



Wash Your Hands

A Protocol Needed Before Teaching or Practicing Youth Development

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Prior to the mid 1800s, physicians had not discovered the critical importance of washing their hands before performing surgery and delivering babies. As people of the 21st century, we cannot imagine a time when this common sense practice was not a part of basic medical hygiene. Fortunately, 19th-century scientists realized that the spreading of disease and death within medical facilities could be traced to the failure to wash one's hands.

Well, here we are in the 21st century and after over a century and a half of universal compulsory education, institutionalized youth development organizations, and thousands of youth education and child welfare efforts, we still see children and youth who fail. Too many children take drugs, join gangs, experience parenthood well before they are ready, drop out of school, and find themselves in detention centers.

If our education and youth service provider systems were a hospital, I would ask if we are washing our hands, because too many of our kids are becoming infected.
The answer would be "no."

The obvious question is whether there exists a protocol based on knowledge and practice that demands that all of today's youth development practitioners, educators, childcare workers, coaches, and instructors wash their hands.

Each day tens of thousands of schools, youth organizations, sports leagues, clubs and special interest groups serve our children and our society. However, very little is known about the adults leading and working with these organizations. How can we know that they have adopted a standard scientific protocol for working with children?

The staff of 19th-century hospitals realized that regardless of what they did, some patients recovered and others died. Then it was proven that simply washing one's hands could protect health and save lives. More patients got better and the number of maternal and infant deaths following childbirth was dramatically reduced.

What is missing in our efforts to help children achieve and succeed? What prevents so many youth from achieving their potential? Could it be something as simple as "washing our hands?"

The answer is an unequivocal “yes.”

Yet, there is no simple and effective protocol in the youth education and development disciplines even though the science is there. Such a protocol could dramatically reduce the number of children who fail.

Once we have mastered this protocol we have to observe it or we will become a physician or nurse who says, “Oh, yeah, we heard about washing one’s hands but at this hospital we don’t do it.” Can you imagine? But that is exactly what happens all over our country to hundreds of thousands of children who deserve much more.

Let me offer one important example. I recently visited a public elementary school. A few months earlier, we had conducted a seminar on the importance of teaching positive self-talk to students. The literature abounds with evidence that children who learn and practice positive self talk develop personal awareness, improve their intrapersonal intelligence and exhibit higher academic and social performance than students who don’t. The time invested in this practice is a minute or two each day. The return on investment is a more secure, motivated, self-directed person. It’s washing your hands! Refraining from this remarkable practice places children in jeopardy. The teacher who chose not to “wash her hands” was “too busy.” After a few minutes of observing her, I saw that she was indeed as busy as health care providers, but even they can still find time to “wash their hands.”

What is keeping our educators and youth workers so busy? If we know the answers, if the science is clear, then why aren’t we protecting our children against despair, pessimism, helplessness, aimlessness, and alienation? Why do some states use second-grade achievement scores to determine the number of prison cells they will need? Do we just expect some children to be incarcerated? Isn’t this similar to a hospital preparing coffins for its patients because the staff can’t be bothered to wash their hands?

As we applied this question of science to the education and youth development fields, Kids at Hope staff visited more than 100 after-school parks, recreation sites, and youth organizations. We wanted to see if they had a common understanding of what each child’s social, emotional, and academic needs are. Was the science of child development relevant to the programs that served children? We were disappointed.

It’s important to note here that millions of children benefit each day from our educational, youth development, childcare and recreation services. But it is equally important to concede that many do not, less for lack of effort than for a lack of universal knowledge translated into a protocol of practice.

During one of my out-of-town trips I stopped by a convenience store for a late afternoon snack and some gas. I also used the restroom. I saw the familiar sign, “All employees must wash their hands after visiting the restroom.” Next to that sign was a step-by-step illustration of the proper method to wash and dry one’s hands and even how to shut off the faucet. I could not help wondering what that sign would look like if it conveyed the universal information that all adults need to know about children. Even after more than 15 decades of knowing the value of washing your hands, we still have to be reminded of its importance.

Some things are so simple that we ignore them. We revert to finding our own ideas, our own practices and our own protocols and yet we are working with children during their most fantastic period of growth and development. We need to understand more and do better.

In one of the classes I teach at Arizona State University, I ask my upper division and graduate students how they could convey positive expectations to elementary, middle and high school students. I also asked them about expressing lower expectations. We were trying to understand “the Pygmalion effect” or self-fulfilling prophecies about student expectation and achievement. This phenomenon has been researched for almost four decades. I interrupted their small discussion groups to say that they were spending far too much time on this simple exercise. I told them that this was not rocket science. This annoyed my students.

I was implying the following:

First, we are much further along in rocket science than in education and youth development. We have figured out how to send a spacecraft to Mars and have it relay information to us. We can explore our galaxy and other galaxies. Unfortunately, we have yet to figure out how all children without exception can succeed. Our work may in fact be more difficult than rocket science.

Second, after our small group discussion we shared many ideas similar to what we find in our respective youth service fields. We always end with lots of great ideas. Unfortunately we have learned that great ideas are no substitute for a clear, precise and simple protocol, needed by all children. This is not to suggest we homogenize our work with children but rather identify and practice simple protocols that will be much more successful with all young people.

In other words, what would washing our hands look like in our youth service fields?

We still fail too many children even after spending billions of dollars on them. I appreciate our differences but not at the expense of what every child needs.

I expect every hospital to follow practices that have been proven to “do no harm!”

What, then, is our protocol for “doing no harm” to children? What should all children experience each and every time they attend school or participate in a youth program?

Let us explore a simple and straightforward protocol that establishes the best practices that are commensurate with hand washing.

A Protocol Based on Science and Practice

The Belief

Our beliefs about children are so basic we forget this first protocol. Every volunteer or professional who works with children must believe all children can succeed. As simple as it may sound, thousands of youth workers, teachers, administrators, coaches and other adults will tell you exactly why some children cannot succeed. Most often we recruit, hire, or retain adults based on their education, qualifications, credentials or experience but forget to ask whether or not they believe all children can succeed. If our teachers and youth workers cannot accept the belief that all children can succeed, without exception, they will be the ones who will decide those who can't. The question is, how many do we allow them to identify? One percent, 10 percent, 20 percent or more?

One principal asked us to provide a staff development workshop. When we asked what he wanted our training to accomplish, he replied that he wanted the teachers to stop using toxic and disparaging language about students. When faculty and staff believe that all children can succeed, the culture of the school becomes much more positive and the achievement of students much more pronounced.

During a visit to the Lone Star State I toured a large community recreation center. The director of the center pointed to a group of boys playing basketball in the gymnasium, and said that they were “Huntsville bound.” I later learned that Huntsville was the state penitentiary. How could this person not wash his hands when working with these children? Hadn't he heard about the Pygmalion Effect? Did his superiors think that it wasn't important to have someone responsible for children not to understand it? See, once you know that you are supposed to wash your hands and you don't, you “do harm.”

“No significant learning happens without first a significant relationship.”

Our second protocol practice is equally powerful and just as easily ignored.

When did we forget that washing our hands would prevent the spread of disease or infection? When did we forget that Dr. James Comer and others like him from all their years of research and practice discovered the importance of establishing a meaningful relationship before we begin the teaching process? Unless you create a meaningful relationship with a child, whether you are teaching them how to dribble a basketball, or read or add and subtract, you are much less effective in doing so without first developing a partnership with a child—a relationship between teacher and learner. How often have we heard, “children don’t care about how much you know until they know how much you care”? Children who fall through the cracks are the result of our inability to translate this statement into action.

Unfortunately, we forget these simple concepts and think of teaching as a function and not as a relationship. Curricula, lesson plans, process, and infrastructure take precedence over the relationship. As a result, some students do well, others do okay and too many fail.

In our workshops I introduce the importance of the relationship. I begin by telling my adult students to keep this concept in mind. A few sessions later I return to the concept and ask them what they have to do before teaching students to read. The answers are always the following:

- Read to them
- Teach them the alphabet
- Teach them phonics

These responses are very vivid examples about how quickly we forget about the importance of building the relationship before jumping in to teach before we first reach.

The very first thing, then, is to establish a meaningful relationship with every single student. A relationship in which the child understands that the teacher or coach or youth worker cares deeply enough to invest time, passion and compassion in that child. After the relationship has been established, the function of reading can be addressed, otherwise, some students will be excellent readers, some will be competent, and others will not learn at all. Think about the many ways we have reformed, redesigned, reinvented, and repackaged the approach we serve our youth only to discover that some children still do well, others still do average and too many still fail.

So many of our children enrolled in schools, youth programs, sports leagues, faith-based programs and other groups remain faceless. We know who these kids are but we don’t actually know them. They are the children who are headed for places like Huntsville.

Give Our Children a Sense of their Future

Our third practice is to give all children a sense of their future.

Every group that works with children seems first to focus on what skills, intelligences assets, talents or traits children need to acquire. Our communities and our institutions are obsessed with giving our children things. What our children need most is a sense of future so that the things that we do give them have greater value.

For example, in one of our brief group work experiments we distribute a “Future Sticker” (similar to a name tag) to every school age child, youth or adult who are in attendance at one of our workshops. On the sticker there is a line to write down the first thing that the wearer wanted to be when he or she grew up. The answers

are always an occupation or profession. When did life become that one-dimensional? What about relating the future to home and family life? How about community and service? Hobbies or recreational interests? Offering our children the opportunity to see their future beyond a job is critical but we forget the value of this part of washing our hands.

And like washing your hands, offering children a chance to understand the many opportunities beyond “a job” only takes a few minutes.

How much of an effect can this simple protocol have on a young person’s life? Dr. James Garbarino from Cornell says that many of our young people, especially those who he has interviewed in our youth and adult prisons somewhere either lost the ability to articulate their future or never had a sense of future at all. He calls this inability to think about a future “Terminal Thinking.” Talk about spreading a disease.

The news program, 60 Minutes profiled a 15-year-old Hispanic girl. She was a member of the infamous MS-13 gang, one of the most vicious in the country. During the interview she displayed three dots tattooed between her thumb and index finger. She calmly stated that the three dots were where her gang life would take her: “hospital, jail or cemetery.” Her words were prophetic. Nine months after this interview a fellow gang member killed her.

This was a young woman whose life should have been filled with hope, optimism and achievement. Her family failed her, so did her school and her community. Where were they?

Because the dominant culture failed to offer her a sense of future, the gang life did. We must understand this critical concept. If we cannot impress upon our youth that in their future there are great opportunities to belong, contribute, feel useful and valued and become empowered, too many of our children will be too willing to substitute hospital, jail or even cemetery rather than not to have a future at all.

The message is clear: kids want adults to believe in them. They also want and need caring and loving adults in their lives. Thirdly, they want a future. In short, they are asking us to wash our hands. Instead we start organizations, programs, and camps. We want to perform the surgery before we wash our hands. As a result, some children end up in hospitals, jails or cemeteries.

Self Talk

Now that we learned the importance of washing our hands in support of every single young person’s achievement and success it is time to teach them to wash their hands. Our fourth protocol is the importance of teaching our children about self-talk. Healthy adults know the value of affirmations. We should teach these affirmations to our children.

Conclusion:

We must be honest and decide whether our failure to heed this critical protocol is more than being busy. In many of the schools that I visit, I am usually dismissed. The mantra is usually the same, “Our teachers are already overloaded. We cannot ask them to take on any more.”

Are we asking them to take on more with this protocol or merely suggesting the adoption of a modest set of protocols which if practiced could and will have dramatic effects?

Epilogue

So how are our colleagues in medicine faring these days (150 years later)? In the March 2005 issue of the

New England Journal of Medicine, Atul Gawande's "Notes of a Surgeon: On Washing Hands" describes her experience at Brigham and Women's Hospital in Boston. She writes that

The hardest part of the job of those working in the infection-control unit is getting the clinicians to wash their hands. We wash our hands less than half as much as we should, so we are spreading disease even though we know how not to.

As simple as this analogy started out it remains quite challenging. If we are to protect our young people from today's social toxins we still need to wash our hands. The result of not washing our hands is unacceptable.

Next Steps:

For more information about Kids at Hope and how schools, youth groups, faith based organizations and communities can learn to adopt these practices, please contact:

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