE 7: RESPONSES CODED AS MASLOW'S HIERARCHY OF NEEDS

Coded Category	Count	Percentage
Self-Actualization	40	26.0%
Love and Belonging	35	22.7%
Cognitive Needs	28	18.2%
Esteem Needs	24	15.6%
Safety Needs	13	8.4%
Equality ¹⁸	8	5.2%
Physiological	4	2.6%
Transcendence	1	0.6%

¹⁸ Equality is not a need that appears on Maslow’s Hierarchy of Needs, however needed to be reflected as a separate category in our codes due to the number of references we identified.

Discussion of Community Conversations Findings

Trauma-informed trainings and resources are consistently needed for schools and their staff – but so is time for staff to take advantage of those trainings and resources. Schools currently do not have much capacity for this form of professional development. Several of our school partners on the Education Action Team pointed to the difficulty of engaging educators during the school day or year while acknowledging that school personnel are not always willing to give up their breaks, lunch hours, evenings, or weekends to complete trainings. Additionally, as we discuss below, many of the challenges being identified by schools are complex and systemic – therefore **trainings may not be the most effective solution**.

What school personnel desire for students and their success in the future may be more reflective of the lived experience and education levels of school staff. According to Indiana Department of Education data from 2015, 86% of Marion County teachers were white, while 37% of students were Black. This disparity is even more pronounced at the state level [49]. The individual-level expectations reflected in our data may not be fair when students of color are systematically oppressed. Moreover, these challenges are complex and systemic – and school staff do not feel that they have the adequate resources or capacity to address them. A single training will not impact the environment and systems that educators, families, and students must navigate. The solutions we develop must be more comprehensive and work at multiple levels of the socioecological model.

Trust is an integral part of creating a safe space at school for students and their families. When students feel unsafe due to distrust, the energy that could be applied towards education is used for self-protection [50]. Research evidence shows that the quality and quantity of communication in a relationship affects the levels of trust in the relationship – better communication leads to better trust, which in turn leads to more cooperative behaviors and open exchange of information [50]. Additional research finds that students in schools with high-trust environments are more likely to believe that they have control over their learning and education as compared to students from low-trust schools. Teacher-student interactions that promote self-regulated academic beliefs and behaviors diminish the harmful effects of factors like poverty and other environmental influences [51].



Key Informant Interviews

To maintain confidentiality, key informants have been de-identified and will be referred to by a generalized role. The interview protocol can be found in **Appendix H**.

The following roles were interviewed for this assessment:

- **A Kindergarten – 8th Grade Principal**
- **A Township Administrator**
- **A School-Based Mental Health Provider**

Response to Survey Findings

We initially asked key informants to respond to survey findings, specifically the five key issues indicated as having a major impact on student success (mental health, violence - trauma, social media, chronic absenteeism, and social emotional health). The key informants responded differently to these topics, based on their role. However, each informant mentioned the interconnectedness of the issues.

The township administrator highlighted the work their school district had done to shift focus to mental health and social emotional health, utilizing grant funding to bring programs and other interventions into the district to work directly with students and their families. Over the years, the district has committed to expand their team of school counselors and partnerships to provide better services to students and collect better data to inform decision-making about future services.

The school principal also shared insight about students' social/emotional health as it connects to social media. They indicated that social media use is a significant problem for students in 6th grade and up. The students' brains are not equipped to handle the issues that come up with social media use – they are able to type something they would not verbally say, but do not learn that the typed words come with consequences. Students do not know how to navigate these online conversations without the social-emotional skills they need in addition to the traumas they may have.

Most of these incidences occur outside of school, but when they come into school, teachers and staff do not know what to do about it. School staff often do not have enough comfort level to know about how parents and staff should talk to children and adolescents about social media – especially considering the ever-evolving technology of new apps and services that youth opt to use.

So when they feel like they're being attacked and they don't have the social-emotional skills to be able to deal with these negative things being said about them in front of everybody, then they don't know how to deal with it at school and it shuts their brain off from learning... It is too much freedom that has long-lasting effects that students don't comprehend and actually can't comprehend.

School Principal

Connected to all these challenges is mental health and trauma. The mental health provider we interviewed shared, “A lot of kids have experienced multiple traumas in their life and they’re taking that with them to school.” Mental health providers try to share with school staff when a child has had trauma, without identifying specific details. It is obvious to school personnel and mental health professionals alike, as shared by the school principal: “Kids with trauma – kids in that fight or flight mode – they can’t learn in that moment.” The mental health professional, who has been in the field for almost two decades, noticed a shift in the attention schools gave to mental health about three years ago – schools recognized that trauma impacts student success. However, there are additional challenges with a shifting focus to mental health for students – teachers and school staff are now addressing issues they have not fully thought about before. Mental health providers are also working to raise awareness of mental health and secondary traumatic stress for school personnel to avoid burnout.

The school principal highlighted the need for family support in addressing these issues and how the lack of that support can increase the impact on a child’s experience and success in school: “Most of our kids don’t know how to proactively and positively stand up for themselves. I want kids to have a voice, but most of the time they’re not getting that support in modeling that.” Not having that model means students are not developing the skills they need. Children pick up so much from interactions with their family. Schools end up working against the parent – the school principal identifies that it is often the parent who needs the help more than the child. This leaves school staff scrambling to try and get the parents the support they need so they can do better. Parents cannot help with their child’s turmoil if they struggle with their own.

The adult doesn’t see the problem because they are in the middle of it.

School Principal

One Size Does Not Fit All

Unfortunately, even when strong partnerships with community organizations exist, supplementing supportive roles for schools, there are still shortcomings. Different staff members have different skills based on their education and former experiences – some may be more mental health focused, while others lean on their social capital to maintain vast networks of contacts and partners.

It’s not equitable within our district in terms of how we can provide resources to our families in need. We just need to equal the playing field. You shouldn’t suffer because you don’t have that person to be able to help you and you shouldn’t suffer if you’re not on someone’s caseload.

Township Administrator

Barriers to Partnerships

There are multiple partnerships that schools endeavor to build to support their students. Many schools are in partnership with external service providers to meet mental health needs. In Indiana, it is state law that a school has a Memorandum of Understanding with an external mental health provider. However, partnering with external service providers comes with challenges. The township administrator shared how the district learned early on that students without private insurance or who were ineligible for Medicaid were unable to receive services due to the contractual structure of their partnerships with mental health providers. The district ended up having to use grant funding to contract services for students in this situation.

Partnerships with external programs focused on case management have limitations, including the capacity needed to meet the needs of every student in the family, let alone the rest of the family unit (i.e., parents and caregivers). The township administrator shared: "Getting to the masses – which there are far more than 50 [students] per school – that's a challenge for us right now to be able to expand that network and be able to get more support for those students and families."

Challenges exist for the external service providers as well. Mental health providers operate much like a clinic in the school – the predictable and consistent meetings with students will lead to better outcomes. The mental health professional highlighted the need for more teacher availability, as providers often need to collaborate and communicate constantly and consistently around a child's needs. However, time for school staff is limited and expectations about what the providers can do is not always realistic. School staff will sometimes want help with other students when it is not appropriate for the mental health provider to step in that way: "Staff in the schools are stressed and they're just wanting whatever they can get... if I call this person and they can come to respond to this situation then I'm going to call them all the time so they can respond to this situation" (Mental Health Professional). Supervisors work constantly with their providers on setting boundaries, however the boundaries can sometimes increase tension with school staff, when the expectations need to change.

A more structural barrier to effective partnerships is the existing funding structure of these two systems trying to work together. Schools rely on grant funding or community referendums to secure the funding necessary to contract support positions or hire support staff, like social workers or counselors. On the other hand, contracted mental health providers still operate as most health care providers do – through billable services. According to the mental health professional, this complicates the partnership: "How we're basically funding our staff and our program is by providing billable services. If we get pulled into other things that are not direct clinic care, then that affects the business side of doing things." The mental health professional mused about hybrid funding structures that would give providers the flexibility they need to carry out collaborative activities like meetings with school staff.

Schools are also struggling to partner with the parents and caregivers of their students. School staff know that if accessing resources is not easy, families will not access them. Structural barriers like transportation and lack of childcare make it difficult for some families to access community resources. Even when families get connected, the network of agencies and programs within the social support sector can be extremely difficult to navigate. The school principal knows this all too well from their work with students' families: "It's confusing. Who do I go to? Who do I ask? How do I get this? What are some resources? Well... They're all over. How do parents navigate if we struggle to navigate the resources we have?" One potential solution: "How do we get the resources to them instead of expecting them to come to the resources?"

We want to be partners with our parents.

School Principal

The township administrator echoed these thoughts, saying, “Even if you were able to give a parent a phone number, give them a web address, give them a whole list of resources with names and contact people... it will go no further than you just giving it to them.” There is a significant need for follow up and navigation through the complex systems of resources that exist in our communities – and schools currently do not have the capacity, even with the helpful partnerships and programs meant to connect schools with communities to serve the various and diverse needs of all students and their families.

Building Effective Partnerships

The Education Action Team is constantly framing conversations around the following statement: *Imagine if students could get the resources they need when they need it and how they need it.* To do this, we know that effective partnerships with the community must be formed and nurtured. We asked our key informants what would help facilitate these kinds of collaborations.

*We don’t know what we don’t know and the gaps that exist are what creates the challenge.
We really don’t know how to do it.*

Township Administrator

Schools acknowledge that community resources are not connected in a way that creates a strong network for schools to rely on and connect with. However, school personnel still feel that having stronger connections and more thorough knowledge of the resources that exist would help them tap into the network of people who have the expertise to navigate these complex systems and make more of the connections. The township administrator thinks we can strengthen school and community partnerships through a combination of asset mapping (identifying the resources specifically for that school and community) and improving the interfacing between community agencies and organizations.

The school principal highlighted the need for constant and open dialogue – having a designated person at the school and at a partnering organization who can have a fluid and constant conversation, as the needs of students and families are always shifting.

Communication is the hardest and biggest part of most partnerships because you have to constantly discuss, ‘Oh, I thought you were doing this...’ ‘Oh, I dropped the ball on that? I just assumed it was happening...’ and then nothing is happening. But communication takes time and there’s not enough time in the day.

School Principal

The mental health provider also alluded to the need for this type of communication but looked at it from a funding perspective. They wish support positions could be partially funded by the school and partially funded by the provider, but shared “there’s not the funds there for that in education, from the state.” Moreover, “There’s just a lot of pressure, too, from the schools on their staff. Those additional pressures get in the way of being able to have more regular scheduled times with teachers about that student.” Of course, being more involved with team and staff meetings at the school takes away from providing direct (billable) care – which is the only way some mental health programming can occur in the school setting. This is a heavy concern for mental health providers – they need enough billable services to cover the cost of the program to sustain it.

We don’t like to talk about dollars because anyone in this field, that’s not really their passion. But that’s how you are able to support a program and have staffing for it – you have to be able to cover your costs in order to provide the services.

Mental Health Provider

As a result of this lack of communication, there is a breakdown in potentially collaborative efforts to support students and their families. The school principal shared a story of school staff purchasing small amounts of groceries to deliver to families at the start of the Covid-19 crisis. However, the need was too great and the capacity of the staff too small to realistically meet that need. Fortunately, a secretary reached out to a local church who jumped at the chance to step in and offer support. When approached by a family, school staff passed them along to church volunteers, who handled everything from that point on. This kind of partnership rarely happens however – schools do not know who to go to in the community and parents are not sure how to get help. When the connections are made, it has positive outcomes for the school, the community partner, and, most importantly, the students and families.

Impactful Actions

When asked about the single most impactful actions we could be taking right now to support students, each interviewee emphatically stated – family engagement and support.

The township administrator discussed the need for families to be engaged on a continued basis. However, with the Covid-19 crisis, they have increased concern about how the disruption will impact facets of the education process, such as attendance: “I really have a big fear of attendance not being a priority once we return to school. If kids and parents have seen that they can do school outside of school, I’m afraid that they’re going to think, ‘Why do I need to go?’” At the same time, parents have gained perspective through E-learning of the demands on their children and the importance of their children focusing on each class. The township administrator acknowledged that the disruptions could also be a “blessing in disguise in terms of exposing parents to a different perspective of their child’s education.” They emphasized that we face a critical moment to change the narrative and make sure parents understand that their engagement in their child’s education is important, especially now that they are more aware of what happens in the classroom (and out of it).

The narrative must also shift for schools. The mental health professional referenced the way attendance is tied to values – families need to be engaged early on by schools to “see things a little differently and dream big for their child.” If parents are only engaged when problems or challenges arise, they might get defensive, feeling like they are only being told how they are getting it wrong. Parents might be less likely to partner with schools when this reactionary approach is taken: “Parents want to be listened to and heard.” Proactive and strengths-based engagement can have a greater long-term impact. They also emphasize the critical role of leadership – **that family and community engagement cannot be distilled to one single role. It is a school-wide endeavor.**

Family involvement is the key to it all.

Mental Health Professional

The most basic way of engaging a family might be connecting them to the resources and services they need most – and that is where schools are lacking capacity right now. The school principal recognizes the need for *integrated* wraparound plans – not only for families who are struggling, but for every single family, because each family’s needs and challenges are unique and subject to change over time. The Covid-19 crisis only increases the amount of support families need: “How do we get a plan for every family to make sure we’re all moving in the right direction and using every resource possible?”

It sounds easy to engage the family, but it’s not. There are so many different barriers in their life, and they can’t focus on the education of their child if they don’t know if they will have a place to live next month. That’s where their focus is going to be – on those really basic needs. That’s one easy way to engage families – if there are basic needs that they have, then helping them connect is automatically going to help create a relationship with that person.

Mental Health Professional

Building trust is an essential part of engaging families. Parents and caregivers might not take advantage of resources because of pride – it requires reflection and vulnerability to identify their own challenges. However, nobody is taught how to be a parent, nor is parenting an inherent skill. Those who have experienced their own Adverse Childhood Experiences may not have positive examples to draw upon when it comes to caring for their own child. School staff recognize that some families need an advocate to help build relationships and skills – and that relationship needs be grounded in trust.

How do we build the relationships with the adults, so they trust you when you tell them, ‘You need to do this?’

Mental Health Professional

There is nothing to hide. We are just trying to do the best we can with what we have.

Township Administrator

Discussion of Key Informant Interview Findings

The challenges impacting student success are interrelated and connected – they cannot be teased out or addressed individually. This theme, which was originally reflected by our Community Conversations, was emphasized through our key informant interviews, specifically when reflecting on the survey data and the five key topics of focus. While each interviewee focused their discussion on a different topic (based on their expertise and experience), each also recognized the interconnectedness of the topics and the challenge that brings when thinking about solutions.

Structural barriers make it difficult for effective partnerships – supporting families and students is not simply an “information problem.” Schools do not only need to “know more” but need help overcoming structural barriers (including funding and coordination) to more effectively partner with the community resources that exist.

Family engagement is critical for impacting student success and countering the numerous challenges this assessment has identified.

Recommendations

The socioecological framework is utilized in public health to approach problems from a holistic perspective. This framework “identifies multilevel systems of mutual influence and interaction, moving from the individual through linkages to larger social networks including the family, community, social institutions, the state, and global systems [52].” The recommendations outlined in this report fall within this socioecological framework (see **Appendix F**). Each level interacts with and influences the others; therefore, the socioecological model is depicted by concentric circles, representing the different levels of influence.

We identify the individual level as an individual student attending a school that adopts a **whole child approach** – that is, meeting the needs of the whole child across a variety of factors beyond academics. This effort would then be strengthened by the strategy suggested at the relationship level – **strengths-based family engagement**. This engagement is a critical need identified in this assessment; however, parents and caregivers often only participate in the educational process when a problem occurs. Taking a strengths-based approach would ensure that caregivers and families are engaged early, often, and for positive reasons – enhancing the trust necessary for schools to partner with them when faced with a challenge.

Each of these strategies can be nested within the **Community Schools Model**. A Community School is a strategy that organizes community supports for student success, strengthening families and neighborhoods. As a community-level approach, this is a long-term commitment for schools and communities to undertake, involving multiple pillars for success. However, a whole child approach and family engagement are key elements within the Community Schools Model. Braiding these strategies together increases the likelihood of collaborative positive outcomes.

Each of these strategies are evidence-based, backed up by research and practice. Why aren’t more schools implementing them? We believe the answer is based in the disinvestment of education that has taken place over decades in the United States and specifically in Indiana. Schools are forced to apply for grants, seek financial support from foundations and government contracts, or make their case to the public to raise revenue for supportive services like the strategic needs demonstrated here. While schools need to be held accountable to show positive impact and outcomes from taxpayer investment, the outcomes are not feasible with the limited revenue being funneled to schools at this time. Therefore, at a systems and policy level, we must rethink how we **allocate the resources schools** need to fully support students and work towards the future we want for our children and families.

In this section of our report, we discuss each of these recommendations and share tangible resources and action steps we can take to make these ideas a reality in Indiana schools.

Shifting the Narrative

An underlying paradigm shift must take place to invest fully in the recommendations of this report. To shift systems and address challenges as complex as those discussed in this report, we can address six conditions of systems change: policies, practices, resource flows, relationships and connections, power dynamics, and mental models [53]. Systems theorists suggest that mental models are foundational drivers of activity within a system [53]. Within the education system, a reactive response paradigm remains dominant – responding to problems when they occur, rather than preventing problems from happening in the first place. Historically, schools were established to be institutions of education – nothing more, nothing less. Today, schools are a gateway to resources and services, perhaps the only access point a family knows about. When schools adopt a proactive, preventative paradigm of building supports for families, connecting with community partners, and providing family engagement opportunities, protective factors can be leveraged to prevent multiple negative outcomes. However, we must shift the mental models within the education system (the training that feeds it, the policies that guide it, and the practices that define it) to begin building the capacity of schools to allow them to operate under this paradigm.



Today, schools are a *gateway* to resources and services, perhaps the only access point a family knows about.



Adopt Whole Child Approaches

Children face a multitude of challenges outside of the school building. A student falling asleep in class may be responsible for taking care of their siblings while their parent is at work. A student lashing out in the classroom may witness domestic violence at home. Students who bully others may not hear a single kind word once they leave school. What happens outside school has a direct impact on what happens inside the classroom.

The **whole child approach** is a primary approach schools can take to acknowledge this reality – students are more than their academic outputs. A single program, service, or initiative cannot adequately address the complex challenges facing students, families, and schools. A whole child approach is therefore integrated into every facet of education, from curriculum to family engagement, engaging all stakeholders – educators, families, policymakers, and community members [3].

“A whole child approach to education is defined by policies, practices, and relationships that ensure each child, in each school, in each community, is healthy, safe, engaged, supported, and challenged... It raises the bar of accountability beyond narrow, single-issue ‘improvement’ strategies to efforts that reflect the broad array of factors influencing long-term success rather than short-term achievement [3].”

The whole child approach is aligned across key functions of the school: curriculum and instruction, school climate and structures, professional development, and student learning. There are five tenets to the whole child approach [54]. Each of the five tenets are accompanied by indicators to track how well they are being achieved, some of which are described in the following sections.

1. **Each student enters schools *healthy* and learns about and practices a healthy lifestyle.** Healthy lifestyles and habits create strong foundations for effective learning. Some indicators associated with health and wellbeing include physical education, health education, health and wellbeing of staff, whether health and wellbeing are integrated into all facets of the school and community, and health eating [55]. Batesville Community School Corporation in Batesville (IN) is a Healthy School Communities mentor site by the Association for Supervision and Curriculum Development and has made important links between the school district and the community to promote healthy behaviors. Schools partner with the local hospital and the local Food and Growers Association to improve cafeteria food and increase access to more fresh fruits and vegetables [56].
2. **Each student learns in an environment that is physically and emotionally *safe* for students and adults.** Feeling safe at school is connected to higher academic achievement, increased student wellbeing, and greater student engagement [56]. Indicators of safety include students feeling valued and respected, the school building is attractive and inviting, the school upholds social justice and equity concepts, and provides students, staff, and family members regular opportunities for learning and support [55]. In New Jersey, students receive coordinated and continuous support to strengthen their social/ emotional skills and enhance positive character traits. Preliminary studies show a reduction in school suspensions and violence [56].

3. **Each student is actively *engaged* in learning and is connected to the school and broader community.** For students to learn and prosper they must be engaged while they are at school, yet this is not always the case. One ASCD survey found that 66% of surveyed students reported being bored in class; 98% of these students found the material to be the main reason for their boredom [56]. Indicators of engagement include teachers using active learning strategies, schools offering a range of opportunities for students to contribute and learn within the community, and students having access to a wide array of extracurricular activities [55]. Ashton Elementary School in Cumberland (RI) won the ASCD Whole Child Award for developing engaging and meaningful learning opportunities for its K – 5 students, parents, and teachers, including after-school activities like karate, drama, global celebrations, mad science, chorus, and a cooking club [56]. The school regularly monitors achievement and provides differentiated instruction to support learning, creating an engaging environment for each student.
4. **Each student has access to personalized learning and is *supported* by qualified, caring adults.** Students that are struggling can be referred to a team that provides wraparound services for the student and their family to connect them with the support they need. When students are supported, they are less likely to engage in violent behaviors, drop out of school, or develop suicidal ideations [56]. Indicators of support include personalizing learning, ensuring adult-student relationships support and encourage each student's academic and personal growth, access to school counselors, and including all families as partners in the child's education [55]. When learning environments focus on relationships, students' social and emotional needs, and establish high expectations, it results in students who perform better academically, are more likely to attend school, and have significantly lower rates of emotional distress, violence, and delinquency [56]. At Quest Early College High School in Humble (TX) students learn by doing and participating in service learning, internships, and social actions that allow them to understand the relevance of what they learn. Additionally, in the past 10 years several states have adopted learning standards for social and emotional learning to help children develop awareness of their emotions, set personal and academic goals, and maintain positive relationships [56].
5. **Each student is *challenged* academically and prepared for success in postsecondary education and for employment and participation in a global environment.** Curricula that challenge students to work hard and inspire higher-level thinking, communications, and problem-solving skills help students succeed in college, other postsecondary education, and the workplace [56]. The Common Core State Standards Initiative requires schools to adopt K – 12 college and career readiness standards [56]. The Bronx Preparatory Charter School in New York prepares students by integrating college readiness into every part of students' education. Within the first three graduating classes, 100% of seniors were admitted into four-year colleges [56].

TAKING ACTION



**Promote use of the
whole child indicators**



**Develop a conversation
series on the 5 tenets**



**Identify resources for schools
specific to the 5 tenets**

Engage Families through Strengths-Based Practices

The Centers for Disease Control and Prevention define parent engagement in schools as parents and school staff working together to support and improve the learning, development, and health of children and adolescents [57].¹⁹ Family engagement in schools is closely linked to better student behavior, higher academic achievement, and enhanced social skills [57].

Every Student Succeeds Act

The **Every Student Succeeds Act (ESSA)** of 2015 requires local educational agencies to conduct outreach to all parents and family members, in addition to implementing programs, activities, and procedures for parents and family members to participate in [58]. Schools must also have a written parent and family engagement policy that meets specific requirements. The ESSA focused more on family engagement, rather than *involvement*, as the previous No Child Left Behind Act did. In 2016, the national percentages of parents who reported attending a general meeting at their child's school (89%), a parent-teacher conference (78%), or a school or class event (79%) reflected their highest recorded levels [59].

Engaging families can be challenging, as the data from our assessment confirms. Parents of students living in households below the federal poverty level tend to be less involved in school activities [59]. Barriers to family engagement can include time, navigating family and work schedules, transportation, or lack of trust. The National Parent Teacher Association outlines six national standards for successful family-school partnerships, outlined in Table 8 [60].

TABLE 8: SUCCESSFUL FAMILY-SCHOOL PARTNERSHIPS STANDARDS [60]

Successful Family-School Partnership Standards	
Standard 1	Welcoming All Families into the School Community
Standard 2	Communicating Effectively
Standard 3	Supporting Student Success
Standard 4	Speaking Up for Every Child
Standard 5	Sharing Power
Standard 6	Collaborating with Community

A **strengths-based approach to family engagement** expresses a belief that all families can make progress and interactions are entered to make progress for better outcomes together. Key strengths-based attitudes for educators to adopt may include:

- *Families are the first and most important teachers of their children.*
- *Families are our partners with a critical role in their family's development.*
- *Families have expertise about their child and their family.*
- *Families' contributions are important and valuable [61].*

¹⁹ While the term "parent" is commonly used, it should be noted that many children are not under the care of their biological parent – caretaking falls to grandparents, aunts/ uncles, and foster parents.

Applying research from the Search Institute, we propose engaging families through a strengths-based lens, applying the framework of developing relationships to create bridges across youth development, education, and family development [62]. Applying these theories and practices could help build trusting relationships between school staff and families, improving outcomes for students. A strengths-based approach can be used in different situations and settings. The approach involves acknowledging the strengths of each family, respecting and learning from differences, showing openness to adapting practices based on family preferences, sharing decision-making, and approaching families as equal and reciprocal partners [61].

Search Institute partnered with six community partners over two years to design and evaluate *Keep Connected*, a family engagement and education resource focused on strengthening family relationships, specifically through the middle school years. *Keep Connected* is based on Search Institute’s research on family strengths and the framework for developmental assets.

The research of *Keep Connected* recognizes the various sectors of the community that play a role in building stronger family relationships, including educators who know that students learn better and are more motivated when their parents are involved and committed to supporting their learning. However, research also points to dozens of barriers to family engagement (see Figure 21). Therefore, *Keep Connected* research reframes the traditional approach to family engagement (see Figure 22) and provides resources and a guided curriculum for schools and community partners to implement a two-generation approach within their own community, in addition to a learning community of peer organizations and professional development resources [5]. The framework is applicable to the diverse range of sectors with which youth and families engage.

FIGURE 21: BARRIERS TO FAMILY ENGAGEMENT [5]

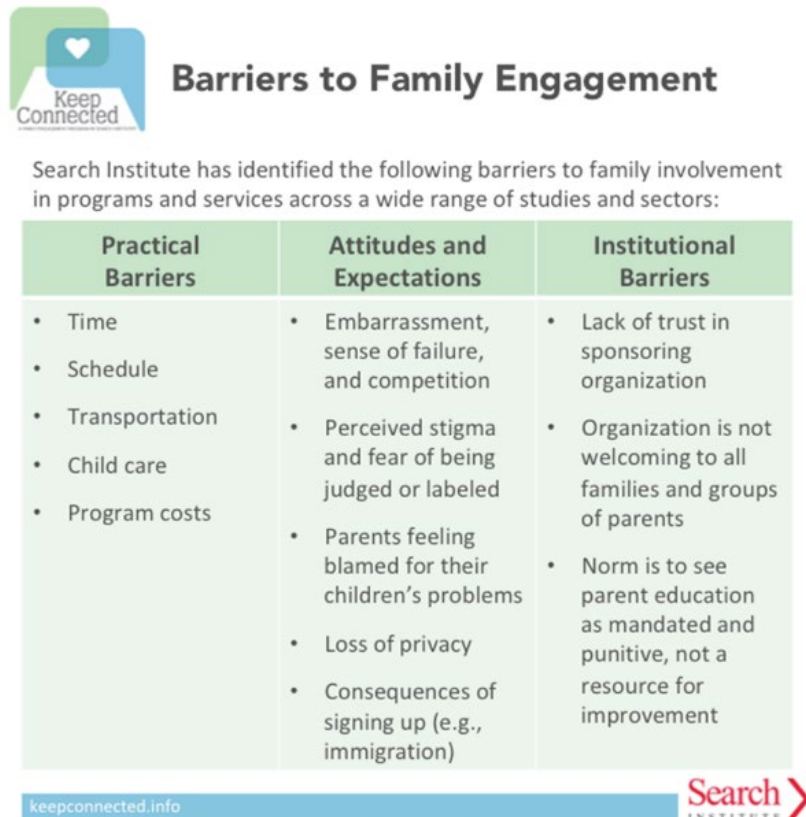


FIGURE 22: REFRAMING FAMILY ENGAGEMENT [5]



TAKING ACTION



Develop platforms to share best practices



**Promote the development of Family
Advisory Boards**



**Reward and celebrate Family
Engagement practices**



**Promote Search Institute research
and resources**

Support and Strengthen Community Schools

The **Community Schools Model** focuses on the whole child from a systems level. One leading urban school superintendent describes community schools as “a strategy for organizing the resources of a community around student success” [63]. Community schools ground their work in research about promoting student success, including family engagement, out-of-school time experiences, student wellness, and family stability [63]. Through this model schools, families, and communities collaborate to support students’ educational success, build stronger families, and improve communities [63]. This coordinated systems approach leads to long-term transformation, comprising of multiple programs, services, and opportunities.

The pandemic has shown how critical effective coordination of school-family-community partnerships are to supporting students’ and families’ basic needs, student re-engagement, and learning both during crises like the pandemic and beyond. Throughout the pandemic, community schools were able to mobilize more quickly and effectively to support the social, emotional, physical, and learning needs of students and their families. Research and evaluations (including a recent RAND Corporation study of New York City’s community schools) show community schools are an effective, evidence-based strategy for school improvement and can transform high-poverty, low-performing schools into thriving institutions [64].

The Community Schools framework places schools at the center of communities, essentially transforming them into hubs where the community can gather its resources to help achieve better outcomes for students, their families, and the surrounding neighborhoods [65]. Community schools change the way community challenges are defined and how resources are coordinated, integrated, and delivered to support communities [65]. Key elements of the Community Schools Model include the following:

Strong Partnerships: Community partners play a critical role in enabling or enhancing the effectiveness of school personnel to carry out their mission in preparing students for a future of college, career, and citizenship [65]. Some partners remove barriers to learning, while others expand opportunities to students and their families. Others respond to the most critical needs of families [65].

Coordination of Community Resources: A Community School Coordinator (or similar role) works in partnership with school staff and community partners to coordinate efforts and connect students and families to services and resources, considered critical to the success of a Community School. This is a pivotal individual who is responsible for collaboration between school, family, and community stakeholders, thus serving as the full-time, right-hand professional to the Principal for all such matters [65].

Family and Community Engagement: Community schools are centered on equity and embracing diversity [66]. Engaging families and community members in the planning and decision-making process of the community school framework not only ensures that schools meet existing needs equitably across various community groups and cultures – it also helps foster local leaders and build social capital [65].

Shared Vision of Student Success: Community schools use a collective impact approach to improve outcomes for students. A key component of collective impact is bringing multiple partners and community sectors together to work towards a shared vision. The Coalition for Community Schools articulates six Conditions for Learning, that serve as guideposts for community school partners to aim for (see Table 9) [66].

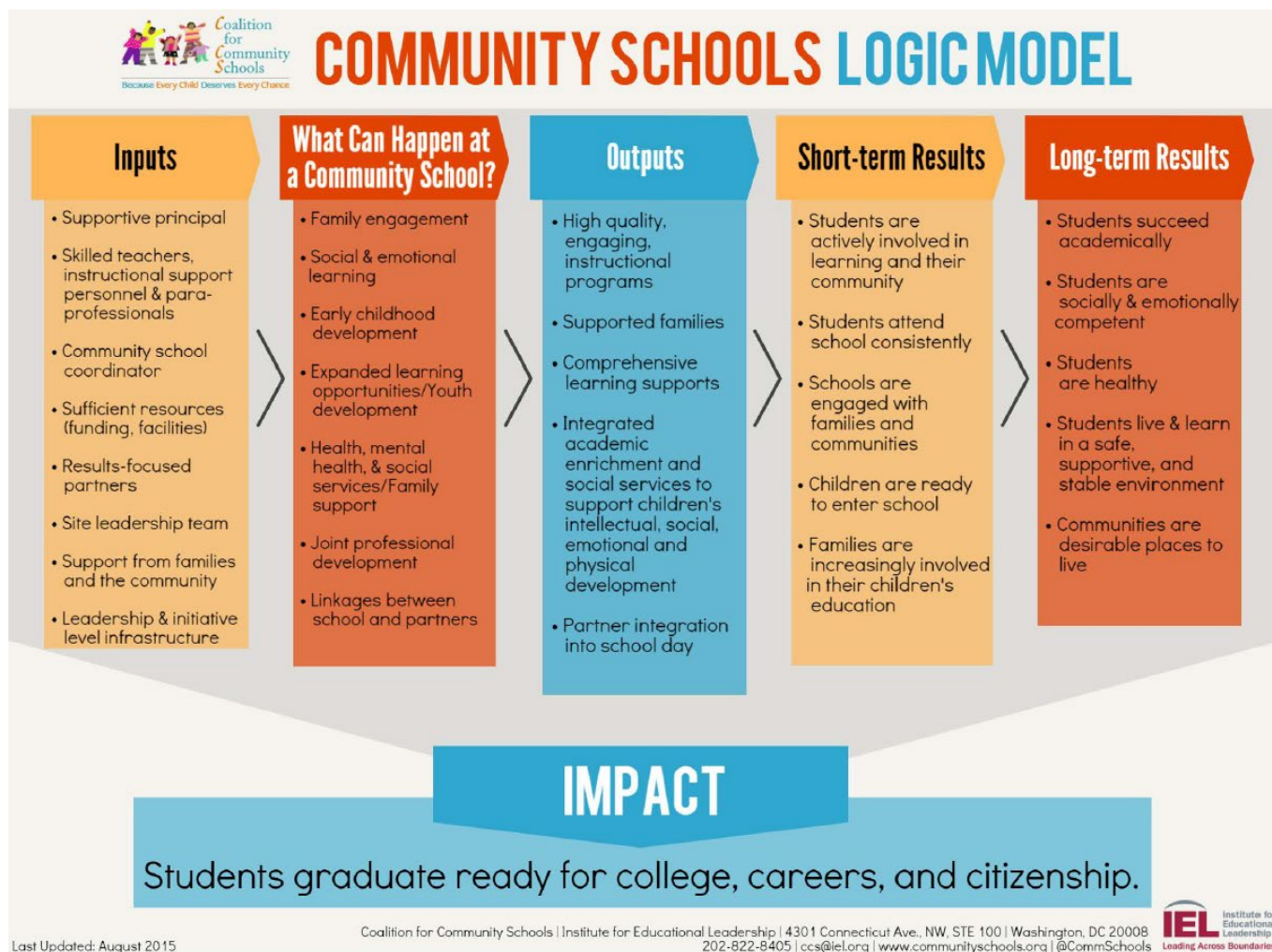
TABLE 9: COMMUNITY SCHOOLS CONDITIONS FOR LEARNING

The Six Conditions for Learning
<ul style="list-style-type: none">• Early childhood development is fostered through high-quality, comprehensive programs that nurture learning and development.• The school has a core instructional program with qualified teachers, a challenging curriculum, and high standards and expectations for students.• Students are motivated and engaged in learning – both in school and in community settings, during and after school.• The basic physical, social, emotional, and economic needs of young people and their families are met.• There is mutual respect and effective collaboration among parents and school staff.• The community is engaged in the school and promotes a school climate that is safe, supportive, and respectful and that connects students to a broader learning community.

The National Education Policy Center identifies Community Schools as an evidence-based equity learning improvement strategy with four key pillars [67] – in addition to the Community School Coordinator role:

- Collaborative leadership practices
- Integrated student supports
- Family and community engagement
- Access to out-of-school learning activities

FIGURE 23: COMMUNITY SCHOOLS LOGIC MODEL (COALITION FOR COMMUNITY SCHOOLS)



TAKING ACTION



**Identify Community School
Model resources**



**Support schools in developing
community councils**

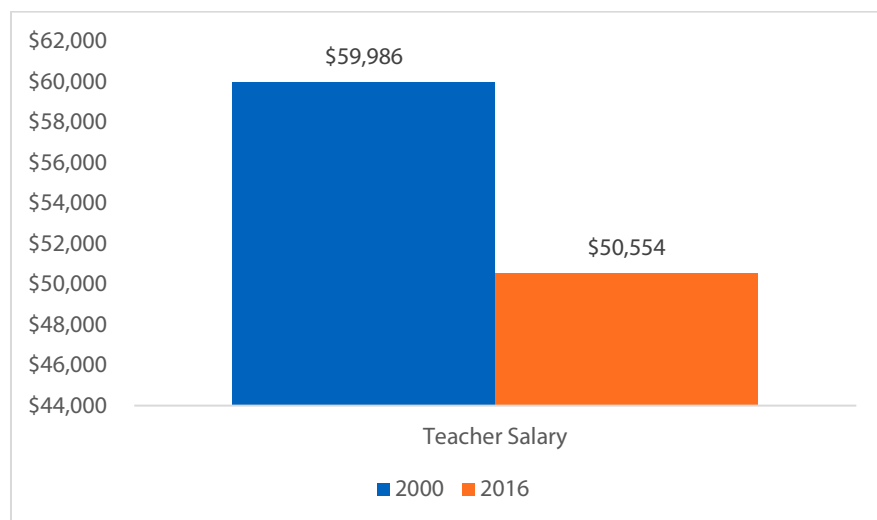


**Share Community School
Model practices and research**

Increase Investment in Public Education

During the 2017-2018 school year, Indiana ranked 47th in average per pupil funding and 34th in average teacher salary [68]. Over the last 10 years, Indiana's average teacher pay dropped nearly \$10,000 (see Figure 24) [69]. In addition, Indiana teachers spend an average of \$462 of their own money on school supplies each year [69].

FIGURE 24: INDIANA TEACHER SALARY COMPARISON, 2000 AND 2016



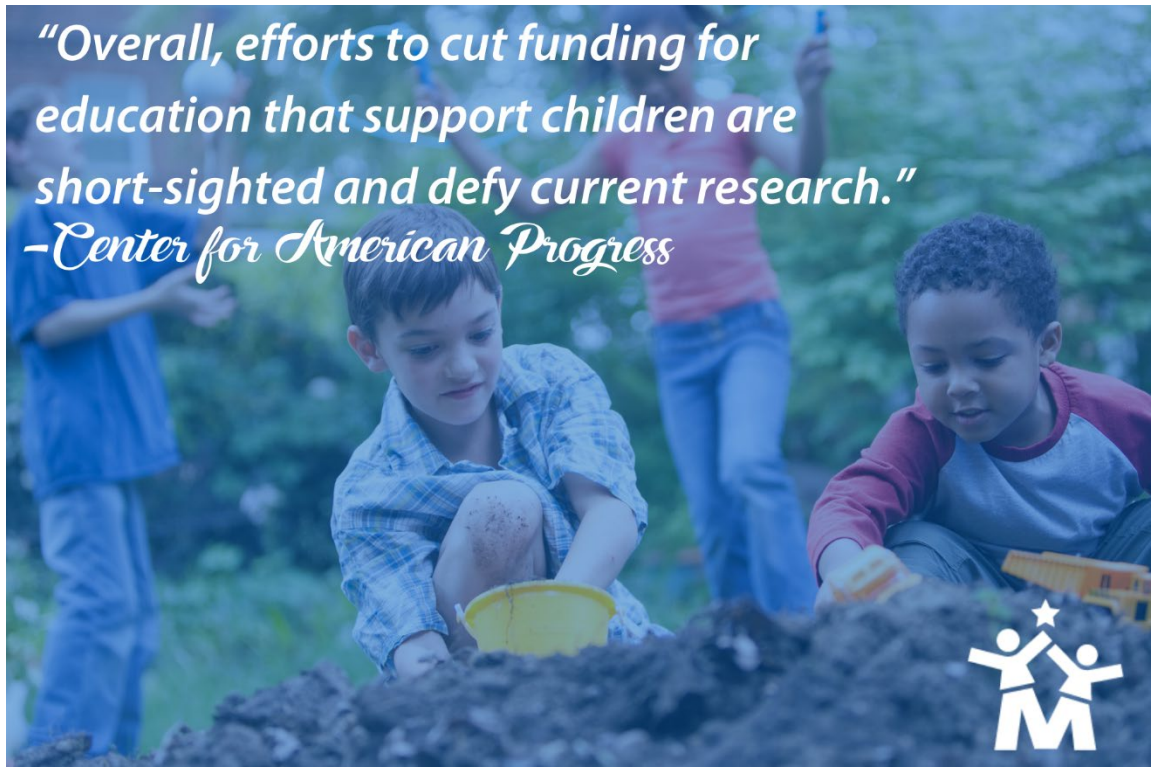
Educators do not need a study to recognize the importance of investing in education. They see the effects of underfunding every day. The same cannot always be said for policymakers. In 2017, then U.S. Secretary of Education Betsy DeVos suggested that additional funding for schools would not make a big difference in education outcomes [70]. Multiple studies over the years indicate the opposite. Increased spending in education has been linked to increases in scores on the National Assessment of Educational Progress (NAEP), higher graduation rates, and greater social mobility [71], [72], [73]. A 2016 statistical study found that increased spending on education could be linked to educational attainment, adult wages, family income, and poverty status [74]. The increase in spending also resulted in improvements to school quality, reductions in student-to-teacher ratios, increase in teacher salaries, and more learning days [74].

Significant funding inequities compound the challenge of disinvestment in public education. Although segregation was deemed unconstitutional in 1954, school districts remain some of the most segregated sectors of our society, resulting in racially divided schools for racially divided neighborhoods [75]. Previous research indicates that under the current school funding system, both poor communities and school systems that are largely nonwhite end up having fewer resources, leaving poor, nonwhite districts at a disadvantage twice that of poor, white districts [75]. There are three primary reasons these inequities persist. First, almost all state funding policies begin with a base of local dollars, which ultimately incentivize borders that cut students off from resources and reinforce broad inequalities. Second, state allocations are not enough to make up for the gap between the advantaged and under-resourced. Third, states continually fail to reorganize school district boundaries, perpetuating the cycle all over again [75].

EdBuild's 2019 report on the inequitable reality of school funding (*Dismissed: America's Most Divisive School District Borders*) puts forth three steps to address the divides between school districts (Table 10).²⁰

TABLE 10: EDBUILD'S THREE STEPS TO ADDRESS SCHOOL DIVIDES

Three Steps to Address School Divides	
1)	School funding policies are set by states. They should revise their funding systems to change or end the role played by local tax revenues to eliminate the local funding disparities between districts.
2)	Failing a first-order solution that prevents funding gaps from below, states can make up the difference from above by providing disadvantaged districts with equitable and sufficient state aid.
3)	States should draw borders that include broader communities with diverse students and the resources to support them. At the very least, states can create larger taxing districts for schools, pooling resources and smoothing out funding gaps. At best, lines can be drawn that divide neither students nor tax bases, bringing a true end to separate and unequal education systems.



²⁰ Note: EdBuild closed in 2020 and the organization's website is not available at the time of this report's publication.
<https://www.chalkbeat.org/2019/7/11/21121011/edbuild-nonprofit-that-highlighted-funding-disparities-plans-to-close-next-year>

TAKING ACTION



Identify new, innovative investment opportunities



Engage the community to advocate for investment in public education



Identify community champions and leaders willing to prioritize investment in public education

Future Directions

School and community partners continue to engage in conversations and apply learnings from previous initiatives that sought to improve outcomes for students and their families. Our hope is this report will inspire new conversations and innovative solution-building to continue this good work. Specifically, MCCOY, IUPUI's Office of Community Engagement, and the Education Action Team, will continue leaning into our partnerships to carry forth the following promising projects.

School-Based Community Health Worker Program

A School-Based Community Health Worker (CHW) program can address identified social determinants of health by engaging with youth and families within a given community. In one school community, MCCOY is collaborating with a variety of partners, services providers, and funders for a CHW to directly address disengaged, chronically absent students and their families, a direct outcome of this Education Action Team's engagement.

Community Conversations

Community Conversations engage stakeholders of a given community to provide their perspectives of situations within their area. Such conversations are important in defining what the assessment data actually means and what stakeholders value. The Education Action Team will be planning Community Conversations around the findings of this report, working with neighborhoods and school districts around Marion County to identify solutions to these challenges.

Asset Mapping

Asset Mapping involves identifying resources and assets within a school community that youth and families could access to address identified needs. In Marion County, the SAVI database system at IUPUI serves as a foundation for such investigation in any given school community. The Education Action Team will build upon this foundation to identify additional resources and tools school communities can use to map the resources available to educators, students, and families.

Through these projects, building new relationships, and engaging the community, we believe we can find opportunities emerging out of the Covid-19 crisis to improve outcomes for schools, students, and families; because when our children thrive, we all thrive.

References Cited

1. Medina, M.A., Murtadha, K., & Grim, J. (2020). Community schools as a vehicle for social justice and equity. In R. Kronick (Ed.), *Emerging perspectives on community schools and the engaged university*. pp. 80-97.
2. Indiana Youth Institute. (2020). *2020 Indiana KIDS COUNT Data Book: A Profile of Hoosier Youth*. Indiana Youth Institute.
3. Association for Supervision and Curriculum Development. (n.d.). *A whole child approach to education and the common core state standards initiative*. Association for Supervision and Curriculum Development. Retrieved June 23, 2020 from <http://www.ascd.org/ASCD/pdf/siteASCD/policy/CCSS-and-Whole-Child-one-pager.pdf>.
4. Darling-Hammond, L. & Cook-Harvey, C. M. (2018). *Educating the whole child: Improving school climate to support student success*. Learning Policy Institute. Retrieved from <https://learningpolicyinstitute.org/product/educating-whole-child-report>.
5. Search Institute. (2020). *Keep Connected: A family engagement program by Search Institute*. Search Institute. Retrieved from <https://keepconnected.searchinstitute.org/>.
6. U.S. Department of Health and Human Services. (2016). *Family engagement: Partnering with families to improve child welfare outcomes*. Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from https://www.childwelfare.gov/pubPDFs/fam_engagement.pdf.
7. Coalition for Community Schools. (2017). *Community schools: A whole-child framework for school improvement*. Coalition for Community Schools, Institute for Educational Leadership.
8. Castrechini, S. & London, R. (2012). *Positive student outcomes in community schools*. John W. Gardnes Center for Youth and their Communities.
9. U.S. Department of Education. (2019). *Chronic absenteeism in the nation's schools: A hidden educational crisis*. U.S. Department of Education. Retrieved June 12, 2020 from <https://www2.ed.gov/datastory/chronicabsenteeism.html>.
10. Maier, A., Daniel, J., & Oakes, J. (2017). *Community schools as an effective school improvement strategy: A review of the evidence*. Learning Policy Institute.
11. Beaver, J.K. & Weinbaum, E. H. (2015). *Measuring school capacity, maximizing school improvement*. Consortium for Policy Research in Education.
12. Martin, C., Boser, U., Benner, M., & Baffour, P. (2018). *A quality approach to school funding: Lessons learned from school finance litigation*. Center for American Progress. Retrieved June 25, 2020 from <https://www.americanprogress.org/issues/education-k-12/reports/2018/11/13/460397/quality-approach-school-funding/>.

13. Paretlow, L., Shapiro, S., McDaniels, A., & Brown, C. (2018). *Fixing chronic disinvestment in K-12 schools*. Center for American Progress.
14. Weir, K. (2012). School psychologists feel the squeeze. *Monitor on Psychology*, 43 (8). Weir, K. (2012, September). School psychologists feel the squeeze. *Monitor on Psychology*, 43(8). <http://www.apa.org/monitor/2012/09/squeeze>.
15. American Federation of Teachers. (2018). *A decade of neglect: Public education funding in the aftermath of the great recession*. American Federation of Teachers.
16. Annie E. Casey Foundation. (2018). *Child population by age group in Marion County*. Kids Count Data Center. <https://datacenter.kidscount.org/data#IN/2/0/char/0>.
17. Indiana Youth Institute. (2020). *Marion County Snapshot*. Indiana Youth Institute. <https://iyi-website.s3.amazonaws.com/data-book/2020+Snapshots+/Snapshots/Marion.pdf>.
18. Indiana Business Research Center at Indiana University's Kelley School of Business. (2020). *Marion County, IN*. StatsIndiana. https://www.stats.indiana.edu/profiles/profiles.asp?scope_choice=a&county_changer=18097.
19. Indianapolis Public Library. (2020). *Indianapolis Public Schools collection*. Indianapolis Public Library. <http://www.digitalindy.org/cdm/ips>.
20. Indiana Department of Education. (2020). *Indianapolis Public Schools (5385)*. Indiana Department of Education. Retrieved August 11, 2020 from <https://inview.doe.in.gov/corporations/1053850000/population>.
21. U.S. Census Bureau. (2018). *Center Township, Marion County, IN*. Census Reporter. Retrieved August 11, 2020 from <https://censusreporter.org/profiles/06000US1809711512-center-township-marion-county-in/>.
22. MSD of Decatur Township. (2020). *Decatur Township educational history*. MSD of Decatur Township. Retrieved August 11, 2020 from <https://www.decaturoproud.org/about/history>.
23. U.S. Census Bureau. (2018). *Decatur Township, Marion County, IN*. Census Reporter. Retrieved August 11, 2020 from <https://censusreporter.org/profiles/06000US1809717092-decaturo-township-marion-county-in/>.
24. Indiana Department of Education. (2020). *MSD Decatur Township (5300)*. Indiana Department of Education. Retrieved August 11, 2020 from <https://inview.doe.in.gov/corporations/1053000000/population>.
25. MSD of Warren Township. (2020). *About us*. MSD of Warren Township. Retrieved August 11, 2020 from <https://www.warren.k12.in.us/o/msd-of-warren-township/page/about-us--650#:~:text=Named%20for%20Dr.between%20Hunter%20and%20Kitley%20Avenues>.
26. U.S. Census Bureau. (2020). *Warren Township, Marion County, IN*. Census Reporter. Retrieved August 11, 2020 from <http://censusreporter.org/profiles/06000US1809780144-warren-township-marion-county-in/>.

27. Indiana Department of Education. (2020). *MSD Warren Township (5360)*. Indiana Department of Education. Retrieved August 11, 2020 from <https://inview.doe.in.gov/corporations/1053600000/population>.
28. Collaborative for Academic, Social, and Emotional Learning (CASEL). (2020). *What is SEL?* CASEL. <https://casel.org/what-is-sel/>.
29. National Conference of State Legislatures. (2018). *Social Emotional Learning*. National Conference of State Legislatures. Retrieved February 2020 from <https://www.ncsl.org/research/education/social-emotional-learning.aspx>.
30. Collaborative for Academic, Social, and Emotional Learning (CASEL). (2020). *SEL impact*. CASEL. Retrieved August 11, 2020 from <https://casel.org/impact/>.
31. Garcia, E. & Weiss, E. (2018). *Student absenteeism: Who misses school and how missing school matters for performance*. Economic Policy Institute.
32. Indiana Department of Education. (2019). *Indiana State Report*. Indiana Department of Education. Retrieved March 10, 2020 from <https://inview.doe.in.gov/state/1088000000/attendance>.
33. Center for Research in Education and Social Policy. (2018) *Chronic absenteeism and its impact on achievement*. University of Delaware.
34. Indiana Youth Institute. (2021). *2021 Indiana KIDS COUNT Data Book: A Profile of Hoosier Youth*. Indiana Youth Institute.
35. Centers for Disease Control and Prevention. (2019). *Preventing youth violence*. Centers for Disease Control and Prevention. Retrieved February 2020 from <https://www.cdc.gov/violenceprevention/youthviolence/fastfact.html>.
36. American Academy of Pediatrics. (2016). *Constantly connected: Adverse effects of media on children and teens*. American Academy of Pediatrics. Retrieved August 11, 2020 from <https://www.healthychildren.org/English/family-life/Media/Pages/Adverse-Effects-of-Television-Commercials.aspx>.
37. Slade, S. & Griffith, D. (n.d.) A whole child approach to student success. *KEDI Journal of Educational Policy*, 10 (3).
38. Chiang, R. J., Meagher, W., & Slade, S. (2015). How the Whole School, Whole Community, Whole Child model works: Creating greater alignment, integration, and collaboration between health and education. *Journal of School Health*, 85 (11). pp. 775-784.
39. Blank, M. J., Melaville, A., & Shah, B. P. (2003). *Making the difference: Research and practice in community schools*. Coalition for Community Schools..
40. Caffarella, R. S. & Zinn, L. F. (1999). Professional development for faculty: A conceptual framework of barriers and supports. *Innovative Higher Education*, 23 (4). pp. 241-254.

41. Buczynski, S. & Hansen, C. B. (2010). Impact of professional development on teacher practice: Uncovering connections. *Teaching & Teacher Education*, 26 (3). pp. 559-607.
42. National Center for Homeless Education. (2017). *In school everyday: Addressing chronic absenteeism among students experiencing homelessness*. National Center for Homeless Education.
43. National Center on Educational Outcomes. (2018). *Students with disabilities and chronic absenteeism*. University of Minnesota.
44. Harper, K., Ryberg, R., & D. Temkin. (2019). *Black students and students with disabilities remain more likely to receive out-of-school suspensions, despite overall declines*. Child Trends. Retrieved August 11, 2020 from <https://www.childtrends.org/publications/black-students-disabilities-out-of-school-suspensions>.
45. Centers for Disease Control and Prevention. (2017). *Lesbian, gay, bisexual, and transgender health*. Centers for Disease Control and Prevention. Retrieved August 11, 2020 from <https://www.cdc.gov/lgbthealth/youth.htm>.
46. Morton, M., Dworsky, A., Patel, S., & Samuels, G. (2018). Missed opportunities: LGBTQ youth homelessness in America. Chapin Hall at the University of Chicago. Retrieved August 11, 2020 from <https://www.chapinhall.org/research/lgbtq-young-adults-experience-homelessness-at-more-than-twice-the-rate-of-peers/>.
47. Kosciw, J. G., Greta, E. A., Zongrone, A. D., Clark, C. M., & Truong, N. L. (2018). *The 2017 school climate survey: The experiences of lesbian, gay, bisexual, transgender, and queer youth in our nation's schools*. GLSEN.
48. Lisotto, M. J. (2017). *Mental health disparities: Hispanics and Latinos*. American Psychiatric Association, Division of Diversity and Health Equity.
49. Cavazos, S. (2015). *A shortage everyone can agree on: Indianapolis schools don't have enough black teachers*. Chalkbeat Indiana. Retrieved May 11, 2020 from <https://in.chalkbeat.org/2015/12/7/21095211/a-shortage-everyone-can-agree-on-indianapolis-schools-don-t-have-enough-black-teachers>.
50. Tschann-Moran, M. & Hoy, W. K. (2000). A multidisciplinary analysis of the nature, meaning, and measurement of trust. *Review of Educational Research*, 70 (4). pp. 547-593.
51. Adams, C. M. & Forsyth, P. B. (2013). Revisiting the trust effect in urban elementary schools. *Elementary School Journal*, 114 (1). pp. 1-21.
52. Coreil, J. (2010). *Social and behavioral foundations of public health* (2nd ed.). Sage Publications, Inc.
53. Kania, J., Kramer, M., & Senge, P. (2018). *The water of systems change*. FSG.
54. Association for Supervision and Curriculum Development. (2015). *About the whole child approach to education*. Whole Child Education. Retrieved, June 23, 2020 from <http://www.wholechildeducation.org/about/>.

55. Association for Supervision and Curriculum Development (2013). *Whole child tenant indicators*. Whole Child Education. Retrieved June 23, 2020 from <http://www.wholechildeducation.org/assets/content/mx-resources/wholechildindicators-all.pdf>.
56. Association for Supervision and Curriculum Development (2012). *Making the case for educating the whole child*. Whole Child Education. Retrieved June 23, 2020 from <http://www.wholechildeducation.org/assets/content/WholeChild-MakingTheCase.pdf>.
57. Centers for Disease Control and Prevention. (2018). *Parent engagement in schools*. Centers for Disease Control and Prevention. Retrieved from: https://www.cdc.gov/healthyyouth/protective/parent_engagement.htm#:~:text=Parent%20engagement%20in%20schools%20is,health%20of%20children%20and%20adolescents.
58. National Education Association. (2015). *Quick brief on family engagement in Every Student Succeeds Act (ESSA) of 2015*. National Education Association. Retrieved from <https://ra.nea.org/wp-content/uploads/2016/06/FCE-in-ESSA-in-Brief.pdf>.
59. Child Trends. (2013). *Parental involvement in schools*. Child Trends. Retrieved from <https://www.childtrends.org/?indicators=parental-involvement-in-schools>.
60. National Parent Teacher Association. (2009). *National standards for family-school partnerships*. National Parent Teacher Association. Retrieved from <https://www.pta.org/home/run-your-pta/National-Standards-for-Family-School-Partnerships>.
61. U.S. Department of Health and Human Services. (2019). *Strength-based attitudes*. Early Childhood Learning and Knowledge Center. Retrieved from <https://eclkc.ohs.acf.hhs.gov/family-engagement/developing-relationships-families/strength-based-attitudes>.
62. Search Institute. (2020). *Engaging and strengthening families*. Search Institute. Retrieved from <https://www.search-institute.org/our-research/current-projects/engaging-strengthening-families/>.
63. National Center for Community Schools. (2011). *Building community schools: A guide for action*. The Children's Aid Society.
64. Johnston, W. R., Engberg, J., Oppen, I. M., Sontag-Padilla, L., & Xenakis, L. (2020). *Illustrating the promise of community schools: An assessment of the impact of the New York City Community Schools Initiative*. Rand Corporation.
65. Potapchuk, W. R. (2013). *The role of community schools in place-based initiatives: Collaborating for student success*. Coalition for Community Schools, Institute for Educational Leadership.
66. Coalition for Community Schools. (n.d.) *Community schools: Promoting student success, a rationale and results framework*. Coalition for Community Schools, Institute for Educational Learning.
67. Oakes, J., Maier, A., & Daniel, J. (2017). *Community schools: An evidence-based strategy for equitable school improvement*. National Educational Policy Center.

68. National Education Association. (2019). *Rankings of the states 2018 and estimates of school statistics 2019*. National Education Association.
69. Means, A. (2019). The 3 big reasons thousands rallied for public schools in Indiana. National Education Association. Retrieved June 25, 2020 from <https://educationvotes.nea.org/2019/11/21/the-3-big-reasons-thousands-rallied-for-public-schools-in-indiana/>.
70. Barnum, M. (2017). *DeVos says school spending and student outcomes aren't related, but recent research suggests otherwise*. Chalkbeat. Retrieved June 25, 2020 from <https://www.chalkbeat.org/2017/6/6/21102760/devos-says-school-spending-and-student-outcomes-aren-t-related-but-recent-research-suggests-otherwise>.
71. Lafortune, J., Rothstein, J., & Schanzenbach, D. W. (2016). *School finance reform and distribution of student achievement*. Institute for Research on Labor and Employment.
72. Candelaria, C. A. & Shores, K. A. (2019). Court-ordered finance reforms in the adequacy era: Heterogeneous causal effects and sensitivity. *Education Finance and Policy*, 14 (1). pp. 31-60.
73. Biasi, B. (2019). *School finance equalization increases intergenerational mobility: Evidence from a simulated-instruments approach*. National Bureau of Economic Research.
74. Jackson, K., Johnson, R.C., & Perisco, C. (2016). The effects of school spending on educational and economic outcomes: Evidence from school finance reforms. *The Quarterly Journal of Economics*, 131 (1). pp. 157-218.
75. Edbuild. (2019). Dismissed: America's most divisive school district boarders. Edbuild. Retrieved from <https://edbuild.org/content/dismissed/edbuild-dismissed-full-report-2019.pdf>.
76. Centers for Disease Control and Prevention. (2020). *The social-ecological model: A framework for prevention*. Centers for Disease Control and Prevention. Retrieved August 11, 2020 from <https://www.cdc.gov/violenceprevention/publichealthissue/social-ecologicalmodel.html>.
77. McLeod, S. A. (2020). *Maslow's hierarchy of needs*. Simply Psychology. Retrieved August 19, 2020 from <https://www.simplypsychology.org/maslow.html>.
78. Bowen Center for Health Workforce Research and Policy. (2019). Map gallery: Mental health. IU School of Medicine. Retrieved February 2020 from <https://bowenportal.org/index.php/hpsa-stoplight-mental-health/>.

Appendices

Appendix A: 2020 Early Intervention Planning Council

Appendix B: 2019 – 2020 Education Action Team

Appendix C: 2019 School Needs Assessment Online Survey

Appendix D: 2019 School Needs Assessment Survey – Requested Trainings

Appendix E: Community Conversation Protocol

Appendix F: The Socioecological Model

Appendix G: Maslow’s Hierarchy of Needs

Appendix H: Key Informant Interview Protocol

Appendix A: 2020 Early Intervention Planning Council

Peggy Surbey, Co-Chair

Department of Child Services
Region 10

Aerionna Martin

City of Indianapolis
Office of Education Innovation

Renee Madison

City of Indianapolis
Office of Finance and Management

Damita Lane-Jefferson

Marion Superior Court
Juvenile Probation

Janice Klein

Children's Bureau
(Retired)

Mary Beth Larkins

Sandra Eskenazi Mental Health Center
Child and Adolescent Services

Malachi Walker

Young Men, Inc.
Great Commission Church of God

Maggie Lewis, Co-Chair

City-County Council
Democrat

Paul Annee

City-County Council
Republican

Jennifer Hubartt

Marion Superior Court
Juvenile Division

LaQuita Thomas-Trabue

Department of Child Services
Region 10, Marion East Office

Cortnei Flucas

Indianapolis Public Schools
Unified Student Supports

Chris Duzenberg

MSD of Decatur Township
College and Career Readiness

Kate Roelecke & John Brandon

Marion County Commission on Youth, Inc.
(Backbone Organization)

Appendix B: 2019 – 2020 Education Action Team

Patricia Burton
MSD Pike Township

Shawn Bush
MSD Lawrence Township

Dr. Virginia Caine
Marion County
Public Health Department

Joan Carlson
IU School of Social Work

Megan Carlson
Indianapolis Public Schools
(formally with Shalom School-
Based Health Services)

Andrea Cotton
Indianapolis Public Schools

Sydney Dressler
Daniel Webster School 46

Helena Drumm
Communities in Schools Indiana

Dr. Chris Duzenberg
MSD Decatur Township

Dr. Silvia Garcia
IUPUI Office of
Community Engagement

Jim Grim
IUPUI Office of
Community Engagement

Cami Hallgarth
Indianapolis Public Schools

Karen Holly
Marion County
Public Health Department

Sonnie Morrison
William Penn School 49

Tim Nation
Peace Learning Center

April Newton
IU School of Medicine

Allyson Peterkin
Daniel Webster School 46

Dr. Armando Soto
IU School of Dentistry

Dr. James Taylor
MSD Warren Township

John Taylor
MSD Wayne Township

Dr. Wanda Thruston
IU School of Nursing

Appendix C: 2019 School Needs Assessment Online Survey

Note: This survey was built using Survey Monkey. A document version is replicated here.

School Needs Assessment Survey

Your Perspective Matters

Thank you for clicking on the link to start this survey! This survey is a project of the Marion County Commission on Youth's Early Intervention and Prevention Initiative, in collaboration with Marion County's Early Intervention Planning Council.

The mission of the Early Intervention and Prevention Initiative is to eliminate and prevent child abuse, neglect, and delinquency through comprehensive community efforts that coordinate, build capacity, and advocate for high-quality early intervention and prevention services in Central Indiana. The Education Workgroup of the Early Intervention Planning Council is tasked with identifying the needs of schools in Marion County and surrounding counties when it comes to social support issues students may be facing.

Schools play an integral part in the experiences of children. We know that schools face innumerable challenges. While the short-term intent of this survey is to identify actions we can immediately take as a collaborative to support school personnel through trainings and other resources and opportunities, the information you share today could identify long-term systems change that is aimed at improving the experience of students and school personnel throughout the education process.

You have an important job to do and we hope that you will consider taking 10 minutes to share your ideas about the challenges your school faces and the resources you need. If you have questions or concerns about this survey, or if you would like to know more about the Early Intervention and Prevention Initiative, please contact NAME at EMAIL or PHONE.

Thank you for your time and all you do for children in our community.

Demographic Data

The following questions will help us capture demographic data about who is filling out this survey. Individual schools will be de-identified in data analysis and reporting.

1. What is your role?*

- ☐ Principal
- ☐ Assistant Principal
- ☐ School Counselor
- ☐ Social Worker
- ☐ School Psychologist
- ☐ Teacher
- ☐ Other (please specific) _____

2. Please select what best describes your school. (Check all that apply)*

- ☐ Pre-Kindergarten/ Kindergarten
- ☐ Elementary School
- ☐ Middle School
- ☐ High School
- ☐ Other (please specify) _____

3. Does your school have any of the following? (Check all that apply)*

- ☐ School counselors
- ☐ Social workers
- ☐ School psychologist
- ☐ Contracted mental health services
- ☐ School resources officers
- ☐ Other (please specify) _____

4. Please select your school's township or district from the list provided.*

Insert list of school townships and districts within area of interest. Include an option for private schools, independent charter schools, or other appropriate options.

*Denotes a required question.

Identifying Social Support Needs in Schools

The following matrix will give you the opportunity to identify social support issues you observe in your school. We have tried to make this list as comprehensive as possible but have left space for you to identify other issues you would like to seek resources and support for.

5. Please indicate the degree to which the following issues have an effect on your students and their success in school.*

Topic	No effect	Minor effect	Moderate effect	Major effect	Not sure
Access to healthcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying/ harassment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child abuse/ neglect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic absenteeism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conflict resolution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional/ social health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food insecurity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender identity/ sexual orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social media/ internet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance use (family or student)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma/ Violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Are there other issues that have an effect on the students in your school that are not listed above? Please feel free to share more.

Text Box

7. What behaviors do you see as a result of these issues impacting your students? (Check all that apply)*

- ☐ Fighting
- ☐ Substance Use
- ☐ Absenteeism
- ☐ Poor Academic Performance
- ☐ Disruptive Behavior
- ☐ Disrespectful/ Inappropriate Language
- ☐ Aggressive Behavior
- ☐ Other (Please specify) _____

8. Does your school implement any of the following types of policies, practices, or programs? (Check all that apply)*

- ☐ Restorative Practices
- ☐ PBIS (Positive Behavioral Interventions and Support)
- ☐ Mindfulness
- ☐ Social Emotional Learning
- ☐ Culturally Responsive Practices
- ☐ Trauma-Informed Practices
- ☐ None of the Above
- ☐ Other (Please specify) _____

Resources for Schools

The following questions are about resources that you are seeking for your school. These resources could be trainings for staff, curricula, student programs, toolkits, policies, or other forms of support.

9. What kind of resources are you seeking for your school?*

Resources for students:	<i>Text Box</i>
Resources for families:	<i>Text Box</i>
Resources of teachers:	<i>Text Box</i>
Resources for administration:	<i>Text Box</i>
Resources for school overall:	<i>Text Box</i>

10. What barriers do you experience to accessing resources for your school?*

<i>Text Box</i>

School-Community Relationship

We know that the relationship between schools and communities they serve has an impact on the resources, support, and opportunities for schools and students.

11. In what ways has the school-community relationship *helped meet the needs of your students?**

Text Box

12. In what ways can the school-community relationship *improve the needs of your students?**

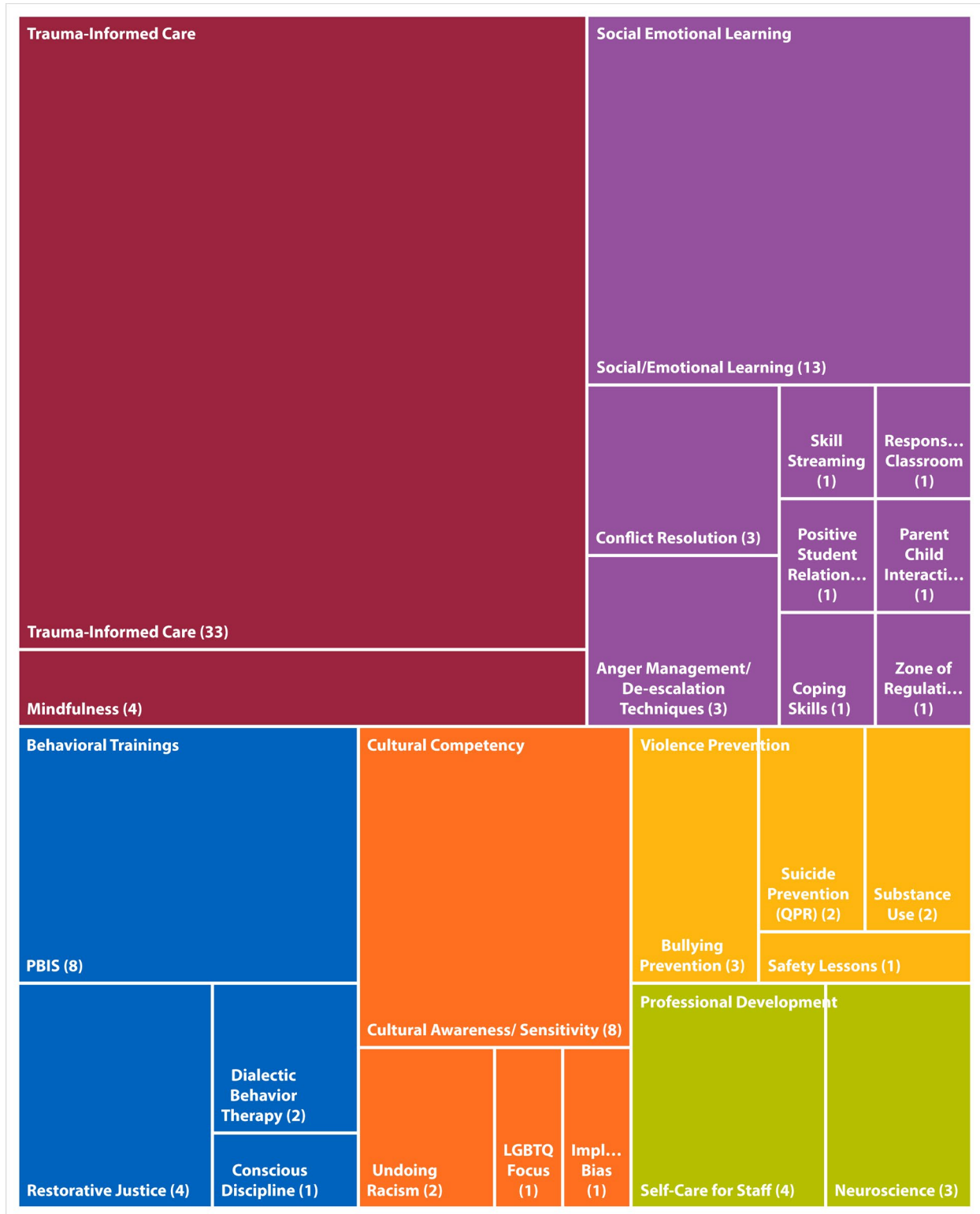
Text Box

Thank you!

Thank you for taking the time to share your thoughts with us. If you would like to learn more about the Early Intervention and Prevention Initiative, Education Workgroup, or the Marion County Commission on Youth, please contact NAME at EMAIL.

We encourage you to share this survey with others in your school. To do so, simply forward the email with the survey link you received, or you can copy and paste the link here: <insert link>

Appendix D: 2019 School Needs Assessment Survey – Requested Trainings



Appendix E: Community Conversations Protocol

Exhibit 1: Community Conversation Invitation Example

Exhibit 2: Community Conversation Agenda

Exhibit 3: Small Group Worksheet

Exhibit 1: Community Conversation Invitation Example

Focused Community Conversation Invitation [Example]

You are invited to participate in a focused community conversation among teachers, support staff and administrators at LOCATION.

DATE:

TIME:

LOCATION:

PURPOSE

The Education Workgroup of the Early Intervention Planning Council launched a school needs assessment process in early 2019 to better identify the trainings, resources, programs, and systems change that could support educators, school administrators, students, and families within Marion County. We surveyed several schools, and most survey respondents were teachers, support staff, or administrators. Survey results suggest differences in perception across these three groups regarding chronic absenteeism, social and emotional health, and trauma affecting student success.

We are planning a focused community conversation for teachers, support staff and administrators to learn more about how community resources and systems improvement can support services at your school. You have been personally invited by [SCHOOL PARTNER] to participate and share your unique perspective.

Your participation in this focus group will help Marion County's Early Intervention Planning Council learn more about ways we can support schools and connect them to resources, trainings, and other programs to address barriers to student success. Your experience is valuable in helping us identify these priorities and opportunities.

Light refreshments and snacks will be provided. Your facilitators are [FACILITATOR NAME AND ORGANIZATION] and [FACILITATOR NAME AND ORGANIZATION].

CONFIDENTIALITY

Please note that your name and any identifying information you share with us will remain confidential. Your response will be summarized along with other responses and used collectively to guide decision-making. No names or identifying information will be used when compiling this information.

CONSENT

There is no obligation to participate in this focus group. You may refuse to participate or withdraw at any time. Please contact [SCHOOL PARTNER AND CONTACT INFORMATION] if you have any questions.

Exhibit 2: Community Conversation Agenda

Community Conversation Agenda

Facilitators: Names and organizations of facilitators

Schools: Names of School Districts

Participants: Teachers, administrators, and support staff

Issues: Mental and Social Health, Chronic Absenteeism, Trauma

Goal: *To support schools connecting to resources, trainings, and programs that address barriers to student success.*

Agenda (1.5 Hours)

Welcome – Host site representative

Snacks + Drinks

Opening Session (10 minutes)

Icebreaker + Introductions

U Lead Cards

Name, U Lead Cards, Identify as teacher, administrator, or support staff

Roles of facilitator and participants

Request for verbal permission to audio record

Overview of goal

Community Agreements

Summary of Survey Results

Participants will receive site specific data + collective data analysis

Middle Session (50 minutes)

Dialogue Activity A – Ownership (15 minutes)

Responses will be captured by facilitator through large post-it pad.

1. *What are your responses and reflection from the data?*
2. *Think back to a time when these issues affected student success. Please describe.*

Dialogue Activity B – Engagement (15 minutes)

Responses will be captured by participants through conversation sheets in small groups. Small group report outs will be requested.

1. *What policies, practices, or programs are working to address these issues?*
2. *What could be done differently to address these issues?*

Participants will report out 1-2 highlights.

Dialogue Activity C – Imagine (15 minutes)

Individual responses will be captured by participants through large post-it pads.

1. *List all the things you want for your students.*
2. *Imagine a successful student 10 years from now. What does this look like?*

Facilitators will report out 1-2 highlights/ themes that emerge.

Dialogue Activity D – Imagine (5 minutes)

Facilitators will provide a pre-stamped postcard for participants to reflect on the purpose through this prompt:

1. *What do I need to let go and what do I need to pursue in order to support the success of my students?*

Postcards will be mailed back to participants in a few weeks, as a reminder of their experience and conversation.

Final Session (10 minutes)

Summary + Common Ground

Next Steps

Participants will receive a copy of the final report and be invited to participate in the Education Action Team.

Exhibit 3: Small Group Worksheet

Small Group Worksheet: What's Working?

Directions: Choose a scribe, spokesperson, and a timekeeper. Choose one topic of interest to the group. Then talk about the issue as it relates to the questions below. Please fill out the worksheet and return to your facilitator.

Check 1 Topic:

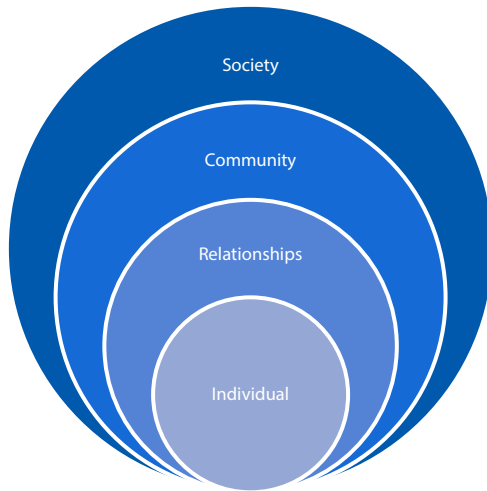
- ☐ Mental and Social Health
- ☐ Chronic Absenteeism
- ☐ Trauma/ Violence

What policies, practices, or programs are working to address this issue?	What could be done differently to address this issue?

Appendix F: The Socioecological Model (SEM)

The Socioecological Model, a public health model, illustrates the complex relationships between risk and protective factors across various levels – individual, relationship, community, and society (see Figure 25) [76].

FIGURE 25: SOCIOECOLOGICAL MODEL



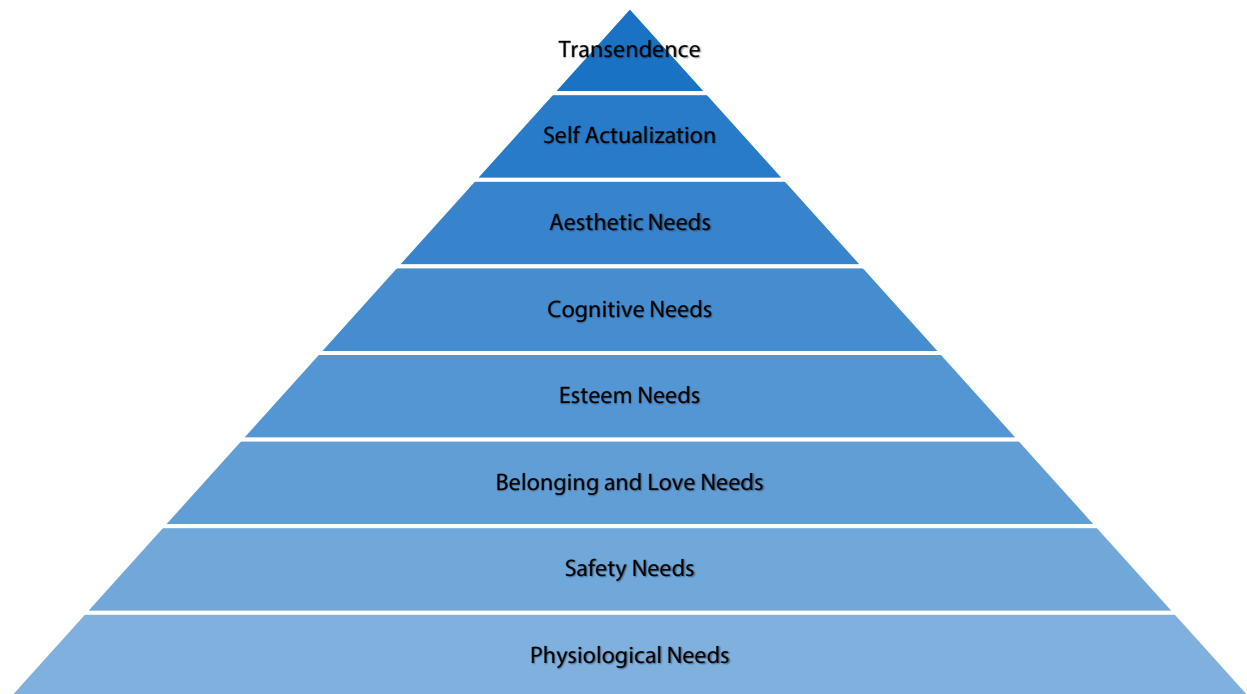
The concentric circles of the model illustrate how factors at one level influence factors at another level. Individual factors commonly include biological traits and personal history. The innermost circle, the individual level, is often the most impacted by external factors. An individual's behaviors and choices are often driven or dictated by relationships, community factors, or systems and policies in our society. Relationship-level factors include a person's closest social circle and the influence of peers, friends, and family members. Community factors include settings such as schools, workplaces, and neighborhoods where social relationships occur. Finally, societal factors broadly include health, economic, and social policies that maintain economic or social inequities between groups in society [76].

Appendix G: Maslow's Hierarchy of Needs

Maslow's Hierarchy of Needs is a motivational theory in psychology, modeled as a pyramid divided into five to eight tiers [77]. The model we used to code responses included eight tiers (Figure 26).

- **Biological/ Physiological Needs:** Air, food, drink, shelter, warmth, sleep, basic needs
- **Safety Needs:** Protection from the elements, security, order, law, stability
- **Belonging/ Love Needs:** Friendship, intimacy, trust, acceptance, affiliation, being part of a group
- **Esteem Needs:** Esteem for oneself and the desire for respect from others
- **Cognitive Needs:** Need for knowledge, understanding, curiosity, exploration, and meaning
- **Aesthetic Needs:** Appreciation and search for beauty and balance
- **Self-Actualization:** Personal potential, self-fulfillment, personal growth, and experiences
- **Transcendence:** Motivation through values which transcend beyond personal self

FIGURE 26: MASLOW'S HIERARCHY OF NEEDS



Appendix H: Key Informant Interview Protocol

School Assessment Key Informant Interview Protocol

Introduction Script:

Thank you for taking time to participate today. This interview is the final step of an informal research project carried out by MCCOY and a group of stakeholders focused on school needs and resources. Your responses to the following questions will help supplement data we have collected through a web-based survey and community conversations. This data and the key findings will be published in a report by MCCOY and shared with various audiences including schools, the Indiana Department of Education, policymakers, and mental health professionals.

This interview will take no more than 60 minutes. You will be de-identified in the report. We will refer to your general profession. For example, “A township school administrator” or “an elementary school principal.” We would like to record this Zoom meeting to help us capture your responses and stay engaged in the conversation without needing to focus on notetaking. Is that okay with you? (Confirm consent for recording.)

Record – Name of interviewee, Date

Post Questions in chat box to provide a written reference.

Question 1

The survey we sent out indicated 5 key concerns of school personnel, regarding what impacts student success – mental health, social emotional health, violence and trauma, chronic absenteeism, and social media and the internet.

How have you seen these challenges directly or indirectly impact students and schools at large?

Question 2

We are trying to identify barriers that keep schools and community resources from partnering more effectively to support families and students.

What barriers do you identify from your perspective? Can you give a specific example?

Question 3

In a perfect world, what would an effective partnership with schools look like? What would facilitate success?

Question 4

What is the single most effective thing we could start doing right now to ensure every child succeeds?

Closing the Gap Between School & Community Partnerships

This assessment and report were made possible with generous support from the City of Indianapolis and the Department of Child Services Region 10 Regional Service Council.

