

PERSONAL HEALTH

When School Nurses Are Not Enough

There is no better time than now to bump up the health resources for children in schools, experts say.



By Jane E. Brody

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School children have had an especially challenging time navigating the tedious months of the pandemic, with recent reports showing that students fell four to seven months behind in math and reading compared to previous years, and with the most vulnerable students showing the steepest declines.

But while schools have typically tried to improve student achievement by focusing on academic testing and additional classes, they've too often neglected a major factor in their success: physical, mental and social health. This is especially true for children living in economically disadvantaged communities, who unlike their peers in wealthier communities often lack access to quality health care and resources.

There are many reasons such children often struggle to do well in school, but education specialists say there is no better time than now to devote more resources to their often-limited access to needed health services. Just as shouting doesn't enable a deaf person to hear or better lighting a blind person to see, feeding facts and figures to youngsters with untreated health problems is unlikely to help them learn.

Charles E. Basch, a professor of health and education at Columbia University's Teachers College, wrote in a special issue of the *Journal of School Health* in 2011: "Healthier students are better learners," a fact he called "a missing link in school reforms to close the achievement gap." In the report, he said that schools trying to enhance academic achievement should

target their efforts on reducing health disparities that might impair a student's education.

“The health needs of children have not been considered a central mission of schools,” Dr. Basch told me. “Yet there’s a clear connection between mental and physical health and the ability of children to learn.” And by not adequately addressing such needs, he said, “society is losing talent.”

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Bringing health care to schools

Enter school-based health centers — facilities either in the school itself or nearby that not only tend to acute health issues like cuts and bruises, but also provide a suite of health services including primary, mental and dental care; substance abuse counseling; nutrition education and more. “They bring health care to where the children are, and they’re a very good way to provide health care to children who might not otherwise get it,” said Nicholas Freudenberg, a professor of public health at the City University of New York School of Public Health.

School-based health centers are a cardinal feature of community schools and other public schools that have increasingly recognized how difficult it is for many children to get their health problems adequately detected and treated. Such challenges may be especially acute for those living in low-income urban centers or rural areas. If a parent has to take time off from work or find a babysitter, or if transportation is unavailable or unaffordable to get a child to a medical visit, needed services are too often neglected until there’s a crisis, experts have said.

The nonprofit Paramount Health Data Project, which recently published a report on students’ health conditions in public and private schools in Indiana, found that the more often children visited the school nurse, the poorer their academic achievement on statewide tests, Azure Angelov, the project’s director, told me. The project’s data suggest “that students who are frequent visitors to the school nurse are simply unhealthy and frequently do not feel well during the school day,” Dr. Angelov and colleagues wrote in the report. “This is impacting their ability to learn.”

Although the majority of public schools have at least one full-time or part-time nurse, that's hardly adequate to care for kids who often have complex and interrelated health problems that can get in the way of learning. For example, a child with poorly controlled asthma may avoid exercise and have trouble sleeping, which is when the brain consolidates memory. In addition to medication and routine follow-up, that child may need dietary and exercise advice and assistance in clearing allergens from the home.

A multipronged approach

Dr. Basch said, too often education reformers focus on addressing single issues, like children who come to school hungry. "Providing breakfast alone won't cut it," he said, "no one thing will have a consistent effect on a child's ability to learn." A coordinated strategy that addresses multiple problems at once, Dr. Basch added, will better help children succeed.

It is just this kind of coordination and follow-through provided by school-based health centers, thousands of which now exist nationwide, said Dr. Freudenberg.

Although hunger and nutrition are increasingly being addressed by schools and supported by federal programs, mental health issues like depression and anxiety often fall under the radar. When teachers think a child is struggling with emotional issues, having publicly supported services in or near the school can improve that child's academic performance, Dr. Freudenberg said.

Furthermore, school-based health centers are often open to families and can connect parents to needed health services for themselves or others in the household.

"The pandemic emphasized the fact that many children in poor communities don't have healthy foods or access to mental health services," he said, adding that as the pandemic wanes and children return to school, community support for their unmet health needs will be critical.

And not just for young or poor children or those who lost close family members to Covid-19. Many high school students are also now facing significant health issues, especially if they experienced crippling depression or anxiety related to pandemic-induced disruptions in their lives.

“Students K through 12 are likely to have health concerns during the course of their lives that can and should be addressed by schools to improve learning as well as their health,” Dr. Freudenberg said. “Schools can help them learn how to cope with difficult interpersonal situations.”

For example, in New York City, he said, school-based health programs that provide sexual and reproductive care have helped lower the rates of sexually transmitted infections and teen pregnancy, enabling more young people to stay in school.

Still, Dr. Basch and his co-authors emphasized in a 2015 report on health barriers to learning that “schools alone cannot close the gaps in education or eliminate health disparities. Families, communities, health care systems, legislators and the media each have essential roles.”