Role of Education

Social Determinants of Health Symposium
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Cheryl Holcomb-McCoy, Ph.D. (SOE)
Nan Astone, Ph.D. (SPH)
Sarah Lindstrom-Johnson, Ph.D. (SOM)
One of the most robust associations we know of

- Across settings
  - Developing countries and Developed Countries
  - Rural and Urban Areas
  - Men and Women

- Across age groups
  - Maternal education and infant, child and adolescent health
  - Own education and adult health
EXHIBIT 1
Life Expectancy Among Americans At Age Twenty-Five, By Education Level, Selected Years 1981–2000

<table>
<thead>
<tr>
<th>Years of life remaining</th>
<th>High school or less</th>
<th>Any college</th>
</tr>
</thead>
<tbody>
<tr>
<td>57</td>
<td></td>
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</tbody>
</table>

- **1981–88 National Longitudinal Mortality Study**
  - High school or less: 51.6
  - Any college: 54.4

- **1991–98**
  - High school or less: 52.1
  - Any college: 55.8

- **1990 Multiple Cause of Death files/census data**
  - High school or less: 49.6
  - Any college: 55.0

- **2000**
  - High school or less: 49.6
  - Any college: 56.6

**Source:** Authors’ calculations using data on non-Hispanic blacks and whites in the National Longitudinal Mortality Study (NLMS) and death certificate data from the Multiple Cause of Death (MCD) files linked to census data.
What are the barriers to at risk youth completing and doing well in school?

• My own research
  – Very high risk young people from Baltimore
  – Key fact is that many of these young people have multiple risks
Eccles and Gootman 2002

• Children need assets
  – Physical health, cognitive development, social connections and so on
  – They do not need a full complement, they need a certain minimal number
Eccles and Gootman 2002

• Children of particular concern
  – Those who live in high risk neighborhoods
  – Those who are poor
  – Those who experience discrimination based on ethnicity, gender, sexual orientation
  – Those who spend a lot of unsupervised time
  – Those with special health care needs
  – Those with troubled families
Eccles and Gootman 2002

• Need a specific focus on these (often overlapping groups)

• Means focused research
  – When interventions are evaluated on the basis of average effects
  – Differential effects: many interventions might have larger effects on very high risk groups
Issues regarding school for these young people

• Two important issues
  – Very difficult to focus on, feel connected to, and do well in school
  – Stability at school can become a developmental asset
Difficult to Focus on School

• Many young people in Baltimore express a pervasive sense of danger

• Many young people in Baltimore experience housing instability
  – Housing instability with their families
  – Having multiple homes and no secure connection to a single home
What can make school force for stability?

• Old research by me and by others
  – Familial disruptions are associated with school disruptions
  – School disruptions exacerbate negative effects of familial disruptions
Good news?

- The McKinney-Veto Act
  - passed in 1987
    - gives homeless students the right to remain in their original school OR
    - transfer to the school closest to their temporary living situation
    - students must be enrolled immediately and must be provided free transportation
Testimony from Unstably Housed Young People

• Assembled by Public Justice Baltimore
• http://www.publicjustice.org/resources/films
• Uprooted Young People attest to the importance of the social ties they have at schools
Baltimore City Mortality Rates by Educational Attainment

2010 Baltimore City Health Disparities Report Card
Education and Health Calculator

Robert Wood Johnson Foundation
http://www.commissiononhealth.org/Calculator.aspx
Why is Education Such a Powerful Determinant of Health?

Robert Wood Johnson Foundation
Education and Health Brief, April 2011
Maryland High School Students’ Risk Behavior by Report Card Grade

MDS3 Project 2011 Student Survey (22,423 High School Youth)
“Problem Free is Not Fully Prepared”

Karen Pittman, Forum for Youth Investment

- Successful development is not just the absence of risk
- **Positive Youth Development** models focus on the positive and adaptive features of youth
  - Commitment to learning (e.g., bonding to school)
  - Positive values (e.g., responsibility)
  - Social competencies (e.g., planning and decision making)
  - Positive identity (e.g., future orientation)
Evidence Supporting Future Orientation

• Greater future thought linked to improved health and educational outcomes
  (Borowsky et al., 2009; Seginar, 2010; Gushue et al., 2006)
  – Reduced sexual risk-taking
  – Reduced drug-use
  – Reduced involvement in violence
  – Improved academic achievement

• Identified as an important predictor of adolescent’s ability to overcome adverse environments
  (Ostazewski & Zimmerman, 2006)
Healthy Futures Intervention

• Randomized controlled trial of Harriet Lane Clinic patients (aged 14-21)

• All participants
  – Assigned a “career coach”
  – Receive monthly college/job tips email newsletters
  – Encouraged to attend clinic-sponsored college and job fairs

• Intervention participants
  – Receive 3 in-person motivational interviewing sessions
  – At least 1 phone/email follow-up contact between sessions
### Preliminary 6 Month Results: Future Orientation Outcomes

<table>
<thead>
<tr>
<th>Future Orientation Outcomes (n=141) Linear Regression</th>
<th>Intent to Treat (Baseline vs Comparison) Beta</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Vocational Situation</td>
<td>1.20(^t)</td>
</tr>
<tr>
<td>Informational Needs</td>
<td>0.33(^t)</td>
</tr>
</tbody>
</table>

Adjusted for age, gender, and prior behavior
\(^t\) \(p<.10\); \(*\) \(p<.05\); ** \(p<.01\)
Conclusions

1) By targeting a developmental asset we are seeing improvements in a health outcome with promises for educational improvements.

2) Health and educational interventions seek to reach the exact same youth for very similar reasons.

3) Improving the educational achievement of youth has the potential to reduce health disparities in adulthood.
The Problem....

• Six out of every ten jobs in our economy depend on workers with at least a two-year college degree.

• A shortage of 14 million college-educated workers is predicted by 2020.

• Despite extensive financial aid expenditures, the gap between low-income and high-income students attending college today is roughly the same as that participation gap in the 1960s.
Benefits of College

A college degree increases your access to health insurance and pension plans

• A College Board study (Baum, Ma & Payea, 2010) showed that workers with college degrees are much more likely than those without to be offered employer-paid health insurance and pension plans.
Benefits of College

A college degree is good for overall health and learning readiness

• The College Board (2010) reported that a college degree is related to good health in parents and learning readiness in children. Adults with a college degree are much more likely than those without to perceive themselves as healthy, to stay fit with exercise, and to choose not to smoke.
My Research

• Counselors are integral to the college going process and are a source of social capital for students and parents.
  – School-based counselors as social capital (social capital theory):
    • ELS- 2002 longitudinal study (N = 4,835 high school students)
    • The effects of students’ contact with counselors for college information
    • The effects of students’ contact with counselors on college college application rates
My Research

• School-based counselors as social capital (social capital theory):
  – Gender, academic achievement, parental involvement, and school size were significant predictors of applying to college
My Research

• Students’ beliefs about their counselors’ postsecondary expectations for them.
  – HS students were less likely to contact a counselor about college when they believed counselors did not expect them to attend college
  – Muhammed (2008) found that African American students understanding of their counselors’ postsecondary educational expectations positively influenced students’ college predispositions.
My Research

• Exploratory study funded by College Board (2010):
  – Counselors’ (in high minority, high poverty schools) beliefs about parental involvement in the college application process.
    • High interest and favorable beliefs about assisting parents with college application process BUT little time to do so
    • Very few college-related activities for parents are implemented beyond sending letters, flyers home.
My Research

• Funded by College Board (2010) to examine students’ perceptions of their counselors in high minority, high poverty schools
  – 2,282 high school students (9-12th grade)
  – A majority of students “like” their counselors (personal qualities)
  – A majority of students do not feel as if their counselors can help them gain admission to a two or four year college