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ABSTRACT

This exemplary program in health and nutrition is designed to: eliminate the barriers to learning imposed by poverty and cultural isolation; increase the student's ability to learn; improve pupil health and attitudes; and, make the schools responsive to the social, economic, and cultural needs of the community. The program features an extensive, continuous medical and dental program, with part or all of the total cost borne by the schools; daily school meal program--breakfast, lunch, and dinner (one, two, or three meals provided free of charge if necessary); extended school program (longer days, summer program, preschool); and, bilingual Follow Through programs at primary school level (kindergarten to grade three). The San Diego program has resulted in: improved nutrition and health among school children (indicated by research results in National Nutrition Survey and subsequent testimony before U.S. Senate Select Committee on Nutrition and Human Needs); decreased absenteeism; increased pupil attentiveness; enthusiasm and classroom participation; increased number of high school graduates; higher college attendance, greater post-graduation job stability; and greater parent participation. (Author/JM)

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A NEW LEASE ON EDUCATION THROUGH
HEALTH AND NUTRITION PROGRAMS
(San Diego, Texas)

U.S. DEPARTMENT OF HEALTH,
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Preface

In efforts at improving the quality of education and at justifying expenditures for compensatory education and school desegregation, we are increasingly dependent upon the data of evaluative research. Yet the data from many of these evaluation efforts conducted over the past twelve years are confused and inconclusive. The findings from these studies are sometimes contradictory. The interpretations have become the subject of considerable controversy, particularly as these findings and interpretations appear to contradict some of our cherished assumptions concerning education and educability. The lack of clarity with respect to the meaning of these data and the value of such programs is in part attributable to a variety of problems in the design and conduct of evaluative research. Among these problems, increasing attention is being called to the fact that there are sparse data concerning the specific nature of program interventions. These tend to be reported under labels or brief descriptions which provide little information relative to the nature and quality of the treatments to which the pupils studied are exposed. In an effort at gaining a better understanding of the content and nature of some of these programs, this project was directed at describing selected programs thought to be exemplary of quality, progress, trends or problems in compensatory education and school desegregation. Ten compensatory education programs and two school desegregation programs were selected for detailed description.

The principal procedures utilized in this study included documentary

analysis, direct observation of programs and interviews with selected informants. The tasks to be accomplished included identification and selection of projects to be studied, collection of all available data on each project considered, field study of promising candidate projects, preparation of descriptive reports, final selection and reporting.

Following is the description of one of these selected programs.

For the complete report of this project see document number ED 099 458 in the ERIC system.

An Exemplary Program in Health and Nutrition

Designed to

**eliminate the barriers to learning imposed by poverty and
cultural isolation
increase the student's ability to learn
improve pupil health and attitudes
make the schools responsive to the social, economic, and
cultural needs of the community**

Through

**an extensive, continuous medical and dental program, with part
or all of the total cost borne by the schools
daily school meal program -- breakfast, lunch, and dinner
(one, two or three meals provided free of charge if necessary)
extended school program (longer days, summer program,
pre-school)
bilingual Follow Through Program at primary school level (K-3)**

The San Diego program has resulted in

**improved nutrition and health among school children (research
results in National Nutrition Survey and subsequent
testimony before U.S. Senate Select Committee on Nutrition
and Human Needs)
decreased absenteeism (increased ADA)
increased pupil attentiveness, enthusiasm, and classroom participation**

increased number of high school graduates

higher college attendance

greater post-graduation job stability

greater parent participation, and correspondingly less isolation
of parents from educational process

the schools as substantial contributors to community improvement

As traditional attitudes of schooling fade, the realization grows that schools must be more than repositories of academic knowledge; they must be centers for the amelioration of society's ills as well. Recent research has indicated that malnutrition can affect the development of a child -- from embryo to maturity -- and drastically alter his ability to learn. Since poor families frequently lack the money to provide a balanced diet, their children face this impediment. The poor in this country are often members of minority groups, whose culture may militate against a balanced diet or, through language problems, impede their ability to understand the influence of diet and health on learning. In San Diego, Texas, a remarkable school program designed to end the debilitating reign of financial deprivation and cultural isolation is in progress.

SUMMARY

Poverty is rife in San Diego, Texas where almost 75 percent of the students qualify for Title I funds. Many school systems provide educational opportunities for disadvantaged children through new curriculum or non-traditional approaches to the teaching-learning process. San Diego Superintendent of Schools Bryant P. Taylor and the San Diego Independent School District have chosen to optimize the disadvantaged child's educational opportunity through elimination of the non-scholastic detriments to learning: poor health, malnutrition, language problems, cultural isolation. The District's successful attack on these areas first received national recognition when Superintendent Taylor testified in 1969 before the U.S. Senate Select

Committee on Nutrition and Human Needs.

The components of the San Diego program are an intensive medical and dental program; school provision of breakfast, lunch and dinner for all pupils in need of it; extended school hours and programs, and bilingual programs to increase student and parent confidence, participation, and learning. All of these activities improve the quality of life for San Diego students and their parents. The program is exemplary because it has improved pupil health; engendered extraordinary pupil pride and enthusiasm, increased parent participation; most important, it has illustrated that the effects of economic deprivation and cultural isolation need not inexorably doom succeeding generations.

WHERE

Located 50 miles west of Corpus Christi and the Gulf of Mexico, San Diego is the county seat of Duval County in southeastern Texas. Its 4490 people, 99% of them of Mexican descent, eke out a living as best they can. A large migrant population returns to San Diego each year as well. The flat, barren terrain is baked by the constant, relentless Texas sun. Houses for most of the inhabitants are small dilapidated wooden structures of two or three rooms, their already poor condition exacerbated by seasonal floods. Three characteristics make the population largely homogeneous: language (Spanish speaking), descent (primarily Mexican American), and poverty. Although the average family has five members, families of

seven and eight are common. Many receive commodity food which now supplements the traditional Mexican diet of tortillas and beans.

San Diego lacks an industrial base. Some men are ranch laborers; others commute to Alice (pop. 16,000), ten miles to the east or to Corpus Christi. The major employers are the county and the San Diego Independent School District. When a team from the University of Texas Medical School did a nutrition survey several years ago, it could not find a grocery store in San Diego that sold the items (a group of 26 common foods) used in the survey to determine comparative food costs. Most of the stores are family run, and in poor condition. The nearest well-supplied food stores are near Alice.

Like an oasis, the modern, air-conditioned school complex sustains the community's life. Built in 1964 with a bond issue, the 25 air-conditioned buildings on the 49 acre campus include the Anna Collins Primary School (K-3, 549 students); the Archie Parr Elementary School (4-6, 418 students); and the San Diego High School (9-12, 480 students). On the main campus are also a large cafeteria, the Duval County Library (an attractive spacious building with colorful decorations, study areas and a color television); the nurse's office and infirmary; the Follow Through office; a football stadium, athletic fields, playgrounds, a pool and a little league park. The junior high school (7-8, 267 students) is located half a mile away. The bright air-conditioned public schools are very important to San Diego serving not only as education institutions but as a community center where students and parents can come for socializing, recreation and advice throughout the year.

WHO THE STUDENTS

The San Diego Independent School District, which includes Duval and part of Jim Wells counties, enrolls 1709 children, 99% of them of Mexican descent. While many of the families have lived in the area for close to 200 years, several pupils are part of the migrant population which returns to San Diego shortly after the school season begins. A 1968-69 survey of 160 five-year olds who were to enter school showed that 48 percent spoke Spanish at home; 40.50 percent Spanish and English; and 11.25 percent, only English. In the San Diego school district, 72.16 percent of the pupils qualify for Title I funds. However, because of the efforts of the district, all children are healthy, well-groomed and well-dressed. Before the inception of the health and meal programs, absenteeism was high, and student attendance low. One parent mentioned that, as a child, she was ashamed to go to school because of her torn clothing and scanty lunch. Today children love to come to school. Even summer attendance is 65 percent. ADA has risen considerably in the last few years; more students graduate from high school; more go to college; and more stay on the job.

WHY WHAT

In 1958, 53 percent of the families in Duval County had incomes below the Social Security Administration's criterion for survival on a minimum diet. Infant mortality was 1,994 per 100,000 (as opposed to 1,700 per 100,000 nationally). Only 35 percent of the houses were sound and had plumbing (vs. 74 percent nationally), and 35.4 percent

of the houses had more than one person per room (as opposed to 11.5 percent nationally. In 1960, those over 25 years old in San Diego had an average of 6.9 years education (as opposed to the national average of 9.5 years). Functional illiteracy was high; 36.8 percent had not completed four years of schooling (as opposed to the national average of 7.8 percent). Within the district, malnutrition and poor health produced rampant absenteeism and made those in school drowsy and apathetic. Appointed District Superintendent in 1959, Bryant P. Taylor determined to eradicate the health and nutritional deficiencies that militated against student's educational opportunity and perpetuated their disadvantage. As a consequence, the superintendent, advised by the teachers and with the approval of the school board, inaugurated a district-wide program to increase the students' ability to learn through the improvement of their health.

HOW

The program aims to achieve its primary goal--the child's improved health and well-being--through several activities: a comprehensive continuing health and medicare program; and extensive school meal program of breakfast, lunch, and dinner; an extended school program in which the schools are open and functioning from 7:30A.M. to 9:00 P.M. throughout the year; and a bilingual Follow Through program for the primary school's grades K-3.

Since 1960, when San Diego used local funds to provide daily multiple vitamins to pupils, health care has been a primary concern

of the district. Today a new four-room infirmary building, staffed by a school nurse and health aides manages the daily care of the San Diego children. The cheerful infirmary is well-equipped with cots, lavatories, and an examining table.

A child may be referred for health care through many avenues -- his physical examination (made when he enters the system), parents, teachers, the social worker, aides, or self referral. The nurse and her staff also feel free to visit homes and collaborate with parents and teachers.

The migrant, Headstart, Title I and Follow Through programs provide for complete physical examinations and the correction of medical and dental problems. At the time of the child's examination, immunizations are initiated or continued, and other health needs, such as dental work, corrective shoes, eye glasses, are corrected. The examinations of migrant and Headstart children pointed up the need for earlier immunization; consequently, the nurse started a community clinic at which infants and small children receive free immunizations. These records are kept and continued when the child enters school.

Parents are encouraged to pay whatever they can toward a child's care through insurance or other resources; the school pays the balance or the total cost if necessary. Funds are provided through Title I, Follow Through, and local taxes.

Most of the health care emphasis is in K-8, with assistance given the high school students as needed. This is reasonable since health care provided in the early years results subsequently in fewer health problems. Since a health examination is a prerequisite for sports

participation, many high schoolers must receive a physical examination.

The Follow Through Project involves a comprehensive medical plan. Most children need vaccinations and inoculations, and many need extensive dental care.

Since the inception of the Follow Through program in 1970, the following number of children have been provided the services listed below:

1. Eye examinations and glasses -- 30 students	\$ 501.50
2. Hearing examination -- 1 student	20.00
3. Physical examination -- 306 students	3,094.25
4. Medical attention and doctor visits -- 290 students	2,192.99
5. Surgery and doctor's fees -- 30 students	4,871.50
6. Dental work and dentist's fees -- 138 students	4,248.00
7. Medication and shots -- 353 students	1,501.08
8. Corrective shoes -- 26 students	420.49
9. Medical supplies	2,310.34
	<hr/>
	\$19,160.15

(Hospital stays not included)

If children report or manifest a health problem they are brought to the infirmary by a classroom aide (parent). Relying on her experience and the supervising physician's standing orders, the nurse treats the child.

San Diego school nurse's diagnostic functions are based on a broad interpretation of nursing practices. Her role reflects recent medical determination to more effectively utilize experienced pediatric

and public health nurses in areas severely deprived of health services. Physicians in the area are cooperating with the project, and have issued "standing orders" that she follows. While the researchers were in San Diego, a child was brought to the infirmary building with abdominal pain. The nurse questioned her as to location and duration of the pain; its character and frequency; the time and nature of her meals; whether she had nausea or vomiting. She observed the child's posture and her walk, and felt her abdomen. She then prescribed a teaspoon of elixir of donatoal, and the child returned to her normal activity. The nurse explained to the researcher that the child would be observed. If the pain continued, the nurse could repeat the same medication. If the second dosage did not relieve her, the child would then be seen by the physician.

The nurse and her staff are on call for any type of health problem which may arise and use their own and school-provided cars to transport children if necessary. The nurse has also created a most detailed record system for each child's history that spans his entire stay in the school district, and it is kept current. Other daily activities include direct hygienic care such as shampooing and furnishing toothpaste, mouthwash and combs to the teachers for daily health care.

HOW (cont'd) NUTRITION

Since the rumble of an empty stomach can overwhelm a teacher's explanation, the school district expends much time and funds on the

meals that it provides to children who otherwise would not receive a sufficient nutritional diet. San Diego Independent School District serves breakfast, lunch and dinner to all the pupils who need it.

A large, clean, bright cafeteria is located on the main campus. The manager of the cafeteria is a dietitian. She incorporates the food and nutrition suggestions of the Texas Education Agency and the U.S. Department of Agriculture in the school's menus. Many students eat three meals a day here: breakfast begins at 7:30; lunch (dinner), the largest meal of the day at 11:30, and supper at 5:15. Although many children receive meals free, neither teachers or students know their identity. This privacy is important.

A study done in California in 1967 found that certain areas of the state were not receiving the correct Title I entitlements because cultural pride kept certain ethnic groups from registering for AFDC allowance. Superintendent Taylor noted that initially many students had trouble adjusting to a morning meal, since they are not accustomed to it. Now many students who otherwise would be restricted to Mexican foods are learning to enjoy different, better balanced meals.

Many high school students are able to pay for meals with money earned in the work-study program; some even work in the cafeteria. Students thoroughly enjoy their meals and finish all their food; many go back for seconds. Parents are pleased that the children eat with their teachers, particularly since both the size of the families and the size of the homes preclude many San Diego families from sitting down together. Parents are learning about nutrition through the school; some ask the dietitian for the best methods of preparing

regular and commodity foods, and the school holds meetings where demonstrations are given on food preparation.

HOW (cont'd) EXTENDED PROGRAMS

San Diego's program to enrich the life of its students includes extension of the traditional school day and year. Operating under Title I and Title I migrant programs, the extra hours provide valuable remedial and recreation activities. Four hundred regular Title I students in grades 1 - 12 participate in an extended day program. From 3:30 to 5:30, five days a week, students who require special remedial instruction receive assistance in all subject areas, particularly reading. Most noteworthy about the extended day is the energy and enthusiasm of students and teachers, hours after the regular school day has ended.

A transient Mexican-American migrant population comes to San Diego shortly after the school year begins; Spanish-speaking migrant children (who comprise about 12% of the student population) suffer from the language barrier. The extended day helps compensate for the schooling these children have missed. The migrant preschool program, from 3 p.m. to 6 p.m., employs a teacher and an aide, and provides ancillary support services of meals and health care, in addition to instructional preparation. From 3:30 - 4:00 p.m., the children have physical training, then attend class from 4 :00 to 5 : 00. After supper (5:15-6:00), aides make several trips in order to transport the children home.

The regular Title I migrant program extended day is designed to improve the reading English language skills of 192 migrant children in grades 1-8. In this program, 10 teachers and four aides participate. The program lasts until 7:00; students eat supper at school and also receive support services.

The school summer recreational program includes swimming, little league, volleyball, basketball and playground. Breakfast and lunch are provided. The summer school proper helps to maintain gains made during the year. Other programs are the Preschool Program, which enrolled four-year-olds in 1972-73 and will add three-year-olds in September, 1973; and a two-week training course in June in which senior girls care for three-year-olds. The children get free breakfast and lunch (Title I funds) which are part of the program. Eventually this will mean a yearly program.

Another activity that gives further indication of the prevalence of an educational philosophy geared to the whole youngster is a special high-school vocational program available to juniors and seniors (as well as the regular less-intensive home economics and agriculture programs). The skills available are auto mechanics, building trades, cosmetology, and office practice. Classes meet 2-3 hours per day and also include students from two neighboring schools who are bused in. Girls in the cosmetology program cannot afford the materials necessary to take the state test certifying cosmetologists are provided with the material by the school; all girls are provided transportation to the testing site. Arrangements such as these prepare the students in these vocational programs for the job market in a realistic manner.

HOW (cont'd) BILINGUAL FOLLOW THROUGH PROGRAM

For the past four years, a bilingual Follow Through Program has been in effect with the Southwest Educational Development Laboratory. The decision to have a bilingual program was made subsequent to the 1968-69 survey which showed that a majority of 160 entering five year olds spoke only Spanish (48.25%).

Students have performed satisfactorily with curriculum related materials and standardized tests. The teachers, all native Spanish speakers and longtime San Diego residents, note improvement in student attitudes toward school. In the past, as in many school districts in the Southwest, only English had been used in the schools. During classes students need not worry about using their native language and the change to English is natural. Teachers note a marked increase in parent participation since the inception of the bilingual program. Next year Title VII funds will permit the initiation of bilingual programs in the elementary school (grades 4-6).

In Follow Through, each class has a regular aide and one parent aide. The job of parent aide, one at each grade level, changes weekly. Since many mothers speak only Spanish, they could not participate in the parent aide program without the bilingual component. Teachers encourage parents to visit classrooms. A sign in one room reads "Padres Bienvenidos" (parents welcome). A parent coordinator supervises parent-teacher activities.

The social worker visits families of Follow Through children. She discusses child health and education problems, and explains the

services offered by the school. Since the 1970-71 school year she has visited 390 families, 97 on welfare because of broken homes, 32 on welfare because one parent is disabled. When family income is below the Office of Economic Opportunities poverty level, the local Lions and Rotary clubs provide children with glasses and clothing. One of the benefits of the bilingual Follow Through Program is the purchasing of clothing for children qualifying under the federal ruling. Parents receive notes describing the project (written in Spanish) which they must sign if they want their children to receive clothing. Initially some parents hesitated to accept free clothing, but the social worker stressed the importance of the clothing for the child. Formerly, aides drove several children at a time to stores in Alice. In an attempt to personalize the operation, parents now take their children to a store in San Diego, pick out the needed clothing and sign a form indicating how much and what was bought. This procedure provides for greater parent involvement. At present, if a child tears his last pair of shoes, parents do not hesitate to notify the social worker. Today all students on the campus are well dressed. In the future, Follow Through plans to increase parent interaction by having the teachers visit the home of each pupil at least twice during the school year.

All of the Follow Through children eat breakfast and lunch in the cafeteria. Eighty percent eat the evening meal, instituted in 1970-71.

An extremely active Parents Advisory Council participates in the Follow Through program.

WHO (cont'd.) TEACHERS

San Diego's teaching staff is completely bilingual. Seventy-five percent (75%) of the teachers are graduates of the San Diego High School, and the majority also graduated from Texas A & I University in Kingsville. The teachers have, on the average, 20 years experience in teaching disadvantaged Mexican-American students. Currently, 75% of them have masters degrees. Since San Diego is a poor district, with low taxable wealth, teachers receive only the Texas Minimum Foundation salaries. Despite the low salaries, they are very enthusiastic and committed, and the school system is characterized by very low turnover.

AIDES

Aides throughout the system permit greater individualization of instruction. All first and second grade classes (Follow Through) have a regular aide. The aides are bilingual Mexican-American women, all but one under 35. Five have high school diplomas. Some have attended workshops, and the others have received four weeks of training from a supervising teacher. In addition, Title I employs 4 aides, one at each of the schools -- primary (K-3); elementary (4-6); junior high (7-8); and Senior high (9-12). Aides are paid at an hourly rate, for a 40 hour week.

The Follow Through Bilingual Program, currently in use in the primary school grades K-3, employs a project director, secretary, guidance counselor, counselor aide, resource specialist, social workers, 2 social worker aides, parent coordinator and parent coordinator aides.

In the first and second grade classes all teachers are Mexican American. In addition to the teacher a Follow Through classroom has a working mother aide, the Follow Through Aide, and sometimes a Neighborhood Youth Corps aide. Each week a different mother is the working mother aide and there is one working-mother aide for each grade level, K-3. Low income parents are paid \$57.00 per week of work. A day care center aide takes care of the preschool children of mothers while they are working in the program. Rotating among all the classes on a grade level, the mother assists the teacher; learns about what her children do in school; and gets to know the teachers and school administrators. Because many of the mothers speak only Spanish, this position is only possible with a bilingual program. Working mothers interviewed in this study were relaxed and enjoyed the opportunity to be near their children and earn extra income. The system offers many community people the chance to help and to earn needed money.

Remedial teachers work during the extended day with students with learning problems of learning and self-concept.

Communication among staff is good. The common background and experience fosters informal communication. Formal avenues

of teacher communication and planning are frequently non-existent, and establishment of formal channels would be beneficial as they would provide regularized means for teachers to better share ideas and discuss problems.

WHO (cont'd.) PARENTS

Before the inception of the Follow Through program, now in its fourth year of operation, parent participation in the schools was negligible.

The Follow Through Parent Advisory Committee speaks for primary school parents, making sure that low income parents are fully and equally represented. It helps establish the criteria for hiring staff members; advises in their selection; organizes activities for parents; and serves as a channel of communication between parents and program staff -- encouraging parents to participate in an advisory capacity and helping and evaluating pupil progress. Membership in the PAC includes two representatives from each classroom. Attendance is open to all parents and employees; meetings are held monthly. The parent coordinator acts as a liaison between the non-professional staff, the classroom, and the parents.

Parents of district children work as aides in the cafeteria, classroom and infirmary as well as in transportation. Some parents are also teachers. Teachers schedule parents' visits to classrooms. When parents are invited to lunch, the teachers act as hostesses. Typical activities are parent education sessions, family art sessions, nutrition classes, cooking exchanges, and serving session. The

parent coordinator, herself the mother of children educated in the system, supervises all these activities, contacts parents and makes home visits.

Since San Diego is a small, isolated town, mothers previously had few alternatives to the traditional role of staying at home, even after the children started school. The strong support services at the schools and the longer school day have had the following effects: (1) children of poverty backgrounds are healthy and not ashamed to come to school, and they learn more; (2) as a consequence, parents have less cause for concern with their children's welfare. Parents are learning from their children. The mothers, formerly culturally and economically isolated, are becoming more knowledgeable as they become less timid about approaching the schools. The bilingual program has facilitated communication. At the schools the mothers learn of the nutritional and health needs of their children. More important, they know problems can be remedied. Since most of the staff are native San Diego residents, strong networks of informal communication already exist between them and the community. While this is an advantage, it also militates against the erection of a strong formal system of communication. Without a formal structure, less homogeneous communities might be unable to effect such a successful program.

HOW (cont'd.) COST

The food and health programs in the San Diego Independent School District are funded by a combination of local and federal funds. Federal funds include those provided by the National School Lunch

Act, Child Nutrition Act, Headstart, the Vantick Act, and the Elementary and Secondary Education Act. USDA commodities are also used. In testimony before the Senate committee, Superintendent Taylor explained the district's decision to use some of the Title I funds for disadvantaged children to improve their health and nutrition: "These two areas... will always receive priority in this school district because hungry children cannot learn."

WHAT (cont'd.) EVALUATION

The District achieved impressive results from both health and nutrition efforts as early as 1968. At that time, Dr. Arnold Schaeffer of the University of Texas Medical School, conducted a national nutrition survey at the request of Congress. Dr. Schaeffer testified before the Senate Select Committee on Nutrition and Human Needs:

These were the best teeth we've seen in any place we have surveyed to date, least number of decayed unfilled teeth. The blood biochemistries are completely different from what I presented for the overall picture of the national survey.

Whereas about 11 percent of the people examined in the 26 Texas counties surveyed had low or deficient hemoglobin, no San Diego children did. Whereas plasma Vitamin A was low or deficient in 40 percent of the Texans surveyed, only 6 percent of the San Diego population had the deficiency. Although 16 percent of the Texas Survey Group had low or deficient serum Vitamin C, no one in San Diego did. Only in urinary thiamine and riboflavin were many

San Diego children low, and even this number was far less than the state average. The health, nutrition, and bilingual programs have made a noticeable difference in education as well. Attendance has improved markedly, from 80 percent before the program began to over 95 percent. Discipline is less of a problem; attention has improved; and few students repeat grades. More students complete high school, and more remain on their jobs. In addition, morale of students and teachers is extremely high. The most positive concrete evidence of the program's success is the health, pride, enthusiasm and neat appearance evidenced by all the San Diego students. The proud and eager pupils refute the usually tragic social effects of a community economy where 72.16 percent of the students are from low income families. Teachers also note an increase in enthusiasm and achievement since the inception of the bilingual Follow Through Program, which will be extended to grades 4-6 next year with Title VII funds.

This school district's programs are changing positively the lives of students and parents, and the far-reaching effects should be seen in the next generation. A handicapping cycle, fostered by poverty, community isolation and lack of information, is being broken. If the current level of federal funding is maintained, the programs should continue to improve and involve more students and more of the community.

EFFECTIVENESS

In this project primary attention is given to improving the health and nutrition of pupils rather than to unique innovations in the educational process. Proceeding from the assumption that fatigue, hunger, and illness reduce the learning efficiency of children, the project has focused on ensuring that each youngster receives a well-balanced diet daily and that deleterious health conditions are identified and corrected. The project includes some changes in educational program such as an extended school day, a bilingual program, and the institution of a Follow Through program. Yet these innovations appear to be routine in the presence of the massive effort at improving health and nutrition. The feeding program is well conceived in that the menu is not only nutritious, but also reflects the culture of the children served. Although most of the students had not been in the habit of eating breakfast, this dietary pattern may have been due to poverty rather than any ethnic custom.

For some educators this project may present problems. For those who feel that nutrition and health care are not a function of the public school, this could be viewed as an inappropriate use of educational resources. For those who fear that direct service to the poor may foster dependency, much of the effort in this project may be viewed as counter-productive to independence. However, it would

appear that the designers of this program were more concerned with helping these children break out of the debilitating and handicapping cycle of poor health, poor school attendance, and poor school achievement than with the question of appropriateness of the service or its contribution to the development of dependency. The results, in terms of improved health are, indeed, impressive as are the results in school attendance. Even if there were no improvement in academic achievement (yet to be definitely established), the San Diego project must be viewed as an important development in the school's service to children.

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