Health Literacy Council Establishment Act of 2017

Testimony of
Donna Anthony
Assistant Superintendent, Health and Wellness

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Committee on Health and the
Committee on Education
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Chairman Vincent C. Gray, Chairperson
Chairman David Grosso, Chairperson

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John A. Wilson Building
1350 Pennsylvania Avenue, NW
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Good morning Chairman Grosso, Chairman Gray, and members of the Committee on Education and the Committee on Health. My name is Donna Anthony, and I am the Assistant Superintendent of Health and Wellness at the Office of the State Superintendent of Education. Thank you for inviting me to testify on behalf of Mayor Bowser and Superintendent Kang in today’s hearing to discuss the Health Literacy Council Establishment Act of 2017.

IMPORTANCE OF HEALTH LITERACY

OSSE applauds the Council’s focus on health literacy. The District of Columbia has a high rate of insured residents\(^1\) and has invested heavily in increasing access to primary care. However, we still have poor health outcomes. The success of our health system depends on informed consumers that are engaged in their own health. We have built the infrastructure, but without health literate residents, we can only go so far to improve health outcomes. By improving health literacy in the District, we will increase access to high-quality care and change the trajectory for many of our residents.

HEALTH EDUCATION STANDARDS OVERVIEW

OSSE has worked to improve health literacy through health education in our schools. In 2016, OSSE partnered with the State Board of Education to revise and approve new health education standards for the District of Columbia. OSSE actively engaged with District agencies, health advocates, parents, teachers, and other local stakeholders in the process of ensuring that these standards reflected best-practices, evidence-based approaches, and align with the National Health Education Standards (NHES).\(^2\) Various experts—nutritionists, public health professionals, and master educators—have generously given their time and expertise in developing these robust standards. The health standards require that students understand basic health concepts in addition to building skills around self-advocacy, informed decision making, and developing healthy behaviors for their lifetime. The health standards are also a building block for improving health literacy, so that as adolescents and adults, they have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions.

The standards are divided into eight strands: health promotion, analyzing influences, accessing information, communication, decision-making, goal setting, healthy behaviors, and advocacy. These strands were developed by the Centers for Disease Control and Prevention (CDC) and align to what many of our health teachers learn in their training programs. Additionally, much of the health curricula available align to these strands, so we have built our standards to meet the unique needs of the District of Columbia, while also leveraging national resources.

Various categories are covered within each of these strands, including mental and emotional health, safety skills, human body and personal health, disease prevention, nutrition, and

\(^{1}\) http://kff.org/other/state-indicator/total-population/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Uninsured%22,%22sort%22:%22desc%22%7D

alcohol/tobacco/other drugs. Our hope is that in learning about these various topics, students are more empowered around their own health and that of their family and community. Health literacy is an embedded competency throughout. For example, health standard 9-12.3.5.19 states “demonstrate the ability to select professional health services based on the type of care needed, the nature of the problem, and the kinds of questions that need answering.”

HEALTH EDUCATION STANDARDS IMPLEMENTATION

OSSE is taking many steps to implement the new standards in collaboration with schools. We offer ongoing technical assistance and training on the standards. Our approach includes funding opportunities, training, and written resources. This school year we released a technical support and professional development catalogue where schools can request training, coaching, and technical assistance on a variety of topics. We work with school leaders, administrative staff including food service workers, and instructional staff; because we believe that health education shouldn’t just happen in health class. Thanks to the Healthy Schools Act and funding from the Centers for Disease Control and Prevention, we offer several grant programs that are targeted at improving physical education, nutrition, and sexual health. We also released a curricular guide that evaluates various curricula available for purchase. To complement this, we developed a health and physical education book list that aligns to the Common Core, Next Generation Science Standards, and the health education standards. We host an annual health symposium that is attended by nurses, teachers, social workers, school and local education agency administrators, and staff from child development centers.

HEALTH EDUCATION STANDARDS MONITORING

In order to ensure that students are getting access to high-quality health education, we administer an annual health assessment for students in 5th and 8th grade and the year in high school in which students have health class. The assessment is aligned to the health education standards and the results allow us to target the types of resources we should be pushing to specific schools.

We have also begun to monitor connections to health care from our schools. In 2016, we released a Healthy Youth Resource Guide, which helps school staff and students navigate the health care landscape in the District of Columbia. We worked with various organizations in the health care community and had students do secret shopping to help us evaluate the friendliness and accessibility of each entity. OSSE has started to train schools on an associated monitoring tool that allows school staff to track referrals to health care so we know where students are being referred to and what types of care are most in demand.

HEALTH LITERACY COUNCIL ESTABLISHMENT ACT OF 2017

OSSE supports the spirit of this legislation. In order to improve health outcomes, it is critical that residents of Washington, DC have the knowledge and skills necessary to navigate a complex healthcare system. Health education in our schools is an important component of that overall effort.
In order to continue to keep the Council apprised of the agency’s efforts to improve health education in schools, OSSE recommends submitting an update on the implementation of the health education standards in lieu of a strategic plan. We propose including this as a section in our report on the Healthy Schools Act that we submit to Council at the end of this fiscal year. This describes our other efforts to improve health and health education in our schools. As you can see from this testimony, OSSE and our stakeholders are already taking steps to build on the health education standards with the aim of improving health literacy.

CLOSING

I hope today’s testimony demonstrated the expansive work that OSSE has undertaken to improve health and academic outcomes for students in the District of Columbia. Our continued focus in this area is important to ensure our students can access their education without barriers related to health, and are equipped for life to advocate for appropriate health care. In closing, I would like to thank you for your leadership and support on this matter. This concludes my presentation. I am happy to answer any questions you may have.