Education in 21\textsuperscript{st} Century America:

A Waltz With the Scarecrow

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Ten Points for Change

1. Begin to think of education and learning as a method for health, no different than exercise or nutrition. For the new millennium, learning and information (mental exercise) is the conduit to brain wellness as physical exercise is for cardiac health.

2. Our educational system should accentuate curriculum that enhances language and verbal skills. Language is highly correlated with overall intelligence, and increasing one’s IQ early in life may help to prevent late life neurodegeneration. Language itself may have a prominent role in health and wellness.

3. Learning must be considered a continuous process and not a fixed stage. Continuous lifelong learning must be reinforced from embryonic development to the latter stages of life. We now know there are two critical periods of neuronal development: infancy and teenage years. A third critical period may exist in middle to later adulthood.

4. Early communication, verbal and nonverbal, between mother/father and developing child in the womb is important as it may lay the foundation for human interaction and foster a stimulating environment.

5. Environments for our children must be safe, stimulating, challenging, and nurturing. This is the case for the home and for day care centers across the country. Brain development in childhood is tremendous, and there is relatively little a child’s brain cannot ascertain. These early experiences help to prepare the brain for new learning on more complex levels with advancing age. Our preparation to maximize intelligence and brain capacity is a health care issue.
Every neighborhood should have immediate access to a library or school. New neighborhoods could be built with the school and place of worship at the epicenter. A school should be built in the middle of every ghetto and slum. Churches in the inner city and in rural America should be equipped with the internet to link older adults to information.

6. Our educational system must be seen as a place to maximize lifelong health, not simply a time-limited setting for completing a diploma. The 12 year (9 month) school experience might not be appropriate if we view the school as a wellness center. Adults and older adults must remain connected to the educational system of our country. New learning and development of new skills translates into brain development and brain health.

7. Our health insurance companies need to re-think how the money is spent for maintaining health. I would argue that education and measurable learning across the lifespan should be incentivized financially in the same way that an exercise routine is. Imagine your health insurance provider paying for your education with the purpose of preventing a progressive disorder late in life which may cost three times as much. It is significant to note that more older Americans are returning to college than ever before!

8. Curriculum on aging should be incorporated in all school systems across the country. As aging is a national issue, we must begin teaching our children how to age successfully. Topics such as financial planning, nutrition, education, and occupation can be presented as important factors to a long and healthy life. Teachers may even be recruited from older persons who are now aging
successfully as research indicates that children like to have older adults in the classroom.

9. Our school systems must begin to think beyond education and redefine their missions as health facilitators. A school building can literally become the wellness center for the 21st century with a focus on learning, mental stimulation, and brain health. It likely has as much to offer in maintaining health and preventing illness across the lifespan as any primary care physician’s office.

10. Consumers of health services must demand more than our current options for wellness. We must encourage health insurance payers and policymakers to recognize the importance of education, religion, role and purpose, housing, and transportation to our health. Funding of such social needs will demonstrate a commitment to real wellness, and may be covered by existing money which is funding antiquated programs. We can measure the impact of such an approach to health and wellness, and determine the economic and quality of life outcomes compared to what we have now.
Bibliography


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