

School-Based Health Centers and Mental Health During a Pandemic: A Qualitative Analysis of SBHC Coordinators and Educator Partners

Presenter: Kaitlin Yeomans,
PhD student

First author: Suzy Fly

Co-authors: Rachel
Springer, Xuan Dinh,
Aly Nestler, Kaitlin
Yeomans, Dara Shifrer

Acknowledgements



This research is supported by the **Spencer Foundation** (202000237) and the **National Institutes of Health funded Build EXITO** program at Portland State University (UL1GM118964).



This paper benefited from suggestions from Erika Carpenter, Andy Saultz, Haley Simons, Caitlin Kearney, Anna Grape, and Thad Domina






Literature Review

- ❑ WHAT ARE SBHCs?
- ❑ MENTAL HEALTH AS A MAIN PRIORITY
- ❑ PANDEMIC HEIGHTENS MENTAL HEALTH NEEDS
- ❑ PANDEMIC HINDERS SBHC OPERATIONS



What are SBHCs?

- ❑ Health centers that operate within or near a public school that engage students with health concerns, mental health counseling, reproductive care, and community referrals
 - ❑ sponsored and operated by local health care organizations (e.g., hospitals, healthcare organizations)
 - ❑ 51% of US SBHCs are designated as Federally Qualified Health Centers (FQHCs)
 - ❑ community-based health care providers that receive funding from the Health Resources and Services Administration to facilitate the provision of primary care services in under-resourced communities

Mental Health as Main Priority

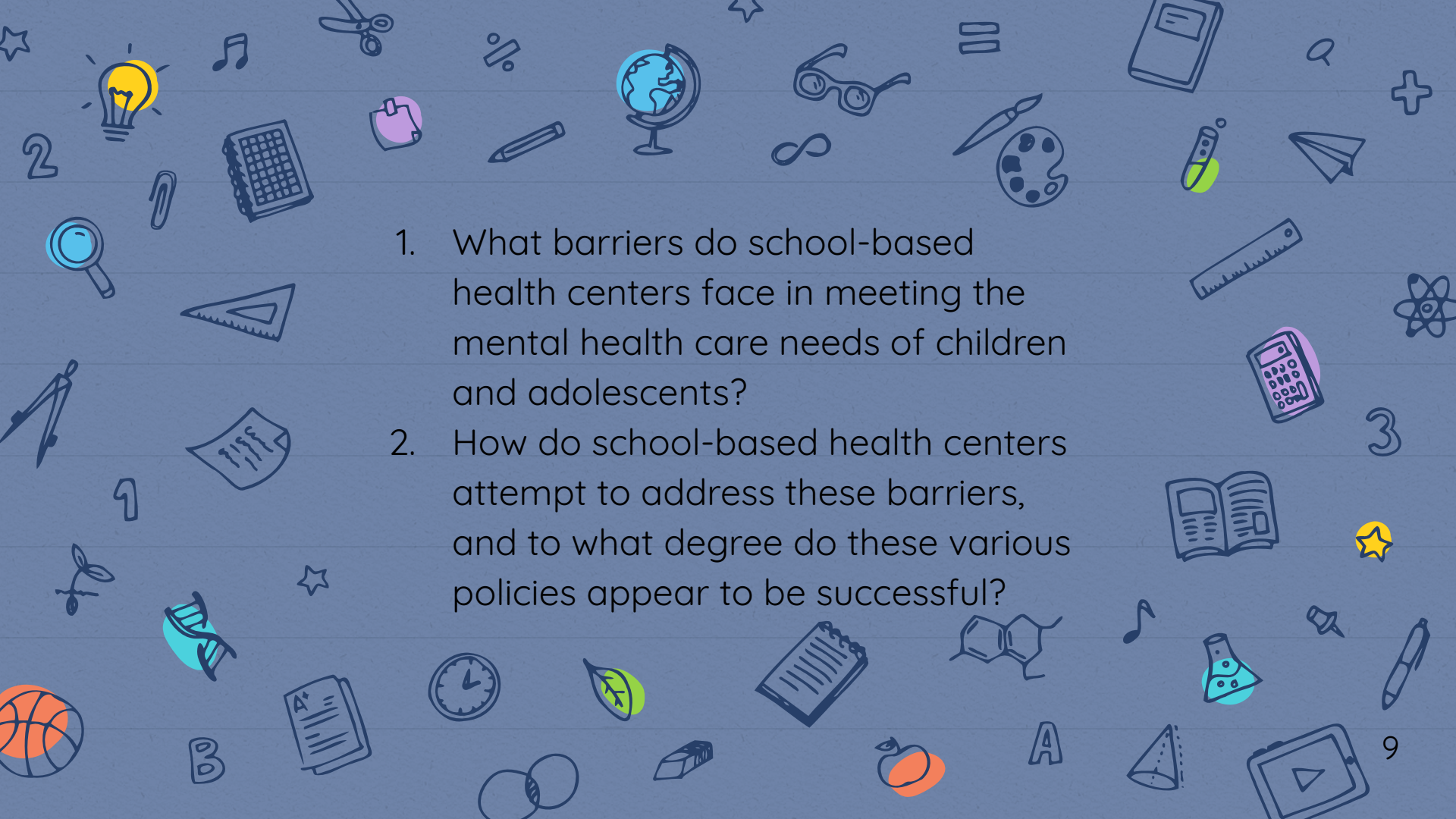
- ❑ In 2019, **13 percent** of adolescents reported having a major depressive episode
 - ❑  60% from 2007.
 - ❑  Emergency room visits by children and adolescents also rose sharply for anxiety, mood disorders, and self harm.
 - ❑  60% increase in suicide rates in people 10-24 years old in 2018 (compared to 2000-2007)
- ❑ In December of 2021, the U.S. surgeon general warned of a **“devastating” mental health crisis amongst adolescents.**
- ❑ Schools are scrambling to respond to academic and mental health crises

Pandemic Heightens Mental Health Needs

- ❑ Shift to online education disrupted adolescents in crucial stages of socioemotional development
- ❑ Significant increases in anxiety and stress among youth
 - ❑  5.7%-68.5%
- ❑ Students accessed behavioral health services at SBHCs at higher rates than prior to the pandemic
 - ❑  12.3% (48.8% compared to 36.5%)

Pandemic Hinders SBHC Operations

- ❑ Nearly all SBHCs reported a shift to providing increased primary and behavioral telehealth immediately following school closures, and very few reported closing permanently.
- ❑ Following school closures in spring 2020, eight out of 10 SBHCs that remained physically open offered primary care via telehealth, and SBHCs that did not offer telehealth at this time were more likely to close temporarily.
- ❑ The telehealth delivery modality may have supported continuity of operations.

- 
1. What barriers do school-based health centers face in meeting the mental health care needs of children and adolescents?
 2. How do school-based health centers attempt to address these barriers, and to what degree do these various policies appear to be successful?

Data

- ❑ Recruitment
- ❑ Collection
- ❑ Analysis

Data: Recruitment

- ❑ Research team members attended OHA annual meeting (via Zoom) of Oregon SBHC Coordinators to advertise study in February 2021
- ❑ Initial survey provided to 34 SBHC coordinators, who were directed to schedule an interview
- ❑ Expanded to include educator partners, school staff that were identified as strong points of contact for coordinators
- ❑ **36** total interviews (**17** SBHC coordinators; **19** educator partners)

Data: Collection

- ❑ Interviews lasted 30 min - 60 min; the average interview lasted 30 minutes
- ❑ Audio-recorded (with participants' permission) and transcribed using Zoom function, edited for clarity by interview team
- ❑ All participants received a \$70 gift card for their time

Data: Analysis

- ❑ Themes coded in Dedoose using a primarily deductive logic
- ❑ Participant de-identified signifiers are numbers (e.g., 303)
- ❑ 3 main themes
 - ❑ Resources
 - ❑ Stigma
 - ❑ Access

Results

- Resources
- Stigma
- Access

Resources

“We can’t seem to keep any mental health providers, but our other services have been up and going. I mean as a...**we’re in an epidemic, unfortunately, right now, with mental health and we can’t find anyone to help**[...]The beginning of the year, we did have a mental health provider, so they were booked solid right from the beginning.” (436)

- ❑ Data indicates that SBHCs faced staffing shortages due to the pandemic
- ❑ In addition, mental health services are widely sought after, but are rare due to labor shortages
- ❑ The pandemic exacerbated underlying issues with staff and labor shortages at SBHCs

Resources

“When things get more intense we need those external providers or we need a lot more funding to provide every single necessary resource, but that’s not necessarily a health center thing; that’s a much larger community needs. And I think that’s kind of a frustrating thing is like when you’re serving this the students and you see where every gap and service is you feel obligated to try to fill up but **it’s not just a health centers type thing to figure out, it is a much larger community, county, state, national level need and it’s not there**” (457)

- ❑ While SBHCs received more funding during the COVID-19 pandemic via grants, need was still not met
- ❑ Microcosm of a larger issue at the county, state, and national levels
- ❑ Problematic as SBHCs provide many services for communities that may not have access to certain types of healthcare (psychiatric, reproductive etc.)

Stigma

“I feel like that [mental health] stigma is going away but definitely school based health center is-has the stigma of like oh that’s where you go to get birth control, like you’re either **laughing** “slutty” or you’re “crazy” if you come out here[...]So, **I do think stigma is an issue** [...]” (315)

“...like if they have very conservative parents, a lot of times **they will not use the school based health center because their parents have told them “no”** even though they’re at an age where they can access care on their own” (303).

- ❑ Participants tended to agree that mental health stigma was on a downward trend
- ❑ However, parental and peer stigma still prevents students from accessing care at SBHCs
- ❑ Parents can play a large role in students’ comfort level with accessing SBHC services

Stigma

“One, one way we’ve tried to address that [stigma] with health centers is—the mental health providers are in there, but there could be lots of different reasons that you’d go to the one of our health centers including getting your teeth cleaned just checking in, having a sports physical. Or could be seeing a mental health therapist and **so people other people don’t know why you’re going in health center it could be for lots of different reasons and that’s been helpful.**” (327)

- ❑ SBHC staff are aware of issues with stigma
- ❑ Stigma can be mitigated by associating more than mental healthcare or reproductive healthcare with the SBHC
- ❑ Helpful in promoting student use of SBHCs

Access

“You know, we saw a decrease for a while um just because kids were at home, they didn’t want to—they weren’t as, what’s the word I’m trying to say...they didn’t want to interact as much. Um I know that we did a lot more outreach like calling them, and trying to go see them, **but a lot of people did not want like their parents to know that they were getting mental health services.** So, um that was a little bit more of a challenge.” (303)

- ❑ Telehealth moved the location of services to the home
- ❑ Students were uncomfortable accessing mental health services in close proximity to parents and family
- ❑ This resulted in a decrease in SBHC service utilization at the beginning of the pandemic (despite overall increase in SBHC use as the pandemic continued)

Access

“Stigma is a big one, especially being in a small town and being right across the street from the school...I know I’ve heard high school kids go “oh I don’t want the kids on the playground to see me coming out of the clinic”...Now that we offer Zoom that has been super helpful, so if we have a student that I know that has those feelings, we will offer as much as we can, through Zoom.” (342)

- ❑ The pandemic precipitated a switch to telehealth for many providers, SBHCs included
- ❑ Zoom offers a way for students to access SBHC services without their peers knowing
- ❑ Many SBHC staff reported that telehealth would remain an option for students, even as schools begin to open to in-person education

Discussion

- ❑ SBHCs are chronically underfunded and understaffed
- ❑ Grants from supporting institutions, while helpful, are only a band-aid solution
- ❑ Despite increase in mental health issues and awareness during the pandemic, mental health is still stigmatized
- ❑ SBHCs try to mitigate this stigma by offering more services (e.g., not “just” mental health or reproductive health)
- ❑ Telehealth simultaneously increased access and decreased access to SBHC services
- ❑ Less peer stigma, but more parental stigma

Further research...

- ❑ Examine ways in which SBHCs can be **better supported by their funding partners**
- ❑ Assess how SBHCs can contribute to **more awareness about mental health**
- ❑ Investigate deeper into **stigma management strategies** with a focus on privacy for students accessing both in-person and telehealth services

Thank you!

Suzy Fly (first author):

sfly@pdx.edu

Kaitlin Yeomans (presenter):

kry@pdx.edu