Urban Community Schools: Educator Perceptions of the Effects of Children’s Health and Wellness on Learning

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Findings from a participatory action research project that brought together 11 individuals from five of Hartford’s seven community schools to engage in a focus group discussion about the effects of children’s health and wellness on learning are presented. The researchers and key personnel from Hartford Public Schools and Achieve Hartford co-constructed the inquiry. Issues identified as interfering with student learning clustered into themes that include students’ and family members’ mental, behavioral, nutritional, and domestic/neighborhood health. The results are being used to create a call for translational research proposals for University researchers to address these questions and disseminate findings to Hartford Public Schools and related community partners.

Keywords: community schools, action research, health and wellness

Conceptual Foundation

This paper presents select findings from a participatory action-research project that brought together 11 individuals from five of Hartford’s seven community schools to engage in a focus group discussion about the effects of children’s health and wellness on learning. The five schools are located in Hartford’s most impoverished neighborhoods (Colantonio & Martin, 2013). More specifically, the study aimed to: (a) identify student health issues that discussion participants perceived affect student learning at their schools, (b) identify local strategies that they felt were especially promising in addressing the health issues their students face, and (c) generate related questions that participants would like answered.

Three concepts formed the foundation for this study of the health challenges that confront school and community partner personnel in Hartford’s community schools. First, a child’s health matters to learning and the longer-term outcomes of college and career readiness (Basch, 2010; Cook & Jeng, 2009). Second, collaborative, community-based approaches work best for overcoming barriers to learning (Dryfoos, 1994, 2005). Third, research is relevant when it is contextualized in its purpose, the place and time it is conducted, and the people involved (Labaree, 2008).

Child health and educational attainment are linked. Factors known to affect children’s health, and consequently, their learning include diet, being underweight or overweight, diabetes, physical activity, chronic diseases, and parent lifestyle and education (Eide, Showalter, & Goldhaber, 2010; Janus & Duky, 2007). Children living in families with limited household resources frequently face limited or uncertain availability of nutritionally adequate and safe foods (Cook & Jeng, 2009). These children are apt to come to school without breakfast, hungry and unprepared to learn (Basch, 2010). Similarly, urban, minority youth whose families have limited financial and health resources often experience health disparities including, among others, under-diagnosis, treatment, and ongoing care of asthma and vision problems (Basch, 2010).

Hartford’s children face similar health disparities. Asthma rates among pre-K and kindergarten children were 17.2% during the 2004-2006 school years (Nguyen, 2010). Obesity rates among the city’s children ages 6-11 from 1999-2008 were 24%, which was substantially higher than the national average of 17%