

Overcoming barriers to primary health care in Canada with school-based health clinics: Experiences of an urban community

Context and issue

Globally school-based health clinics (SBHCs) represent an innovative strategy to provide essential health care services, helping children from Kindergarten to Grade 12 to overcome access barriers related to transportation, confidentiality, costs, lack of insurance, time, parents' availability and discontinuity of care¹⁻⁴. The services might include medical, mental, and oral health care in addition to health education and vision and hearing screening for school aged children and their families¹⁻⁸. In the United States, other SBHC services such as reproductive and substance use health care services are also provided⁹. Research has demonstrated that SBHCs improved students' connectedness to their school¹⁰, and academic achievement⁹ while reducing absenteeism⁸. Despite Canada's universal health care system, underserved newcomer communities cannot access health care services unless they have completed the 3-month residency requirement to receive provincial sponsored health insurance (health card), and for refugees this process can take more than one year¹¹. This study sheds light on the value of SBHCs in providing equitable health care services for children and families.

Our approach

All data were collected from one elementary school with over 600 students (4-11 years old), located in a high-density low-sociodemographic neighbourhood¹² in downtown Toronto. This school has a SBHC that was established as part of the Toronto District School Board's Model Schools for Inner Cities Initiative, through partnership with a local hospital, culturally responsive health centre and a community foundation, with the goal of providing equitable health care services for children and families from the school's catchment area, and from neighbouring communities. The SBHC staff included a nurse practitioner, a paediatrician, an off-site consulting physician and a multi-lingual clinic coordinator.

The present qualitative study investigates child, parent, and teacher perceptions of the SBHC, and how children's perceptions changed over time.

This report is based on focus groups in one school with 33 students, divided into two groups (students in Junior Kindergarten to Grade 2 and Grade 3 to Grade 5), conducted in the summers of 2011, 2012, and 2015, in addition to 3 focus groups with 27 parents and one focus group with 8 teachers were carried out in the summer of 2015 at the same school.

What we found

The findings below reflect participants' perspectives of the role of SBHCs in providing physical and mental health care services, families' feelings of comfort, barriers to accessibility, as well as changes in children's experiences of the clinic accessibility and comfort over time.

Physical Health Care Services and Reduced Health-Related School Absences

Children, parents, and teachers shared similar perceptions about the physical health services provided at the SBHC:

- They all highlighted the importance of immunizations, first-aid and referrals to community-linked health agencies that provided services at a reduced or no-cost.
- Two-thirds of the parents reported using the SBHC for immunizations and teachers noted that the clinic helped children stay in school, reduced absenteeism and prevented related suspensions.

"If you feel really sick, you can go there and you can get kind of better."

– Student, JK-Gr. 2, 2011

"It took six weeks just to get the birth registration forms so without the clinic here I would have had to wait two months before my son would start school.

So, he would have missed half of his JK." – Parent, 2015

"Like we've said before, I've had kids go for shots and be back in class 10 minutes later where they would normally miss an entire day of school."

– Teacher, 2015

Mental Health Services

- The majority of teachers and almost half of parents expressed their need for more in-school mental health support and even the need for an on-site psychologist.
- Teachers shared that students, even as young as four years old faced challenges related to anger, abuse, anxiety, sadness and frustration.
- The parents expressed the need to decrease the stigma around mental health and raise awareness about the importance of mental health.
- Parents had confidentiality concerns around their children's mental health and teachers also expressed this.

"In the area of mental health, children's mental health, for me, number one wish. We have a huge need for more attention to that." – Teacher, 2015

"We have grade ones telling us, 'I'm not allowed to talk about it' if something happens at home. Their parents have warned them." – Teacher, 2015

"You have somebody in the school who is working with these children ... they [children] actually are normal. But they [children] don't need a needle, they need someone to talk to them or they need someone to put them in some kind of direction." – Parent, 2015

Enhanced Comfort and Sense of Community

- Parents shared that the SBHC was a part of their school community and a comfortable place to access services. The parents and teachers highlighted the importance of the SBHC staff and the role of the welcoming and culturally sensitive nurse practitioner and clinic coordinator in raising community awareness and meeting with families to understand their needs and priorities.
- All participants shared positive perceptions of the SBHC staff.

"My mom went to the clinic because she has arthritis, she felt safe being there."

– Student, JK-Gr. 2, 2011

"It's like this school has become a village itself.... So, it's more than convenience, it's just a part of building a community." – Parent, 2015

"We come in here with [nurse practitioner] and she says, "Oh hi I just saw you last month. How are you?" She actually knows what's going on because she knows her patients. So that was quite the difference." – Parent, 2015

"The clinic coordinator is fabulous. Very flexible, gets back to you right away and is very helpful to families." – Teacher, 2015

Provincial Health Insurance Plan: Barriers to Accessibility

- Students, parents and teachers shared about the value of the SBHC in providing accessible health care for families who lack OHIP financial coverage, particularly for newcomers including recent immigrants and refugee claimants.
- Teachers shared about the large number of refugee claimants at the school and advocated for the importance of timely medical help.

The SBHC is "free for everyone, even if people that are not in this school, they can still go there." – Student, JK-Gr. 2, 2015

"It [SBHC] was closed so I tried to take her to the nearest walk-in clinic but they said she doesn't have any medical coverage and they couldn't see her. So, I was forced to treat her at home." – Parent, 2015

"They couldn't take her to the doctor. They were giving antibiotics from a family member. Like they are medicating her themselves. Because they had no choice." – Teacher, 2015

"The sooner you get to some problems, the less expensive they become." – Teacher, 2015

Changes over Time in Children's Perceptions of Comfort and Accessibility between 2011, 2012, and 2015

- Over time, the SBHC was perceived as a comfortable and child friendly place, with children (and parents) particularly appreciating the staff and age-appropriate waiting area.
- Accessibility of the SBHC improved over time, reflecting an increase in utilization, with a four-fold increase in student appointments from 2011-2013¹³.
- Improved operations and programming of the SBHC along with children's increased recognition of the SBHC as an essential part of their school community over time may have contributed to improvements in accessibility.

"I think they should have an open sign even if they don't use the announcements. If you are walking down the hall, and you want to go to the clinic, you know that you can." – Student, Gr. 3 – 5, 2011

"They should open the doors in the summer time, if get hurt in the summer time, I don't want to walk all the way to my doctor's office – if I can just come here." – Student, Gr. 3-5, 2011

"Because when you get hurt they will make you feel better." – Student, Gr. 3-5, 2012

"You can be comfortable there because it is quiet, not too loud." – Student, Gr. 3-5, 2012

"They give you a treat." – Student, JK-Gr. 2, 2015

"I was actually [there] two times. This was in here too. I have to check my whole body. A specialist came in and they had to check my whole body." – Student, Gr. 3-5, 2015

Implications for School Health

- SBHCs show great promise in increasing health equity in Canada, especially for underserved populations including newcomers and culturally diverse families, among other marginalized groups.
- The SBHC contributed to a sense of community, provided timely health care and improved access for families who experienced barriers related to language and culture, transportation, knowledge of services in Canada, health insurance coverage and cost of health care.
- Teachers and parents pointed to the need for a focus on mental health in school-based health services, not just physical health.
- Parents expressed concern around self-disclosure, identity protection and confidentiality in accessing the SBHC. SBHC staff should further clarify and reassure parents about these.
- Families appreciated the child-friendly SBHC waiting area.
- Participants pointed to the strengths of the nurse practitioner, clinic coordinator, paediatrician model, with professionals working together to offer coordinated, culturally competent and proficient health services.
- It is important to value the voices of children as key stakeholders in their health and educational experiences.

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