

# Health Barriers to Learning & Development

## Resource Toolkit

This toolkit was designed to build awareness and provide schools with solutions in the form of resources, tools, and suggested partners to support students who may be experiencing HBLDs.

Fall 2021 | [Office of Whole Child Supports](#)



# Introduction

## What Are Health Barriers to Learning and Development (HBLDs)?

Health barriers to learning and development (HBLDs) include prevalent and persistent conditions that, when left unrecognized or unaddressed, can interfere with a child's ability to learn<sup>1</sup> and inhibit their development.

## About the Toolkit

This toolkit was designed to build awareness and provide schools with solutions in the form of resources, tools, and suggested partners to support students who may be experiencing HBLDs. As of 2019, nearly 32% of Georgians were living below 200% of the poverty line; 197,000 children under the age of 19 were uninsured; and more than one-third of all counties in the state lacked a pediatrician.<sup>2,3</sup> The intention of this toolkit is to provide pathways for schools to bridge these gaps by addressing health-related factors that impact education outcomes.

## Intended Audience

School administrators, student support staff (school nurses, social workers, counselors, and other individuals who fill these roles), and community partner organizations.



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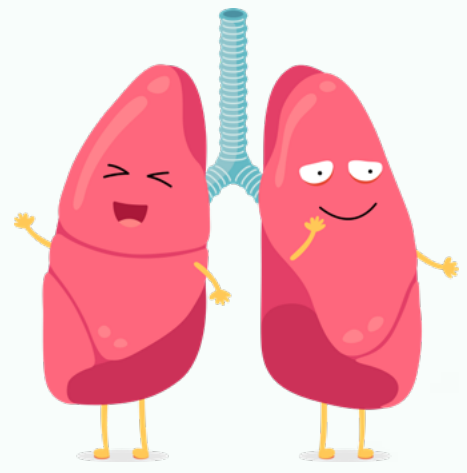



# Video






Check out this quick, 1-minute video that presents the concept of health barriers to learning and development.

TABLE ONE

# The Evidence: Why HBLDs Matter

HBLD	Why It Matters
<p><b>ASTHMA</b></p> 	<ul style="list-style-type: none"> <li>✓ Nearly 8% of children in Georgia are estimated to have asthma. That is over 130,000 K-12 students.<sup>4,5</sup></li> <li>✓ Consequences of poorly controlled asthma are emergency department visits, hospitalizations, and missed school.<sup>6</sup></li> <li>✓ Nationally, children with asthma miss 13.8 million days of school each year.<sup>7</sup></li> </ul>
<p><b>ORAL HEALTH</b></p> 	<ul style="list-style-type: none"> <li>✓ Most recent data shows that 52% of Georgia's 3rd grade students have a history of tooth decay - nearly 20% of which goes untreated.<sup>8,9</sup></li> <li>✓ Students who experience dental pain are more likely to report feeling unhappy, worthless, withdrawn, and/or overly sensitive.<sup>10</sup></li> <li>✓ Dental pain can lead to trouble sleeping and eating, increased school absences, difficulty paying attention, and lower academic outcomes.<sup>11,12</sup></li> </ul>
<p><b>VISION PROBLEMS</b></p> 	<ul style="list-style-type: none"> <li>✓ About 80% of learning occurs through visual tasks such as reading and writing.<sup>13</sup></li> <li>✓ Common vision impairments affect up to 25% of students and can lead to physical, developmental, behavioral, and academic problems if they go uncorrected.<sup>14,15</sup></li> <li>✓ Limited access to screening, follow-up, eyeglasses and other needed resources often leads to gaps in academic success.<sup>16</sup></li> </ul>
<p><b>HEARING PROBLEMS</b></p> 	<ul style="list-style-type: none"> <li>✓ Temporary hearing loss in children is often caused by ear infections or colds, swimmer's ear, earwax buildup, or an obstruction of some kind.<sup>17</sup></li> <li>✓ Even minimal hearing loss places children at over 4 times the risk of problems with language and communication.<sup>18</sup></li> <li>✓ Hearing problems significantly increase the risk of behavioral problems, ability to read, and the likelihood of repeating a grade.<sup>19,20,21</sup></li> </ul>

# The Evidence: Why HBLDs Matter



HBLD	Why It Matters
<p><b>FOOD INSECURITY</b></p> 	<ul style="list-style-type: none"> <li>✓ Before COVID-19, the food insecurity rate among children under 18 in Georgia was estimated at 15% (377,400 children).<sup>22</sup></li> <li>✓ Children experiencing food insecurity are more likely to experience depression and anxiety, as well as other behaviors like aggression, irritability, and distractibility.<sup>23</sup></li> <li>✓ Food insecurity can affect school performance, including the need to repeat a grade, be suspended, and have lower academic outcomes.<sup>24</sup></li> </ul>
<p><b>DEVELOPMENTAL LANGUAGE AND COGNITION</b></p> 	<ul style="list-style-type: none"> <li>✓ Students in elementary school with language difficulties are significantly less likely to achieve the expected reading level.</li> <li>✓ Effective use of expressive and receptive language skills is directly linked to increased student engagement and decreased discipline issues.<sup>25,26</sup></li> <li>✓ Language difficulties are frequently misinterpreted as behavioral and mental health challenges including disengagement and discipline issues.<sup>27,28</sup></li> </ul>
<p><b>LEAD EXPOSURE</b></p> 	<ul style="list-style-type: none"> <li>✓ Lead exposure in children, especially those under the age of 6, can affect a child's ability to learn, grow, and thrive academically, socially, and cognitively.</li> <li>✓ Children living in homes built prior to 1978, when lead-based paint was banned for housing, are more at risk for lead exposure than their peers.</li> <li>✓ It is important that children be tested for lead exposure when suspected that it has occurred because symptoms may not be immediate or obvious.<sup>29</sup></li> </ul>

# Resources for Schools to Address HBLDs

HBLD	Screening and Observational Tools	Example Follow-Up Actions	Partner Organizations and Resources
<b>ASTHMA</b> 	<p>Screening method: <a href="#">12-item questionnaire</a></p> <p>Completed by: Parents</p> <p>Time to complete: 5 min.</p> <p>Cost: Free</p>	<ul style="list-style-type: none"> <li>✓ <a href="#">Ensure students with asthma have asthma action plans on file</a></li> <li>✓ <a href="#">Asthma-Friendly Schools Toolkit</a></li> <li>✓ <a href="#">Indoor Air Quality Tools for Schools Action Kit</a></li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">Children’s Healthcare of Atlanta (CHOA)</a></li> <li>✓ <a href="#">Georgia Asthma Coalition</a></li> <li>✓ <a href="#">Georgia Department of Public Health (GaDPH) – School Nursing Program</a></li> </ul>
<b>ORAL HEALTH</b> 	<p>Screening method: <a href="#">American Academy of Pediatrics Oral Health Risk Assessment</a></p> <p>Completed by: Parent, nurse, dental hygienist, oral health professional</p> <p>Time to complete: 5 min.</p> <p>Cost: Free</p>	<ul style="list-style-type: none"> <li>✓ <a href="#">GaDPH Oral Health Services for Schools</a> <ul style="list-style-type: none"> <li>→ Brushing</li> <li>→ Fluoride</li> <li>→ Dental sealants</li> </ul> </li> <li>✓ <a href="#">Contact GaDPH</a></li> <li>✓ <a href="#">Mobile dental care units (e.g. Help a Child Smile)</a></li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">Federally qualified health centers (FQHCs)</a></li> <li>✓ <a href="#">GaDPH Oral Health Services for Schools</a></li> <li>✓ <a href="#">Georgia Dental Hygiene Educational Programs</a></li> <li>✓ <a href="#">Local dentists/hygienists</a></li> <li>✓ <a href="#">Physicians offering fluoride varnish in their practices</a></li> <li>✓ <a href="#">Volunteer health providers</a></li> </ul>
<b>VISION PROBLEMS</b> 	<p>Screening tool: <a href="#">SPOT Vision Screener</a></p> <p>Screening method: <a href="#">Screening Guidelines by Age</a></p> <p>Completed by: Nurse or trained volunteer</p> <p>Time to complete: 1-5 min.</p> <p>Cost: Variable*</p>	<ul style="list-style-type: none"> <li>✓ <a href="#">Create a screening protocol</a></li> <li>✓ <a href="#">Have staff trained to perform screening</a></li> <li>✓ <a href="#">Establish a partnership with a local organization to offset the cost of glasses</a></li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">Communities in Schools</a></li> <li>✓ <a href="#">Georgia Lion’s Lighthouse Foundation</a></li> <li>✓ <a href="#">GaDPH Districts</a></li> <li>✓ <a href="#">Lions Clubs</a></li> <li>✓ <a href="#">Prevent Blindness Georgia</a></li> <li>✓ <a href="#">VSP Eyes of Hope</a></li> <li>✓ <a href="#">Vision 2 Learn Georgia</a></li> </ul>


\* SPOT vision screeners are about \$8,000. Consider connecting with partners (e.g. Lions Club) or purchasing one device to share among a cluster of schools, district, or Regional Education Service Agencies (RESA).

# Resources for Schools to Address HBLDs


HBLD	Screening and Observational Tools	Example Follow-Up Actions	Partner Organizations and Resources
<p><b>HEARING PROBLEMS</b></p> 	<p>Screening method/tool: <b>Pure-tone audiometer</b> (preferably with both electrical and battery options)</p> <p><b>Completed by:</b> Nurse or trained volunteer</p> <p><b>Time to complete:</b> 2 min.</p> <p><b>Cost:</b> Variable<sup>30</sup></p>	<ul style="list-style-type: none"> <li>✓ <a href="#">Create a screening protocol</a></li> <li>✓ Have staff trained to perform screening, data collection, and record-keeping</li> <li>✓ Establish a provider list of audiologists nearby (if applicable)</li> <li>✓ Establish a partnership where eligible students can receive hearing aids free of charge</li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">GaDPH Districts</a></li> <li>✓ <a href="#">Georgia Mobile Audiology Program</a></li> <li>✓ <a href="#">Georgia Lion's Lighthouse Foundation</a></li> <li>✓ <a href="#">Lions Clubs</a></li> </ul>
<p><b>FOOD INSECURITY</b></p> 	<p>Screening method: <b>Hunger VitalSign</b></p> <p><b>Completed by:</b> Parents, middle and high school students</p> <p><b>Time to complete:</b> 1 min.</p> <p><b>Cost:</b> Free</p> <p><b>Additional screening method:</b> Contact parents of students enrolled in free/reduced meals to connect them with resources such as SNAP and/or WIC</p>	<ul style="list-style-type: none"> <li>✓ Link eligible families to enrollment in free/reduced meals</li> <li>✓ Work with School Nutrition to increase participation in school meal programs through alternative delivery models, taste tests, outreach, promotion, etc.</li> <li>✓ <a href="#">Create an after-school or supper program (CACFP)</a></li> <li>✓ Establish a relationship with <a href="#">your local food bank</a> or community pantry to offer or expand a weekend backpack program or school pantry</li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">Action Ministries</a></li> <li>✓ <a href="#">Foodfinder</a></li> <li>✓ <a href="#">GaDOE School Nutrition Program</a></li> <li>✓ <a href="#">Georgia Food Bank Association</a></li> <li>✓ <a href="#">mRelief SNAP texting service</a></li> <li>✓ <a href="#">Share Our Strength – No Kid Hungry</a></li> <li>✓ <a href="#">SNAP Benefits in Georgia</a></li> </ul>



# Resources for Schools to Address HBLDs

HBLD	Screening and Observational Tools	Example Follow-Up Actions	Partner Organizations and Resources
<p><b>DEVELOPMENTAL LANGUAGE AND COGNITION</b></p> 	<p>Observational tools:</p> <ul style="list-style-type: none"> <li>✓ <a href="#">Language and Communication Development by Age Band (birth-18)</a></li> <li>✓ <a href="#">American Academy of Pediatrics Speech and Language Milestones (birth-5)</a></li> </ul> <p>Completed by: Teacher, Parents/Caregivers</p> <p>Time to complete: Varies</p> <p>Cost: Free</p>	<ul style="list-style-type: none"> <li>✓ Use observational tools on an ongoing basis to enhance Tier 1 instructional practices.</li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">Deal Center for Early Language and Literacy</a></li> <li>✓ <a href="#">GaDOE L4GA</a></li> <li>✓ <a href="#">GaDOE English &amp; Language Arts (ELA) Standards</a></li> <li>✓ <a href="#">Universal Design for Learning</a></li> <li>✓ <a href="#">Get Georgia Reading Campaign</a></li> <li>✓ <a href="#">Cox Campus</a></li> <li>✓ <a href="#">Words2Reading</a></li> </ul>

# Resources for Schools to Address HBLDs

HBLD	Screening and Observational Tools	Example Follow-Up Actions	Partner Organizations and Resources
<p><b>LEAD EXPOSURE</b></p> 	<p><b>Child blood lead screenings</b></p> <p>It is <b>not</b> recommended that this be conducted at school.</p> <p>If a child is suspected to have been exposed, they should be referred to a local provider for testing.</p> <p>Screening method:</p> <ul style="list-style-type: none"> <li>→ Finger-prick or blood draw</li> <li>→ <a href="#">Lead screening guidelines for children</a></li> </ul> <p>School lead hazards screenings</p> <p>Screening method:</p> <ul style="list-style-type: none"> <li>→ <a href="#">Regularly inspect for lead hazards, including interior and exterior paint</a></li> <li>→ Test all drinking water outlets for lead</li> </ul>	<ul style="list-style-type: none"> <li>✓ Follow-up actions would be determined by a healthcare provider.</li> <li>→ <a href="#">Recommended Actions Based on Blood Lead Levels</a></li> <li>→ <a href="#">5 Things you can do to help lower your child’s lead level</a></li> </ul>	<ul style="list-style-type: none"> <li>✓ <a href="#">GaDPH Healthy Homes and Lead Poisoning Prevention</a></li> <li>✓ <a href="#">Environment Georgia: Get the Lead Out Toolkit</a></li> <li>✓ <a href="#">Clean Water for Georgia Kids: Testing water in schools for lead</a></li> </ul>

# Applying Health-Related Data

Should you choose to conduct health screenings on any of the above-mentioned HBLDs, look for trends and areas of need. Through the evidence provided, we know that HBLDs can often manifest as signs and symptoms of disrupted mental health and/or out-of-character behavior. Perhaps some students with low attendance or frequent discipline referrals are struggling with dental pain, don't have enough food at home, or are having a hard time seeing.

## How to Apply Data

- ◆ **Review student attendance data.** For students who are frequently absent, has a root cause been identified?
- ◆ **Review student discipline data.** For students who are experiencing behavior challenges, are they struggling with an HBLD?
- ◆ **Consider collecting information on students' insurance.** It is first and foremost important to engage with parents and families regarding their children's insurance. What percentage of your students are on Medicaid? Are there a limited number of providers in the community, and if so, do you know what types of insurance they accept? This may affect access to healthcare for students.

## Data Sources

### Georgia Department of Education Data Sources

- ◆ [Georgia Student Health Survey](#)
- ◆ [Georgia Insights](#)
- ◆ [SLDS](#) (Levels of access may vary – check with administrator)

## Where to find community-level data related to student health outcomes:

- ◆ [Annie E. Casey Foundation Kids Count Data Center](#)
  - » Children's health insurance status
  - » Households with children receiving Food Stamps
- ◆ [County Health Rankings & Roadmaps](#)
  - » Dentists
  - » Primary care physicians
  - » Mental health providers
- ◆ [Georgia Department of Public Health](#)
  - » Asthma surveillance for children
- ◆ [Get Georgia Reading Campaign](#)
  - » Asthma-related ER visits
  - » Premature and low birthweight births
  - » Georgia School Fitness Assessment

# Application Across Disciplines

The HBLD toolkit has opportunities for use across several disciplines, both within and outside the school. Ultimately, the intent is for schools to take a proactive approach to addressing the health barriers to learning and development that students may face. Responding to these needs does not typically fall within the purview of the school itself, which is why partnerships with community stakeholders such as non-profit organizations and healthcare systems are critical. These partners must be actively engaged in the process, but the school will need to collectively lead the effort for it to be successful.

## Within the school

Within the school, the HBLD process can be worked into pre-existing programs, policies, and initiatives. Having community partners, including healthcare professionals, at the table would broaden the scope of conversation, deepen awareness, and provide an understanding of available resources and support. The following are examples of relevant policies, programs, and initiatives:

- ◆ Local wellness policies and school health/wellness committees
- ◆ Family engagement initiatives
- ◆ Student support teams
- ◆ School improvement teams
- ◆ Positive Behavioral Interventions and Supports (PBIS) teams
- ◆ Attendance and school climate committees

## Community partners

Community partners can help to bridge gaps between available and accessible resources for families. It is important to note that availability of a resource does not automatically equate to access. Some organizations may have missions rooted in children's health and established programs that could support students and families. Schools can leverage these partners to connect families to services that support children's healthcare needs, such as providing health education, support with enrollment in insurance and the Supplemental Nutrition Assistance Program (SNAP), dental and vision care, among others.

# Application Across Disciplines

## Healthcare providers

Healthcare providers are essential stakeholders for the school community. They bring a different perspective to problem-solving and offer a health-focused lens on developing and enhancing programs and policies. When it comes to addressing the HBLDs, having relationships with local providers and/or local health departments can help to complete the referral loop for students needing assistance beyond screening. Providers can contribute to school wellness teams and local wellness policies, as well as work with student support teams, school nurses, and health educators. Creating relationships with local providers additionally gives them visibility to parents, which may help support children getting routine well-child visits, screening, and immunizations.



# Organizational Resources

- » [Communities in Schools of Georgia](#)
- » [Georgia Asthma Coalition](#)
- » [Georgia Department of Education: Office of Whole Child Supports](#)
- » [Georgia Department of Education: School Nutrition Program](#)
- » [Georgia Department of Public Health](#)
- » [Georgia Family Connection Partnership](#)
- » [Georgia Lions Lighthouse Foundation](#)
- » [Georgia Mobile Audiology Program](#)
- » [Georgia School-Based Health Alliance](#)
- » [Lifeline Link-Up Assistance Georgia Programs](#)
- » [Prevent Blindness Georgia](#)
- » [Share Our Strength's No Kid Hungry Campaign](#)



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# Endnotes

- 1 (Gracy, Fabian, Roncaglione, Savage, & Redlener, 2017)
- 2 (Kaiser Family Foundation, 2021)
- 3 (Voices for Georgia’s Children, Georgia Statewide Afterschool Network, 2021)
- 4 (Georgia Department of Public Health, 2020)
- 5 (Georgia Department of Education, 2021)
- 6 (Gerald, et al., 2002)
- 7 (Gracy, Fabian, Roncaglione, Savage, & Redlener, 2017)
- 8 (Georgia Department of Public Health, 2011)
- 9 (Kabore, et al., 2014)
- 10 (Gracy, Fabian, Roncaglione, Savage, & Redlener, 2017)
- 11 (Gracy, Fabian, Roncaglione, Savage, & Redlener, 2017)
- 12 (DentaQuest Partnership for Oral Health Advancement; Association of State and Territorial Dental Directors, 2020)
- 13 (Gracy, Fabian, Roncaglione, Savage, & Redlener, 2017)
- 14 (Centers for Disease Control and Prevention, 2021)
- 15 (The National Academies of Sciences, Engineering, and Medicine, 2016)
- 16 (Wodon, Male, Nayihouba, & Smith, 2019)
- 17 (Clason, 2021)
- 18 (Gracy, Fabian, Roncaglione, Savage, & Redlener, 2017)
- 19 (Martin, Sobel, Griest, Howarth, & Yongbing, 2006)
- 20 (American Speech-Language-Hearing Association, 2015)
- 21 (Carroll & Breadmore, 2018)
- 22 (Feeding America, 2021)
- 23 (Shankar, Chung, & Frank, 2017)
- 24 (Alaimo, Olson, & Frongillo Jr, 2001)
- 25 (Chow & Wehby, 2017)
- 26 (Weldon, et al., 2021)
- 27 (Curtis, Frey, Watson, Hampton, & Roberts, 2018)
- 28 (Gooch, Maydew, Sears, & Frazier Norbury, 2017)
- 29 (Centers for Disease Control and Prevention, 2020)
- 30 Consider connecting with partners (e.g., Lions Club) or purchasing one device to share among a cluster of schools, district, or RESA.



This toolkit was prepared by the Office of Whole Child Supports at the Georgia Department of Education.

*It was most recently updated in December 2021.*

For more information, please contact [wholechild@doe.k12.ga.us](mailto:wholechild@doe.k12.ga.us), or visit our [website](#).