Intervention Aims to Reduce Chronic Absenteeism in Washington, DC

Nearly 16% of all students who received "nudge" communication were no longer chronically absent.

Chronic absenteeism is a persistent problem in Washington, DC schools. At the end of SY21 -22, it reached a record 48%, meaning that **nearly half of students missed 10% or more of school days**. Missing that much school has adverse effects on learning, which is of great concern as the District's schools work to recover learning lost during the Covid-19 pandemic. Every minute spent in the classroom is critically important.

In SY22-23, the Office of the Deputy Mayor for Education (DME) expanded its partnership with EveryDay Labs (EDL) to offer every public school serving K-12 students access to an intervention that has proven to be effective at reducing chronic absenteeism in other localities. Across both DCPS and charter LEAs, 177 schools opted in to working with the DME and EDL to implement this intervention that uses attendance data to target text message and mail communication to families of students who are either chronically absent or at risk of becoming chronically absent.

The cost of this intervention to the city is less than \$6 per student.

Pre- and Post-Treatment Outcomes

While the school year is not yet over, and it is too soon to measure the true impact of this intervention, it is possible to observe where students were before and after the "nudge" communication. Of the 43,629 K-12 students that received the intervention, 58% improved their attendance rate, including 16% of students who went from being chronically absent before the intervention to not being chronically absent after the treatment.

Figure 1 illustrates which attendance tier the student was in prior to the intervention in the

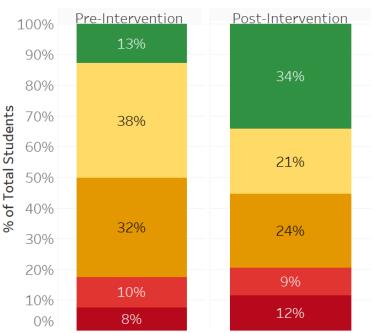


Figure 1: Pre- and Post-Treatment Attendance

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Attendance Tier (n= 43,629)

- Satisfactory Attendance (<5%)</p>
- At-Risk Attendance (5%-9.99%)
- Moderate Chronic Absence (10% 19.99%)
- Severe Chronic Absence (20%-29.99%)
- Profound Chronic Absence (>=30%)

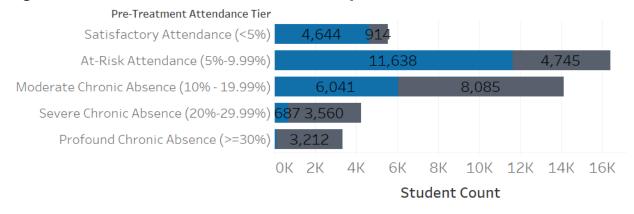
left column, and which attendance tier the student was in when the data was pulled at the start of April 2023 in the right column. The number of students who achieved satisfactory attendance grew from 13% before the intervention to 34% after the intervention. The number of students who were either at risk of becoming chronically absent, or experiencing moderate or severe chronic absenteeism (missing between 5% and 30% of school days) shrunk from 80% prior to the intervention to 54% after the intervention. Conversely, the number of students experiencing profound chronic absenteeism also grew from 8% to



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Figure 2: Chronic Absenteeism Outcome by Pre-Treatment Attendance Tier



Chronically Absent Post-Intervention

Not Chronically Absent Post-Intervention

12%, with most of the increase resulting from students who were either moderately or severely chronically absent (missing between 10% and 30% of school days) slipping into the profound chronic absent category.

Combined, these facts suggest that the intervention works best for students who had missed between 5% and 30% of school days prior to the intervention. There were, however, about 24% of students in this range whose attendance tier worsened between the start of the intervention and when the data was pulled. Figure 2 helps to illustrate this point as well; it shows the number of students who were chronically absent post-intervention by their pre-intervention attendance tier.

Attendance Outcomes by Grade Band

While 58% of all students improved their attendance between the start of the intervention and April 2023, there was variation across grade band. Of the 22,518 elementary school students who received the treatment, 64% improved their attendance rate between the start of the intervention and when the post treatment outcomes were observed. On the other hand, only 44% of the 12,533 high school students improved their attendance between the two points of observation. While it is not possible to claim that these improved outcomes are the direct result of the intervention, they are consistent with other studies of the intervention that found EDL to be more effective with younger students. In addition, prior annual attendance reports put out by the Office of the State Superintendent of Education highlight that high school students are most likely to experience chronic absenteeism, so it is a logical conclusion that they would also be most resistant to any intervention, including this one.

Looking Ahead

For the District to return to pre-pandemic levels of chronic absenteeism, the rate would have to decrease from 48% as of SY21-22 to below 30%. This would require an estimated 15,000 additional K-12 students to improve their attendance enough that they are no longer chronically absent. While we do not yet know the true impact of the EDL intervention, the pre and post-intervention outcomes observed suggest that it could help the city return to prepandemic attendance outcomes and, we would hope, improve upon them. Among the students who received the intervention, nearly 7,000 were no longer chronically absent when attendance outcomes were observed at the start of April. Increased attendance would, without a doubt. be worth more than \$6.

Feedback: Email <u>Edsight.DME@dc.gov</u>



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