A Brief History of School Nursing in America

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School Nursing

Preface:
As this history of school nursing is being written in September, 2020, America is experiencing the COVID-19 pandemic. The federal government response to the Pandemic was questionable and left each states response up to the Governor and state’s Department of Public Health to follow the Center Disease Control (CDC) guidelines. When the Pandemic intensified in early 2020, many states closed their schools in March and sent students home. Parents or other adult caregivers became responsible for teaching their children. Virtual lessons using the Internet, where possible, were provided but many students in poor neighborhoods or rural areas with good Internet access were left out.

Prior to the pandemic, many school nurses were already overwhelmed. The CDC recommendation calls for schools to have one nurse for every 750 students; however, in 2020 only around 40% of school districts in the United States actually met this recommendation, according to the National Association of School Nurses. Many districts have only one nurse...
shared between multiple schools. A full quarter of schools have no nurse at all.

According to Gloria Barrera ii, in any ordinary school year, school nurses are busy. This year, [2020] she writes, that’s an understatement.

“School nurses across the country face an unenviable and unprecedented task: caring for students and staff during a global pandemic. "We were at the front line of COVID-19 before the stay at home orders were put into place," says, the president-elect of the Illinois Association of School Nurses. They'll be at the front line again, she says, as the school year begins.”

According to Stacey Rubin, author of “How School Nurses Are Critical in Back-to-School Planning Amid COVID-19”iii:

School nurses bring a broad set of skills and experience in the monitoring of student and staff wellness, and they’re a critical resource as K-12 leaders plan to reopen schools amid a global pandemic. They are charged with maintaining the health of the entire school community, and they’re experienced in planning and providing care for students with special healthcare needs.

“And so as the pandemic continues its rampant spread, children’s education is shaping up to be yet another avoidable tragedy of America’s dismal response. Without in-person schooling, the economy will remain stalled, families will lack crucial support, kids will fall further behind, and inequality will deepen. But until the virus is under control, many school districts say, there’s just no other way.iv

History of School Nursing

Introduction
According to Allensworth, the "modern school health era" began in 1850 when the Sanitary Commission of Massachusetts, headed by Lemuel Shattuck, produced a report that had a significant impact on school health and has become a classic in the field of public health.v

“Every child should be taught early in life, that, to preserve his own life and his own health and the lives and health of others, is one of the most important and constantly abiding duties. By obeying certain laws or performing certain acts, his life and health may be preserved; by disobedience, or performing certain other acts, they will both be destroyed. By knowing and avoiding the causes of disease, disease itself will be avoided, and he may enjoy health and live; by ignorance of these causes and exposure to them, he may contract disease, ruin his health, and die. Everything connected with wealth, happiness and long life depends upon health; and even the great duties of morals and religion are performed more acceptably in a healthy than a sickly condition”.

The era of school "medical inspection" began in earnest at the end of the nineteenth century. In 1894, Boston appointed 50 "medical visitors" to visit schools and examine children thought to be
"ailing." By 1897, Chicago, Philadelphia, and New York had all started comparable programs, and most of the participating medical personnel provided their services without compensation. vii

Beginning of School Nursing in America

In 1897, New York City hired 150 physicians to inspect students for common contagious diseases such as head lice, impetigo and tuberculosis. Children were sent home with a note stipulating the pupil could not attend school. However, not having to attend school meant to the children that they were ‘free’ to play with other children in their neighborhood thus spreading contagion.

Nurses working at Henry Street Settlement realized that medical inspection by the physician was “deficient from the stand point of the child, in that it excluded him, but did not advise nor treat him, neither was he looked after.” Their practical suggestion was that a nurse should work with the physician, carry out his orders for the treatment of simple cases, without excluding them from school. More serious cases should be followed by a visiting nurse in their home. As a result Lillian Wald offered to supply a nurse for one month without cost. Miss Lina Rogers viii was selected to initiate this service. ix The experiment began on October 1, 1902. In her first month Rogers treated 893 students, made 137 home visits, and helped 25 children who had received no previous medical attention recover and return to school. x

Nurses from the Henry Street Settlement visited families treating the affected child and educating their families. Community organizations helped children who remained out of school not due to illness, but to lack of food or clothing. The nurses also sought out the many older children who stayed home caring for younger siblings while parents worked. Within six months, absenteeism fell by 90 percent, and the school board agreed to supply funds for 27 nurses. By 1914, there were close to 400 nurses in the schools of New York City. Other towns followed quickly; Los Angeles hired its first in 1904. xi

The advent of the school nurse brought a radical change in methods of dealing with diseased children. Instead of excluding and neglecting them, they were treated by the school nurse. School nurses visited their homes to instruct parents and caregivers in care for the child’s problems as well as how to protect the other children. xii
As a school nurse Lina Rogers advocated for wellness and illness-prevention programs, and encouraged teachers to present lessons in hygiene, nutrition and physical development. She also implemented dental and hearing screenings in the schools. She developed formal protocols for individual diseases and rigorous documentation of nursing interventions to bolster evidence that school nurses were effective. First textbook for school nurses in 1917 -published under her married name – Lina Rogers Struthers- *The School Nurse: A Survey of the Duties and Responsibilities of the Nurse in Maintenance of Health and Physical Perfection and the Prevention of Disease Among School Children.*

![Figure 1-Lina Rogers RN treating child for an eye infection](image)

One important outcome of school health education was the emphasis on the policy of prevention. School nurses taught children about the harmfulness of disease and their responsibility of preventing its spread. Health education became the basis of all school health work. (Struthers - xvii)

The prevalence of tuberculosis in the United States had a significant impact on school health during the early part of the century. Particularly notable was the development and spread of "open-air classrooms"—wide open to the outside air, even in the middle of winter—in all major cities, under the . In 1915, the National Tuberculosis Association enlisted school children in the Christmas Seal drive. A child who bought or sold 10 cents worth of seals was enrolled as a "Modern Health Crusader" and received a certificate with four "health rules. Supervision of both medical and education personnel Crusaders also kept a personal record of how well they carried out 11 daily "health chores." xvii

<table>
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<tr>
<th>The list of these health chores gives a revealing look at what were considered to be significant health issues for children in that era. These daily chores were as follows:</th>
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<tbody>
<tr>
<td>1. Wash hands before each meal; clean fingernails.</td>
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<td>2. Brush teeth after breakfast and the evening meal.</td>
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<td>3. Carry handkerchief and use it to protect others when coughing or sneezing.</td>
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<td>4. Avoid accidents; look both ways when crossing the street.</td>
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<td>5. Drink four glasses of water, but no tea, coffee, or any harmful drink.</td>
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<td>6. Eat three wholesome meals; drink milk.</td>
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<td>7. Eat some cereal or bread, green (watery) vegetable and fruit, but no candy or &quot;sweets&quot; unless at the end of the meal.</td>
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<td>8. Go to the toilet at regular times.</td>
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<td>9. Sit and stand straight.</td>
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<td>10. Spend 11 hours in bed, with windows open.</td>
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<td>11. Have a complete bath and rub yourself dry</td>
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School Health WWI to 1960’s

“The advent of the war made the problems of poverty such as malnutrition, poor physical condition, and the poor state of the health and welfare of many of the country's children visible. New health promotion philosophies and movements began to spring up to replace the outmoded methods; these new approaches were based on using motivational psychology and an understanding of behavior. During the years immediately following World War I, the image of modern school health programs began to emerge.”

Physical training – gymnastics – also began to be introduced into schools. School-based medical and dental clinics sprang up to provide services, especially to indigent students.

Author’s note: My husband and I both were born in Rochester, New York during the great depression of the 1930’s. Schools offered free dental care through the Eastman Dental Dispensary until well after WWII. Dental therapist students would set up their equipment – usually in the gym and would clean teeth, while dental students would check for cavities and treat these.

1905: The Dental Dispensary is opened by the Seventh District Dental Society of New York in conjunction with the Rochester Public Health Association on 32 South Washington Street. Captain Henry Lomb of Bausch and Lomb donates $600.

1910: Leading dentists of the day re-establish the dental clinic at School No. 14.

1915: George Eastman donates the funds on October 13 to build the Rochester Dental Dispensary.

"The main object in mind when the Dispensary was founded was the care of teeth of children in Rochester and its vicinity...I did not foresee that it might have an opportunity to become a part of a greater project for a higher grade of dental education than had before been attempted." Yours very truly, George Eastman.
My husband also recalled that, his school nurse Mrs. Virkus took students to Iola Sanatorium for X-Rays to check for tuberculosis – he remembers the long bus ride as Iola was located in rural Monroe County.

**School Health from the 1960s to the Present**

With the advent of the Great Society programs in the 1960s, the education and health scene experienced another major change. The Great Society and War on Poverty programs marked a new level of federal involvement in the schools and made new health and social services funds available. Relevant legislation passed in the 1960s and 1970s included Head Start, Medicaid, the Elementary and Secondary Education Act, the Community Health Center Program, the Education for All Handicapped Children Act, and the Child Nutrition Act that established the School Breakfast Program and the Nutrition Education and Training Program, and permanently authorized reimbursements for school lunches served to needy students.

Beginning in the 1950s and 1960s mental, social, and emotional health became issues, and schools began to attempt to deal with delinquency, narcotic addiction, and the inability of students to adjust to the regular school environment. The most significant school health education initiative of the 1960s was the School Health Education Study.

The National Nursing Coalition for School Health, was formed with representatives from the American School Health Association, the American Nurses Association, the National State School Nurse Consultants Association, the American Public Health Association, and the National Association of School Nurses; in 1994 the coalition convened a national conference to examine future issues and priorities in school nursing (Source National Nursing Coalition for School Health, 1995).

The National Association of School Nurses (NASN) history states:

“On July 4, 1968, the National Education Association established the Department of School Nurses (DSN), an association dedicated to the advancement of school nursing practice and the health of school-age children. In July of 1969, the DSN held their first annual meeting in Philadelphia. Their ultimate purpose was to improve the quality of school nursing, to upgrade the skills of school nurses and to further the abilities of all children to succeed in the classroom.
A nationwide survey sent later that year, specified that the number one goal of the DSN was the establishment of school nurse credentialing standards in all states. Over the next few years, this goal was accomplished state by state. Throughout the 1970's, each state established its own school nurses association under the umbrella of the Department of School Nurses. In 1974, President Ford proclaimed the fourth Wednesday in January as National School Nurse Day. School nurses are now nationally recognized and celebrated for contributing to the health and well being of the nation's students. “xxii

**NASN’s Definition of School Nursing**

“School nursing, a specialized practice of nursing, protects and promotes student health, facilitates optimal development, and advances academic success. School nurses, grounded in ethical and evidence-based practice, are the leaders who bridge health care and education, provide care coordination, advocate for quality student-centered care, and collaborate to design systems that allow individuals and communities to develop their full potential. Adopted by the NASN Board of Directors February 2017”xxiii

![Healthy Children Learn Better. School Nurses Make it Happen.](image)
References

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t https://www.npr.org/2020/07/31/896767422/overwhelmed-stressed-scared-school-nurses-brace-for-the-fall-semester

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v Allensworth. Diane, Elaine Lawson, Lois Nicholson, and James Wyche, Editors; Committee on Comprehensive School Health Programs in Grades K-12, Institute of Medicine Schools and Health: Our Nation's Investment, 1997 ISBN: 0-309-57858-2,

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vii Ibid


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xi Hanink, Profiles in Nursing Lina Rogers, the First School Nurse Providing healthcare to keep kids in school https://www.workingnurse.com/articles/lina-rogers-the-first-school-nurse


xiii Ibid

xiv San Diego County Office of Education School Nursing 2013

xv Struthers op.cit.

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xviii Ibid p 38

xix Sources https://www.urmc.rochester.edu/dentistry/centennial.aspx; https://www.urmc.rochester.edu/dentistry/about/history.aspx

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xxii https://www.nasn.org/nasn/about-nasn/about/our-history

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