New Hampshire
School Nurses' Association

Leading ~ Advocating ~ Educating

"Anything But Run of the Mill: Public Health Resources for School Nurses"

November 3, 2026

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DESIRED LEARNING OUTCOMES:



- ❑ Why student health matters for learning and success.
- ❑ How NH school Districts are performing against the "Vital Signs of Pediatric Health".
- ❑ Public health resources for school nurses.





What are the top health conditions that you see among students and families as a school nurse?

WHY STUDENT HEALTH MATTERS FOR LEARNING AND SUCCESS

Research shows a strong connection between healthy behaviors and academic achievement (such as grades, standardized tests, graduation rates, attendance). **Higher educational attainment is strongly associated with longer life expectancy and better overall health.** In the United States, college graduates live on average 11 years longer than individuals without a high school diploma, largely due to better income, access to health insurance, healthier behaviors, and reduced exposure to stress and environmental risks such as:

- Healthy **dietary behaviors** are connected to students with higher grades.
- **Physical activity** is connected to students with higher grades.
- Compared to students with lower grades, students with higher grades are less likely to **watch television** for 3 or more hours per day or **play video games** or use a computer 3 or more hours per day.
- Compared to students with lower grades, students with higher grades are less likely to use **tobacco or electronic vaping products.**
- Students with higher grades were less likely to **use alcohol**.
- Compared to students with lower grades, students with higher grades are more likely to get **8 or more hours of sleep** and receive **dental care**.

A Day in the Life of Your School Nurse



NASN
National Association of School Nurses

20 minutes saved per day for the Teacher by the School Nurse

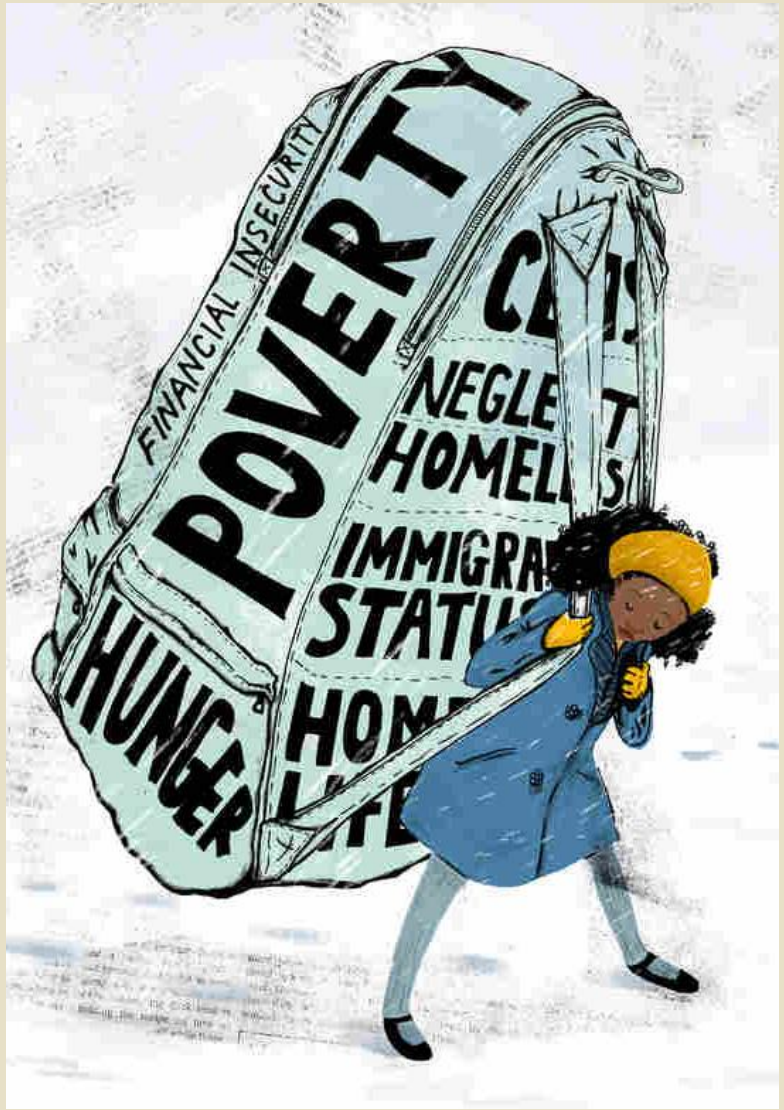
60 minutes saved per day for the Principal by the School Nurse



32% of time is spent by the School Nurse providing mental health services

45 minutes saved per day for the School Clerical Staff by the School Nurse


10 Million students have asthma
18% of students have chronic health conditions
23% of students have pre-diabetes and diabetes
32% of students are overweight or obese
20% of students have a mental disorder
19% of students have food allergies
10% of students lack health insurance
9.7% of students cannot afford healthcare
Immunization rates increase
There are SO MANY REASONS every child deserves a School Nurse.
References: (Basch, Lundeen, & Murphy, 2011; Cohen et al., 2011; Perrin, Bloom & Gortmaker, 2007; Van Cleave Gortmaker & Perrin 2010; Ferson, Fitzsimmons, Christie, & Woodlett, 1995; Salmon et al., 2005; Foster et al., 2005); (NASN, 2010, 2012, 2013, 2014).



CHALLENGES TO A HEALTHY START

- Approximately **50% of New Hampshire third-grade students are below reading proficiency**. In addition, for the 2024-2025 school year, **19% of the State's public school students (n=30,546) had ten half days of unexcused absences** during the school year.
- The NH DOE iPlatform publishes *Free and Reduced School Lunch Eligibility Rates by School* for the current school year. For the 2025–2026 school year, as of October 1, 2025, the statewide average for K–12 public schools was **23.15% of enrolled students (n=36,085) eligible for free or reduced price meals**
- The NH Department of Education collects annual statewide totals from all public and charter schools, and the 2024–2025 statewide **McKinney–Vento totals identified 4,043 homeless students statewide.**
- As of the 2023–2024 school year, 31,469 students in New Hampshire public schools — **about 20% of the total student population — were receiving special education services.**
- In 2024, New Hampshire had **1,328 substantiated child victims of abuse or neglect**, a rate of 5.3 children per 1,000, a 12.4% increase since 2020. Neglect is the most common form of maltreatment accounting for 75% of cases and more than one quarter of all victims are aged two or younger.

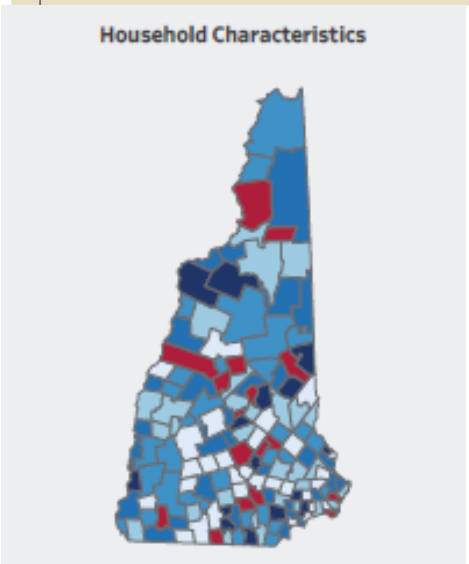
Where You Live Matters …

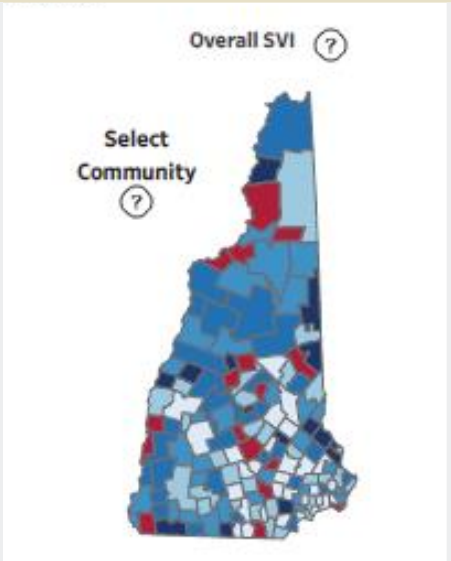
A TALE OF TWO MANCHESTER NEIGHBORHOODS

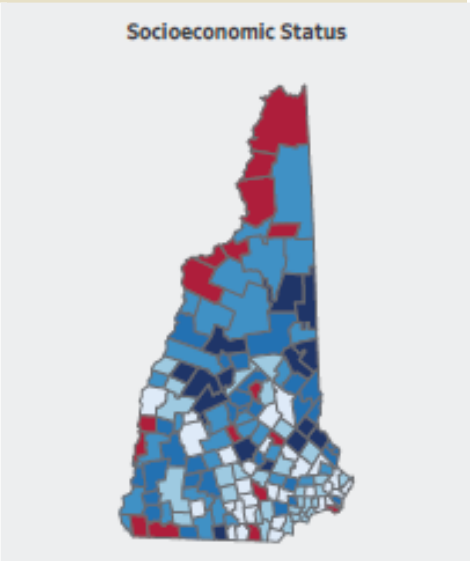
(Less Than One Mile Apart From Each Other)

Community Measure	CENSUS TRACT 15	CENSUS TRACT 7	Total Manchester City	Average of Dashboard Cities
Total Population (2023)	3,440	3,168	115,644	N/A
High School Completion (2023)	59.1%	99.0%	88.7%	89.4%
Life Expectancy in Years (2015 and 2016-2020)	72.1	81.5	77.6	78.7
Food Insecurity (2022)	31.9%	5.7%	13.7%	16.4%
Uninsured (2023)	34.2%	5.0%	10.1%	9.7%
Frequent Mental Distress (2022)	24.6%	13.6%	18.2%	17.1%
Childhood Poverty (2023)	43.1%	2.4%	17.2%	16.8%
Adult Physical Inactivity (2022)	37.2%	13.3%	22.7%	24.5%

Source: U.S. Census, City Health Dashboard, NH Health Data Portal







2024 Lead Poisoning in New Hampshire: What the Data Tells Us

Lead testing rates and percentages of children with elevated blood lead levels varied across New Hampshire's 13 Regional Public Health Networks (RPHNs).

Understanding Prevalence Rates

Approximately 4% of all New Hampshire 1- and 2-year- olds who were tested in 2024 had an elevated blood lead level (EBLL). However, this percentage varied from 1-10% across the RPHNs. In some communities, the percentage was as high as 15%, as shown below.

Claremont: 15%
Franklin: 13%
Rochester: 9%
Central Manchester: 9%
Newport: 14%
Hillsborough: 10%
Downtown Concord: 9%
Southeast Nashua: 7%

The prevalence rate in this map is the proportion of children who were tested that had an elevated blood lead level in 2024.

By way of example, in the North Country RPHN, 63% of the 1- and 2-year-olds were tested for lead. Of those 511 children tested, 43 had an elevated blood lead level of 3.5 µg/dL or higher. This is an 8% prevalence rate.

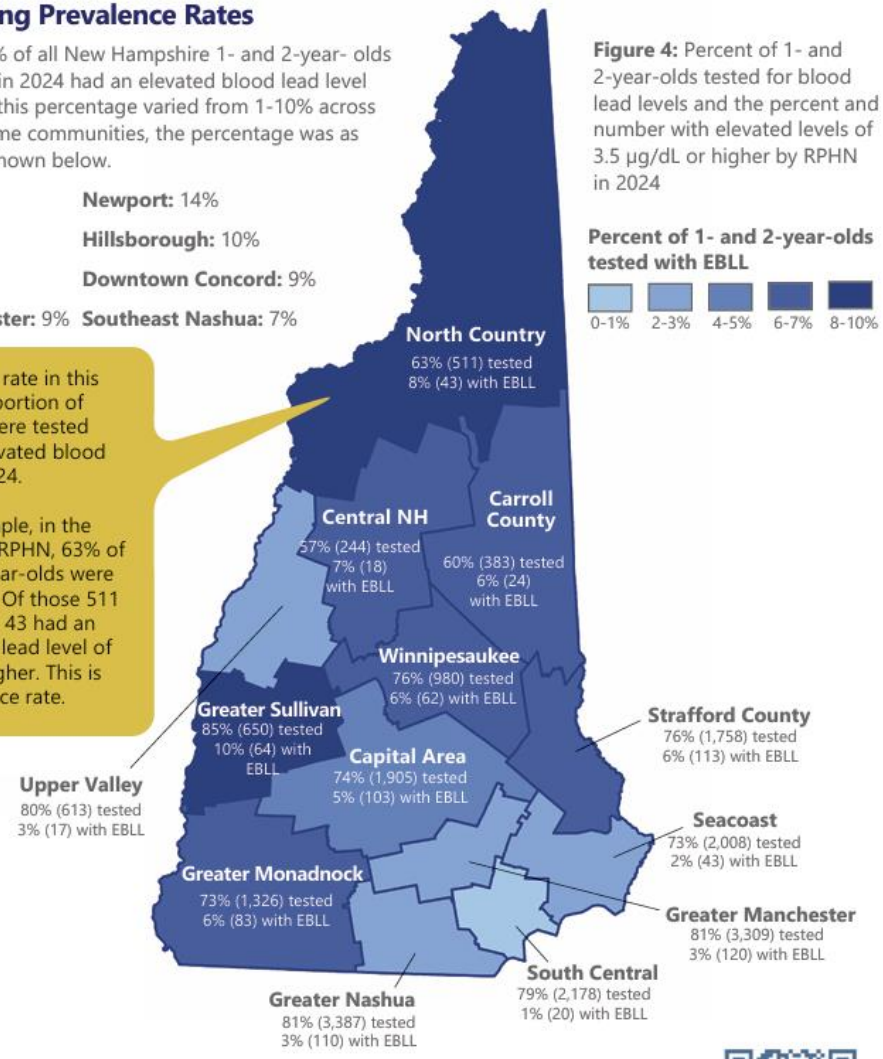


Figure 4: Percent of 1- and 2-year-olds tested for blood lead levels and the percent and number with elevated levels of 3.5 µg/dL or higher by RPHN in 2024

Percent of 1- and 2-year-olds tested with EBLL

0-1% 2-3% 4-5% 6-7% 8-10%

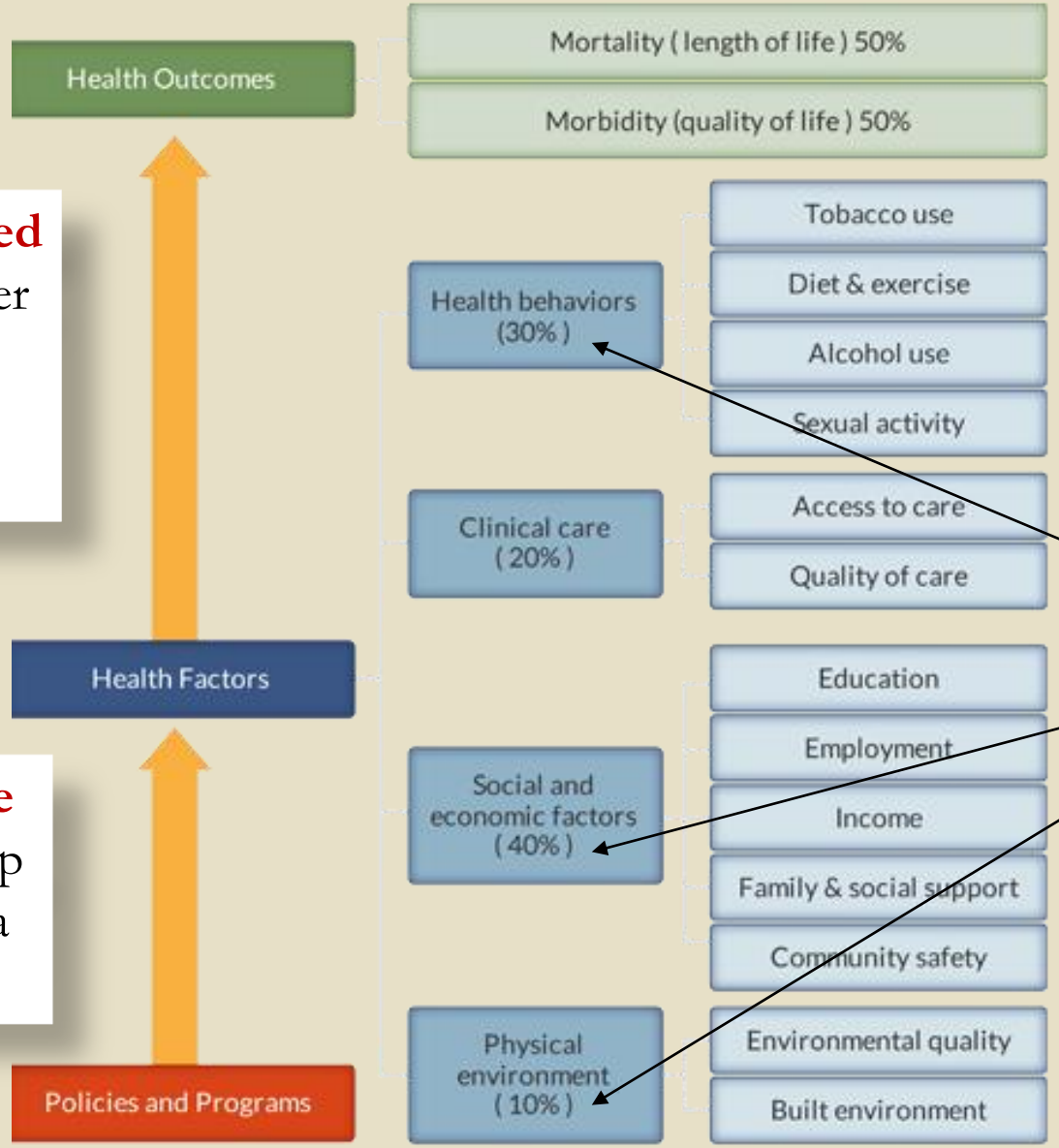
This data brief was prepared by the New Hampshire Department of Health and Human Services, Division of Public Health, Healthy Homes and Lead Poisoning Prevention Program. Support was provided by the Centers for Disease Control and Prevention (CDC) Agreement #NUE2EH001457. Its contents are solely the responsibility of the authors and do not represent the CDC's official views. Please send questions to HHLPPP.data@DHHS.NH.gov. **Scan the QR code or visit wisdom.dhhs.nh.gov/wisdom/topics.html?topic=lead-poisoning to view our data portal.**

MODEL OF POPULATION HEALTH:

How Health is Produced in Communities

"**Attending faith-based services** four times per month will add 4-14 years of life expectancy."

"**Knowing your sense of purpose** is worth up to seven years of extra life expectancy."



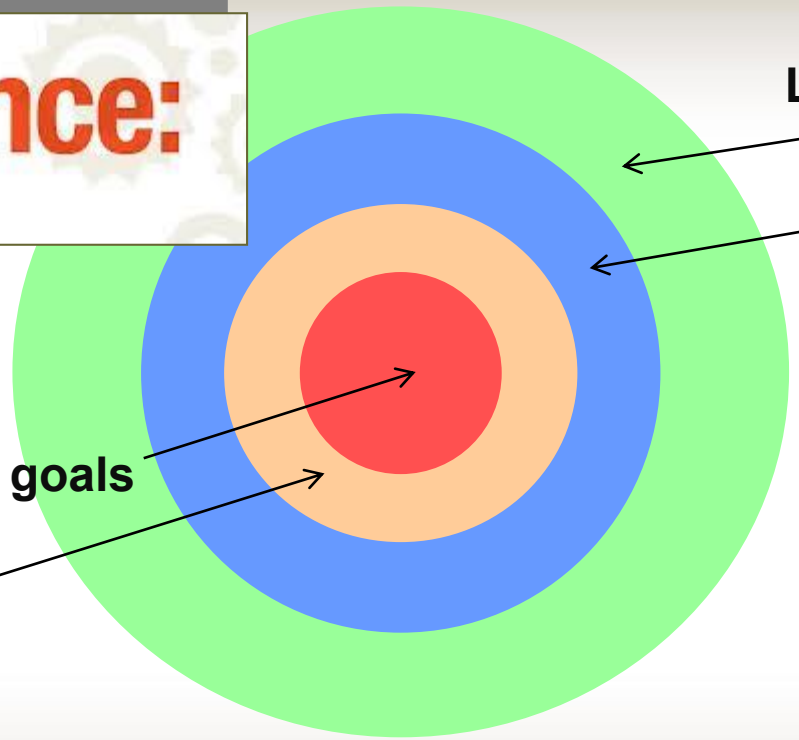
To "move the dot on the graph", **we must focus on the 80%.**

County Health Rankings & Roadmaps
A Healthier Nation, County by County

So What is the Antidote to Adversity?*

"He who has a why can bear any how." - *Dr. Viktor Frankl*

re·sil·ience:
the ability to bounce back when faced with stress or pressure.



LEVEL 4: Sense of purpose beyond oneself

LEVEL 3: Community

LEVEL 2: Family

LEVEL 1: Individual goals

*** The higher the level, the <u>greater</u> your resilience**

SOURCE: Andrew Shatté, PhD, Chief Science Officer, meQuilibrium



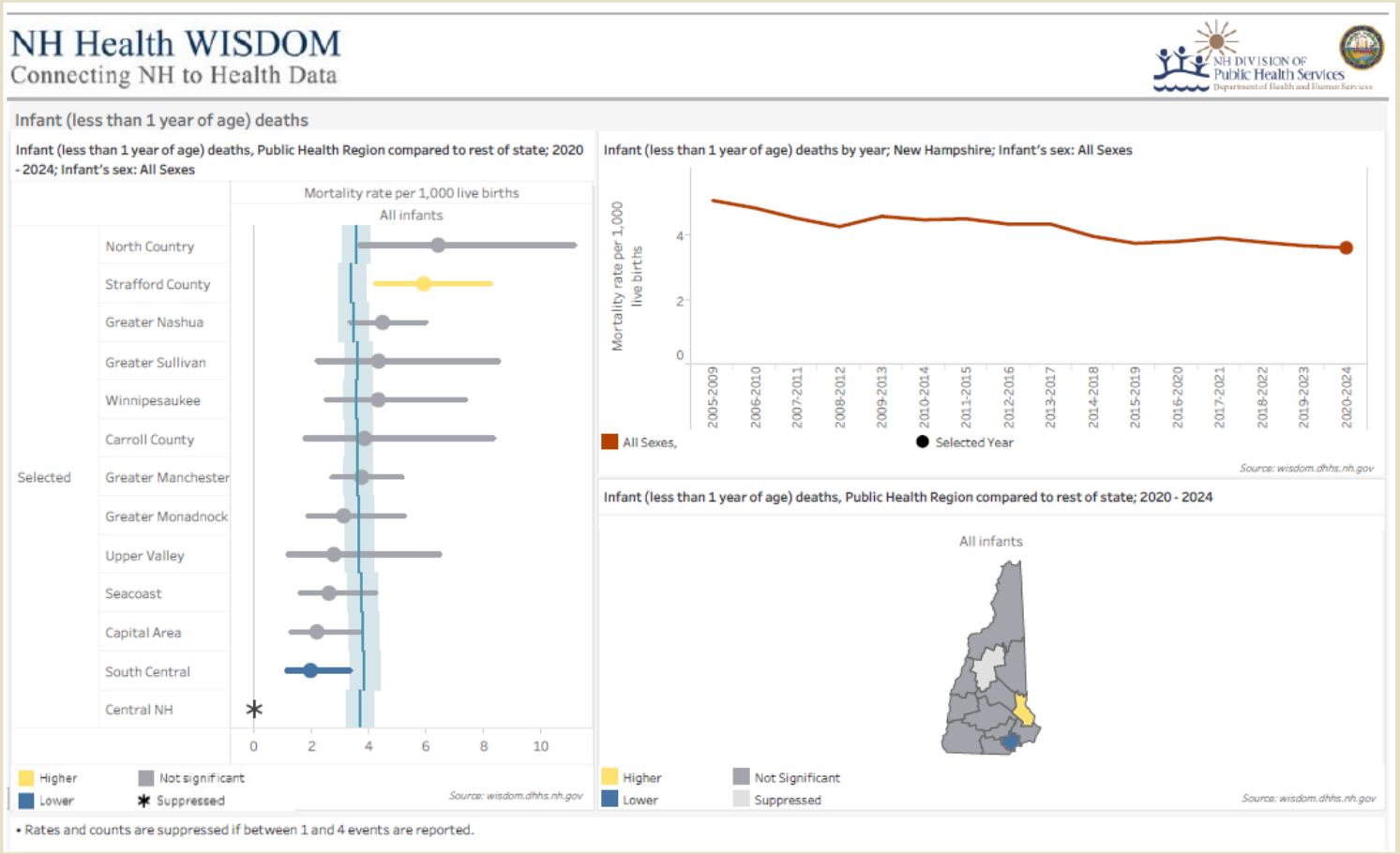
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NATIONAL ACADEMY OF MEDICINE

Four Vital Signs of Pediatric Health

1) **Infant Mortality** – as a measure of the earliest period of life, it is sensitive to improvements in care for both women and children, is associated with other well-being indicators in communities, and reflects health inequities in the community (NAM, 2023).





NATIONAL ACADEMY OF MEDICINE

Four Vital Signs of Pediatric Health (continued)

2) **School Readiness (0-5 Years Old)** – as a developmental target for early childhood, it serves as a comprehensive lens for early development of children across various domains: physical, socio-emotional, language, knowledge, cognition (including early literacy and math), and approaches to learning (NAM, 2023).

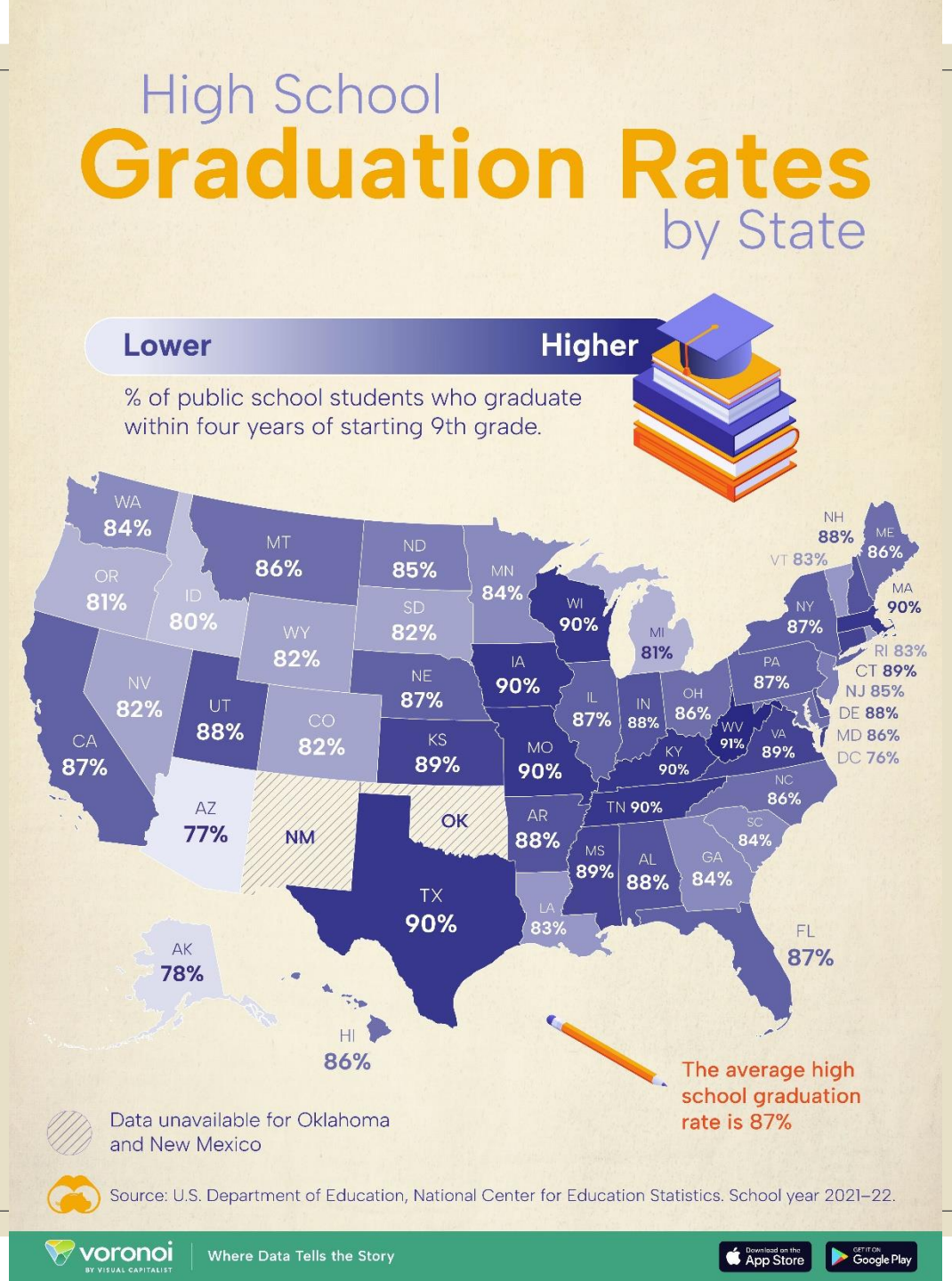
3) **Chronic Absenteeism** – as a developmental target for middle childhood, it has potential utility as a measure from the time children enter formal schooling in pre-kindergarten through grade 12, measuring chronic absenteeism in middle childhood provides critical information about health and well-being between two key developmental stages captured by other vital signs: early childhood, captured by school readiness, and adolescence, captured by high school graduation (NAM, 2023).

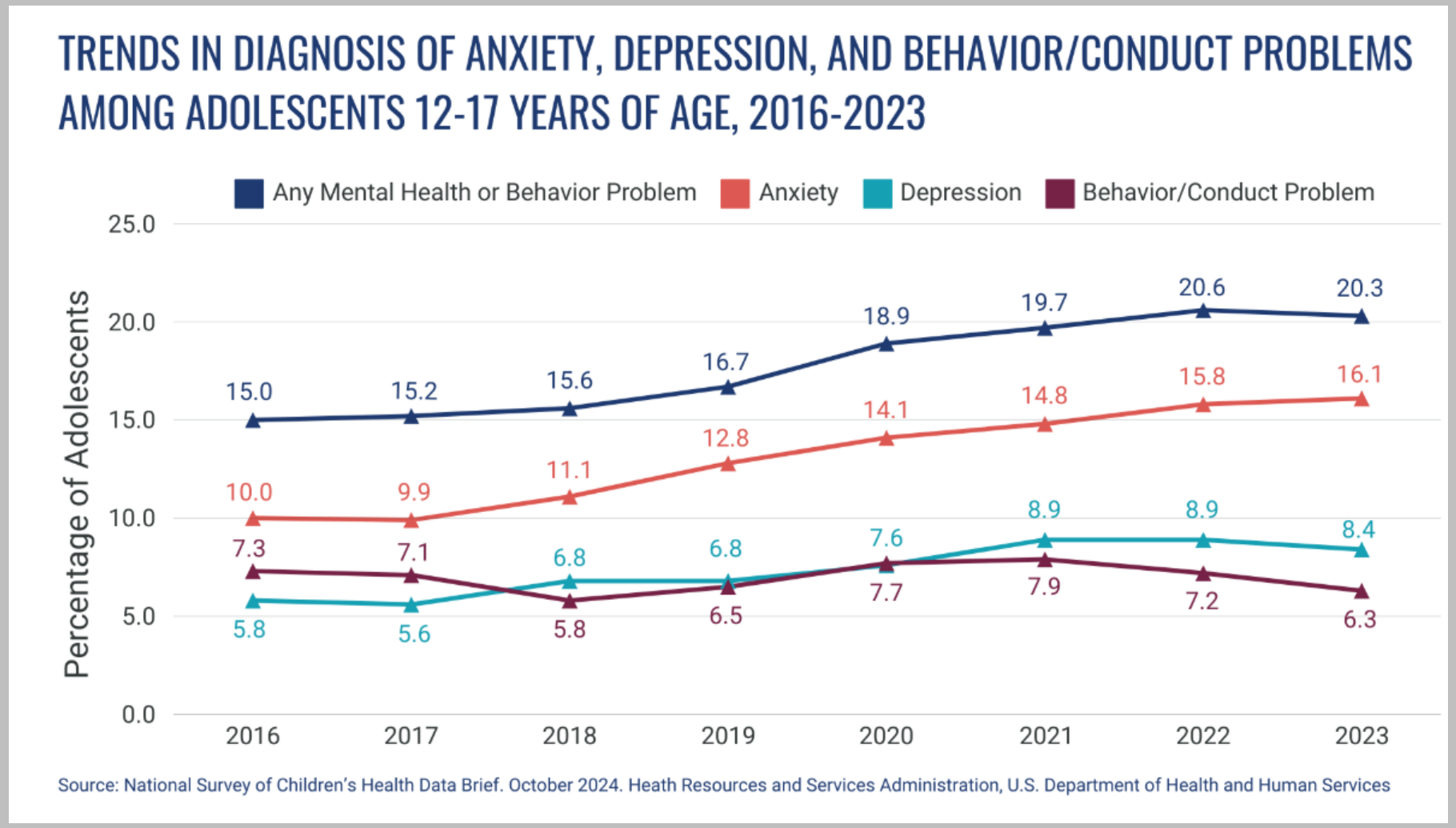
NATIONAL ACADEMY OF MEDICINE

Four Vital Signs of Pediatric Health

4) **High School Graduation** – reflects the degree to which healthy growth and development has been supported through childhood. Earning a high school diploma is a predictor of adult success, including better employment outcomes, better adult physical and mental health, and decreased likelihood of involvement with the criminal justice system (NAM, 2023).







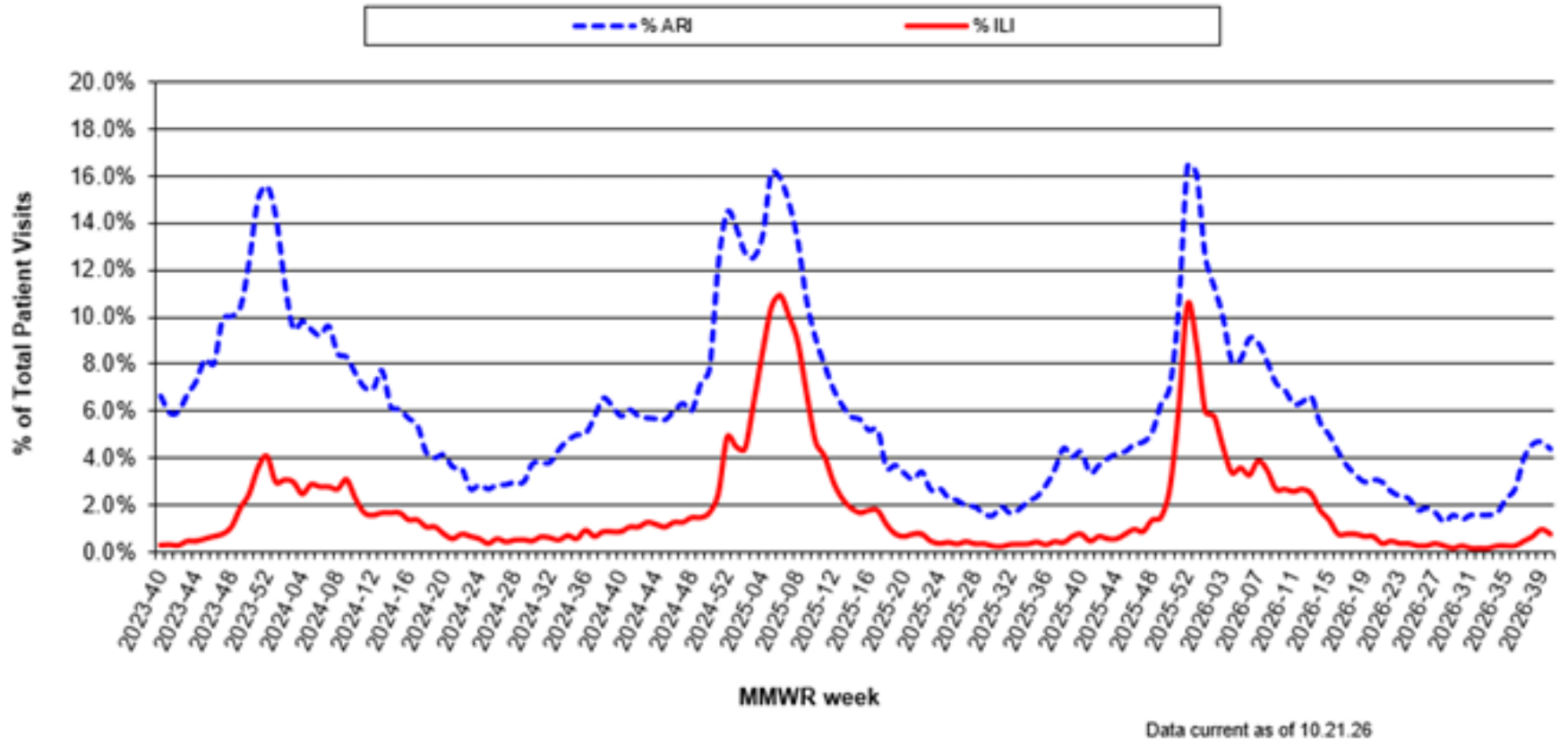
According to the CDC and national school health data, **over 40% of school-aged children and adolescents have at least one chronic health condition.**

Other top examples school nurses encounter:

- **Asthma** – one of the most prevalent chronic conditions, affecting about 1 in 12 U.S. children
- **Diabetes** – Primarily type I
- **Epilepsy**
- **Food allergies**
- **Obesity**
- **Oral health issues**

NH COLD/FLU SEASON CONVENIENTLY RUNS FROM EARLY OCTOBER TO MID-MAY

FIGURE 1: Acute Respiratory Illness (ARI) & Influenza-Like Illness (ILI) By Week



ARI: acute respiratory illness; ILI: influenza-like illness

Department of HEALTH & HUMAN SERVICES | Division of Public Health

2025-2026 Annual School Immunization Report

Figure 2: Student enrollment, immunization status, and exemption counts by county

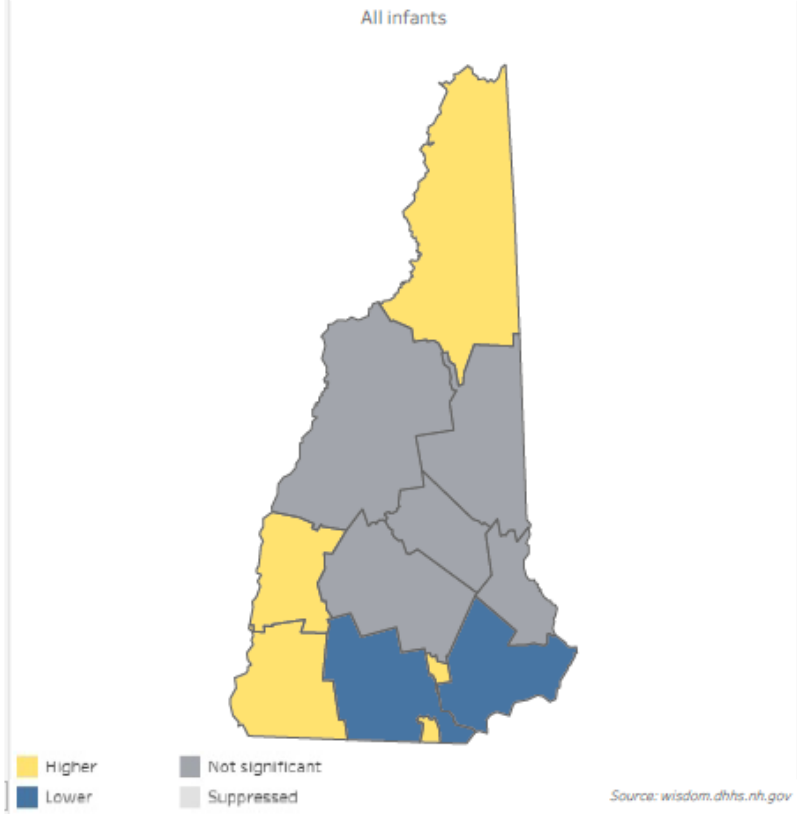
County	Number Enrolled	Up-to-Date [1]	Conditionally Enrolled [2]	Religious Exemption [3]	Medical Exemption [4]	Not Up-to-Date [5]
Belknap	7,981	92.5%	0.9%	4.5%	0.1%	2.0%
Carroll	5,708	81.8%	2.1%	4.4%	0.1%	11.6%
Cheshire	8,496	90.6%	1.1%	6.7%	0.2%	1.5%
Coos	3,463	93.8%	0.8%	4.5%	0.2%	0.7%
Grafton	10,811	92.4%	2.3%	2.7%	0.3%	2.3%
Hillsborough	56,414	93.3%	1.9%	3.7%	0.2%	1.0%
Merrimack	17,741	91.7%	0.6%	4.2%	0.3%	3.1%
Rockingham	41,882	93.3%	1.6%	3.0%	0.2%	1.9%
Strafford	15,198	92.1%	0.9%	3.9%	0.3%	2.8%
Sullivan	5,133	85.4%	6.6%	3.2%	0.1%	4.7%

TEEN BIRTH RATES ARE CONSIDERED A MAJOR INDICATOR OF YOUTH POPULATION HEALTH AND WELL-BEING

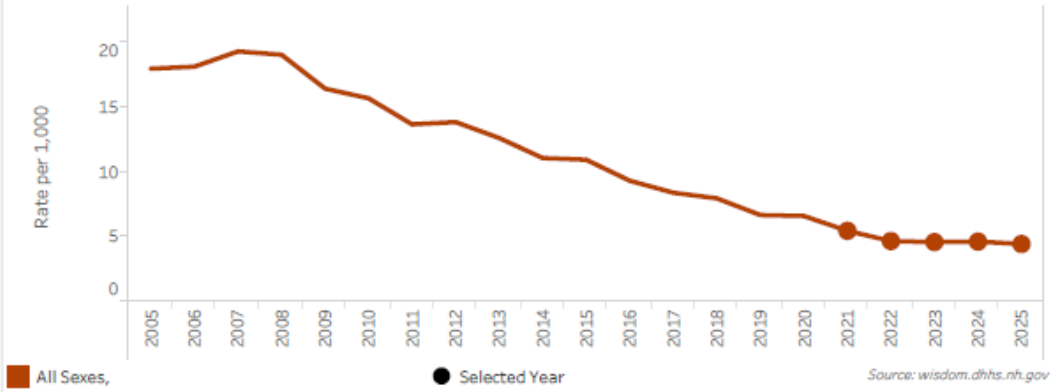
New Hampshire Health & Human Services Data Portal

NH teen births

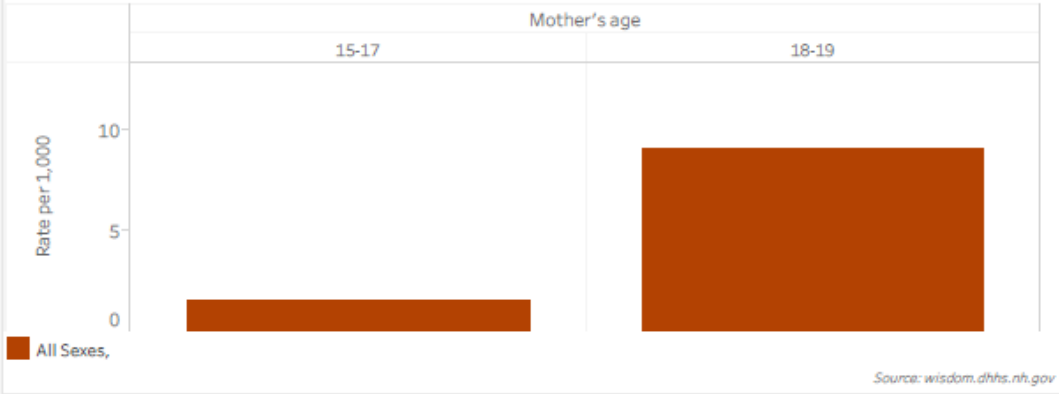
NH teen births, County with Manchester and Nashua compared to rest of state; 2021 - 2025; Mother's age: 15-19



NH teen births by year; New Hampshire; Mother's age: 15-19



NH teen births by mother's age; 2021 - 2025; New Hampshire



• Rates and counts are suppressed if between 1 and 4 events are reported.

RESOURCES FOR SCHOOL NURSES:

IN SCHOOL:

- ❑ Social Workers
- ❑ Student Assistance Program (SAP)
- ❑ School Resource Officers (SRO)
- ❑ Guidance Counselors
- ❑ Athletic Director
- ❑ Special Education
- ❑ Food Service
- ❑ English Language Learners
- ❑ Multicultural Liaisons
- ❑ Homelessness Liaisons

IN COMMUNITY:

- ❑ 2-1-1
- ❑ Family Resource Centers
- ❑ Community Action Partnerships
- ❑ Federally Qualified Health Centers
- ❑ Mental Health Centers
- ❑ Waypoint
- ❑ Library
- ❑ Parks & Recreation Department
- ❑ NHDHHS Children's Behavioral Health Resource Center



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CDC'S WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD (WSCC) FRAMEWORK





fppt.com

Which Public Health Training is Right for You?

What do you want to be prepared to do?

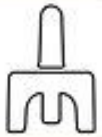
AED/CPR
Respond to cardiac emergencies





Question, Persuade, Refer (QPR)
Recognize and respond to suicide risk

Nalaxone
Respond to opioid overdose





Stop the Bleed
Respond to severe bleeding

Mental Health First Aid
Recognize and respond to mental health and substance use challenges across a wide range of situations

Mental Health FIRST AID
from NATIONAL COUNCIL FOR MENTAL WELLBEING

SELF CARE FOR SCHOOL NURSES:

- ❑ Healthy eating
- ❑ Regular exercise
- ❑ Adequate sleep
- ❑ Hydration
- ❑ Mindfulness and relaxation techniques
- ❑ Professional development
- ❑ Emotional support
- ❑ Therapeutic outlets or hobbies
- ❑ Time management
- ❑ Setting boundaries
- ❑ Seeking professional help
- ❑ Self-reflection
- ❑ Supportive and health-promoting work environment



THE SOCIETAL COST OF UNHEALTHY CHILDREN IN THE U.S.

Unhealthy children — those affected by chronic illness, developmental delays, trauma, or other adverse conditions — impose **trillions of dollars in societal costs annually** through healthcare, education, justice, and lost productivity (Invisible Children, 2026).

- **$14.1 trillion/year** in total annual economic burden of adult health conditions linked to childhood adversity (ACEs)
- **$428 billion/year** in lifetime costs for substantiated child maltreatment cases
- **$2.4 million** average lifetime economic burden per affected adult
- **$183 billion/year** in direct medical spending on ACE-associated adult health conditions

CDC estimates the per-victim lifetime cost of nonfatal child maltreatment at **$830,928** and fatal cases at **$16.6 million.**

These figures combine direct costs (medical care, special education, child welfare, criminal justice) and indirect costs (lost productivity, reduced economic contribution, caregiving burdens).

Questions?

