



# High School Dropout, a Public Health Issue, Analyzed through the Lens of Phenomenology

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## ABSTRACT

The completion of school education has positive health consequences. Early termination of education can lead to poorer health, shorter lifespans, which places additional stress on the health care system. In Canada, improving overall high school graduation rates has been discussed at the levels of the District School Board and the Ministry of Education, however, it is relatively understudied, with a dearth of research on increased graduation and its bearing on public health. The purpose of this phenomenological study was to explore the perceptions of liaison public health nurses in the Toronto, Ontario District School Board, regarding their roles in influencing students to complete high school. Reinforced by the underlying Bronfenbrenner ecological model, the study involved the analysis of primary data and theoretical propositions. Purposive sampling served to select 10 public health nurses who were interviewed regarding their role and involvement in high schools. Using a process of constant comparison and thematic analysis, the data was subjected to triangulation to increase understanding of the phenomenon. Broadly, the findings from this study indicated that liaison public health nurses believe that high school dropout is a public health issue and that collaboration between the Ministry of Education and Public Health is needed to address the issue. Further research is recommended to explore the connection between health and school achievements and the expanded role of public health nurses in Canadian high schools. The positive social change implication that may be expected with the application the findings of this study, includes highlighting the issue of high school dropout rate as a public health concern in Canadian schools in areas of lower socioeconomic status. The imperative to use additional research and resources may yield dividends for the Toronto Public Health, in improving graduation rates among their core mandates.

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## Introduction

A positive, healthy school environment supports and fosters growth in students, families, and the community. An immediate call for action is the academic underachievement and dropout rates of high school students in Toronto, Ontario, Canada, as is a concern among educators, parents, and community members. Youth who drop out of high school are often at a higher risk for public health concerns such as smoking, being overweight, and having a low level of physical activity (Allensworth et al., 2011; De Ridder et al., 2013). Premature termination of education can also lead to poorer health, shorter lifespan, and increased stress on welfare and health care systems (De Ridder et al., 2013). Leeves and Soyiri (2015) and others have identified dropouts as a key public health issue because as poverty increases, so do education and health disparities. Mirowsky (2017) noted that education is the foundation of good health because it gives individuals the resources to control and shape their lives which further protects and promotes health. Education is arguably a predictor of economic prosperity (Mirowsky, 2017). School systems are inextricably linked to educating students and ensuring a healthy environment are crucial for working towards eradicating racial disparities related to economic growth and well-being.

Comprehensive health promotion initiatives in Ontario schools are aimed at engaging the entire school community in activities that have incorporated the social and physical environment, teaching and learning, school health policies, and community partnership and services to foster connections between home, school, and community, for societal good.

The consensus is that collaborative intervention between health and education is fundamental to the improvement of school population health. From 2005, the Ontario Ministry of Education and the erstwhile Ministry of Health Promotion worked together to advance the CSH approach and later jointly released the *Foundations for a Healthy School* framework, which further encouraged school boards and public health units to adopt the comprehensive model as a best practice approach. Toronto Public Health adopted the *Foundations for a Healthy School* in 2006 and has been working with schools to utilize the framework since Ontario Public Health Standards (OPHS) mandated all boards of health to use a comprehensive health promotion approach when working with schools and school boards. Although this guidelines to provide direction is thorough, but the needs of some school-aged children and youth remain largely unmet.

### **Problem Identified**

The pervasiveness of the problem of high school dropout rate in Toronto is increasingly concentrated among low-income families. Public health researchers such as Allensworth et al. (2011), Freudenberg and Ruglis (2007), and Lansford et al. (2016) highlighted high school dropout as a public health issue and presented findings to the Centers for Disease Control and Prevention (CDC) who continue to advocate reframing high school dropout as a public health issue. Promoting education will benefit society by decreasing education disparities and health disparities will improve population health and save lives.

The Toronto Public Health School Health Services provides extensive services to school communities from multiple programs such as Mental Health Promotion, Chronic Disease and Injury Prevention, Substance Misuse Prevention, Sexual Health, Dental and Oral Health, Immunization, Communicable Disease Control, Family Health and Environmental Health; however, addressing issues surrounding absenteeism or high school dropouts are not a part of their current mandate. Education of one of the strongest predictors of health. Black students appear as dropping out of school at a faster rate than the rest of the student population. The investigation of high school dropout as a public health issue is an important social predicament. To address the current gap in literature and practice, I sought to understand the perceptions of liaison public health nurses regarding high school dropout as a public health concern.

### **Aim of Study**

The purpose of this phenomenological qualitative study was to explore (a) the perceptions of liaison PHNs in Toronto regarding high school dropout as a public health issue, and (b) the involvement of liaison PHNs as a key component to possible interventions. This study took place in the Greater Toronto Area, Canada, where there is a high percentage of high school dropouts among minorities. Although Canada has implemented various educational programs to increase academic skills and graduation rates, the involvement of public health was not brought to the fore.

### **Research Question**

The following research question is the focus of this article: What are the perceptions of liaison PHNs regarding the connections between public health and high school completion rates?

A qualitative, with a phenomenologically designed study undertaken, entailed the use of standardized open-ended interview questions to facilitate exploration and meaning of the phenomenon. Qualitative research does not involve the use of quantitative data and statistical analysis, scientific predictions, numeric descriptions, or pre-determined variables but rather focuses on the identification of themes and patterns of interpretation (Munhall, 2012). These themes and patterns enabled the researcher to explore the phenomenon from the participants' perspectives. In undertaking this qualitative phenomenological study, the focus was on gaining insight into perceptions of liaison PHNs to advance understanding of the problems and challenges of high school dropouts, and their perspectives on solutions and approaches to possible interventions. The participants were recruited using a purposive sampling technique.

### **Limitations and Boundaries**

This phenomenological research has some limitations. Purposive sampling was used to collect qualitative data generalizing the study limited to only the specific sample population. also, was potentially biased to this study since I

am also a nurse and was familiar with and had experience with the public health program. To address this bias, participants were recruited outside of my region, and a professional and unbiased relationship was established for the study. I kept thorough records with clear, consistent, and transparent interpretations of data and followed all guidelines from the university that helped to minimize potential personal and professional biases.

### **Importance and Significance**

Education is essential for the success of almost any society. Addressing the issue of high school dropout is important for ensuring the academic success of students. Since lack of education is found to impact overall health, understanding the perception of PHNs regarding the long-term health of students and the expanded role of nurses in schools is important. Knowledge from this study could also provide teachers with the gravity of the problems and challenges associated with how significant the issue of dropout is on the overall health of the child and the community as a whole. Research and the ensuing knowledge may also encourage open dialogues between school administrators and public health nurses since individuals with poorer health affect all taxpayers directly and indirectly.

The negative consequences of dropping out of high school affect the individual student and the economy as a whole. Kaestner and Lubotsky (2016) and Maynard et al. (2015), people whose incomes are below the poverty line are more dependent on the government healthcare system and have higher rates of cardiovascular diseases, diabetes, and other illnesses.

### **Exhaustive Literature Review**

To address the issue of high school dropouts among Black youth in Toronto, Canada, I reviewed and analyzed a comprehensive set of past and the most current literature about high school dropout and the long-term effects on health in the next section. Specifically, I examined the liaison PHNs' role in the involvement in students' education and the need for collaboration between education and Public Health. I identified gaps and discussed implications for future research.

Education is one of the strongest predictors of health. Black students drop out of school at a faster rate than the rest of the student population. Public health researchers such as Allensworth et al. (2011) and Lansford et al. (2016) have highlighted important findings that concurred that ethnic and racial disparities in children's health persist and that improving the graduation rate is a cost-effective way to reduce disparities. Although health professionals are aware that education improves health disparities, improving the graduation rate is rarely identified as a health priority. Reducing academic disparities is one cost-effective means to improve the long-term health of the community. This indicates a larger systemic issue of lack of support, advocacy, and equal opportunities.

### **Conceptual Grounding**

The ecological model was used in this study, as it has relevance to the issues of individuals and the environment. Bronfenbrenner introduced the model in the 1970s, arguing that human development depends on complex reciprocal interactions between persons or objects in the immediate environment (Rosa & Tudge, 2013; Sallis et al., 2015). The ecological model emphasizes a multifaceted expanded realm of influences that shape social identity (Sallis et al., 2015). These realms consist of the microsystem, which focuses on individuals who shape their identities through personal beliefs

and behaviors gained from close contacts or associations (Sallis et al., 2015).

### **High School Dropouts and the Role of Knowledge Disseminators**

The early 1990s ushered in a new technology-driven age in Canada, which led to the importance of a more robust knowledge-based economy, deemed vital for Canada to compete in the global market. The relationship between high school teachers and students is important for learning. Positive relationships between a teacher and the students along with high teacher expectations can create a positive experience which is fundamental to raising achievement in grades (Yanisko, 2016). However, Livingstone et al. (2014) and Yanisko (2016) indicated that some teachers could compromise the relationship by fostering negativity. The negative aspect is evident when teachers have lower educational expectations of Black students compared to White students and because of this low expectation, Black students are often streamed or tracked into applied or non-university preparatory education programs. Even though many studies have indicated that Black students are motivated and have aspirations similar to White students, this practice seemingly continues, nevertheless.

A growing amount of research has indicated that the students' race can sometimes put them at risk of negative outcomes depending on the teachers that they have (Coffey & Farinde-Wu, 2016; Mayfield, 2017). Yanisko (2016) agreed and suggested that teachers teaching low-income students of color often feel the need to administer a lower scripted curriculum that results in these students engaging in low-level tasks far more frequently than teachers who are serving in the affluent, predominantly White populations.

With the increasing call for more Black male teachers in schools to address the academic underachievement of Black male students, Brown (2012) agreed that this new direction made sense but does not believe that hiring more Black male teachers should be the sole focus. Brown (2012) opined that Black male students are often seen as aggressive or unruly and to address these issues, it is expected that Black male teachers assume the role of a disciplinarian. It is also assumed that the ability to change these students comes from the fact that the teachers are Black males (Brown, 2012), but he cautioned that these assumptions and expectations limit the role of Black male teachers. Additionally, Brown argued that the knowledge and capabilities of Black male teachers are more extensive than being role models for Black males; instead, they should be seen for their intellectual, mathematical, and scholarly capabilities (Brown, 2012). Racial stereotyping is another factor that may influence a student and their decision to remain in school.

### **The Methodology and Design and Appropriateness Rationale**

The purpose of this qualitative study with a phenomenological design, was to explore (a) the perceptions of liaison (PHNs) in Toronto regarding high school dropout as a public health issue, and (b) the involvement of liaison PHNs as a key component to possible interventions. Since there are strong associations between education and health, administrators, researchers, and policymakers need to have a better understanding of how public health nurses can help to motivate and encourage students to complete high school. This section includes a detailed description of the research design, research questions and rationale, role of the researcher, methodology, data collection procedures,

evidence of trustworthiness, ethical considerations, and a summary.

RQ: What are the perceptions of liaison PHNs regarding the connections between public health and high school completion rates?

The rationale for choosing a qualitative approach with, a phenomenological, design over other approaches and methods was that this approach was most appropriate for the exploration and conducive to facilitating a deeper understanding of the lived experiences and perspectives of public health nurses that would be difficult to capture quantitatively.

### **Sample Characteristics and Participant Inclusionary Criteria**

The number of liaison PHN participants who were recruited for this study was 10 or until data saturation occurred. The recommendation for phenomenological studies ranges between 5-10 participants for smaller studies as the data collected from more participants might not shed further light on the investigation at hand (Dworkin, 2012; Marshall et al., 2013). Data saturation was determined when there was no newer information emerged from the participants during the interview process (Hennink, Kaiser, & Marconi, 2017). The sample size in this qualitative research was smaller than that of quantitative methods because the focus was on seeking depth and understanding instead of making generalizations (Dworkin, 2012; Englander, 2012). The number of participants for this study was conducive to the desired and acceptable amount of data collection.

### **Data Collection**

Data collection was started after approval from the Institutional Review Board (IRB) of the University was received. Janesick (2011) suggested that the interview is the most rewarding part of a qualitative study therefore preparation and organization are crucial for success. These protocols were: (1) ensure the recorder was working if one was being used; (2) ask one question at a time; (3) try to remain as neutral as possible; (4) encourage responses; (5) be careful about appearances when taking notes; (6) provide a transition between topics; and (7) be focused and in control of the interview process.

### **Research Settings and Environment**

During the primary research phase, I conducted 10 face-to-face interviews with participants in a location that I believed would be easily accessible to the participants. I chose a conference room at the local public library. The setting was quiet and open to the public and I could ensure safety and privacy. The first 6 participants experienced no difficulties locating this venue. The other 4 interviews were conducted and the local coffee shop at the participants' request. This coffee shop was chosen by the participants because of its central location, convenience, and because there were quiet sitting areas that are often used for small meetings. This location also provided safety and privacy. All participants arrived on time for their scheduled interviews. I scheduled the interviews for 1 hour, with the understanding that the interviews could be longer or shorter. Interviews ranged from 35 to 50 minutes.

### **Data Collection**

After obtaining the official approval to conduct the research study, I posted recruitment flyers at an appropriate location. After 2 weeks, 4 participants responded and expressed their willingness to participate in the study. I met with these participants and after their interviews, and requested if they would be willing to share or refer other

participants. I explained that they were not obligated to do so but I would be thankful if the information regarding the study was shared. As a result, over 4 weeks, another 6 participants were interviewed for the study. The duration of the interviews varied between 30 and 45 minutes.

Upon the participant's approval, I recorded the interviews on an iPhone. There was one variation in data collection that was experienced outside of the expected interview process. One participant was unable to meet for the interview but requested to complete the interview questions via email. A copy of the interview questions was forwarded to the participant after the consent was signed. The questions were answered and added to the transcribed notes. This deviation from protocol was approved by the IRB. All interviews were transcribed and reviewed by participants for errors.

### **Analysis of Data**

To facilitate the analysis of collected interview data, I listened to the recording of each participant and completed a detailed transcription of each participant's answers within 48 hours of the interview. The transcripts were carefully read while listening to the audio tape to ensure the accuracy of the information then the transcripts were reread multiple times to ensure a good understanding of the transcripts. Gibbs (2018) asserted that the researcher should go back to the recording to check for interpretations of the transcript as this might make the meaning clearer and might even suggest different interpretations. To maintain confidentiality, each participant was assigned a number.

The principal research and interview Question was: "What are the perceptions of liaison PHNs regarding the connections between public health and high school complete rates?" This research question upon analysis, yields the following themes: health education, disease prevention, teenage pregnancy, increased life expectancy, increased access to care, improved well-being of a community, better education better health, and decreased stress. These themes relate to the ecological constructs that health, behaviors, and their determinants are interrelated. The model maintains that behavior is influenced by various factors at multiple social levels, therefore lack of education can further lead to destructive behaviors and poverty (Driessens, 2015). These factors directly influence the health of the community as a whole.

### **Credibility, Dependability, Confirmability, and Transferability**

Quality, trustworthiness, and credibility were obtained through ensuring the accuracy of collected data and information. I kept thorough records, acknowledging and accounting for personal biases. Member checking was conducted with each participant to ensure the accuracy of the transcribed information. This allowed the participants to acknowledge and review their responses and to make changes or clarify information so that summaries are a true reflection of their views and experiences. Houghton et al. (2013) noted that member checking, which involves participants reading the transcribed interview for accuracy before data analysis occurs, increases authenticity and credibility. Upon completion of the review, no changes or concerns were indicated by the participants.

### **Reporting of Results**

I applied the ecological theoretical model to the interview data, coding, and thematic analysis of the data. Applying the constructs of the ecological model was amenable and conducive to obtaining pertinent information

from the participants regarding their perspectives on high school dropout as a public health issue. The model indicates that adolescents' social interactions are not only affected by family, peers, and individuals to whom they are closely connected but also by their social experiences in other broader settings (Driessens, 2015). This section will outline the findings of each research question individually.

The principal interview question was: "What is your opinion on the relationship between education and public health?" The following themes emerged: Lack of education leads to poor health, the relationship between public health and education, and access to care. There is scientific evidence that confirms that a lack of education leads to poor health and that better-educated individuals will have better health outcomes (Leeves & Soyiri, 2015). Similarly, Crosby, Salazar, and DiClemente (2013) assert that sociocultural environments, lack of regulations of various industries, and cultural traditions of lifestyles impact public health at the macrosystem level and require a collaborative approach for effective interventions. The participants confirmed these findings as expressed below.

### **Education and Public Health**

Ten out of 10 participants expressed that public health has a role in schools. Participant 1 mentioned that if it can be implemented properly, there will be benefits to staff, students, and families which will lead to a healthier community. She mentioned that public health nurses can use observation, assessment, care, and referral to liaison between students' families and other health care providers in the community. She added that public health nurses can collect data and statistics to improve student well-being within the school and broader community. Participant 2 expressed, "Lack of education can lead to poor health, which leads to a burden on the community. Preventive health education helps prevent or decrease stress, addictions, unwanted pregnancy, and loneliness, which can lead to mental health issues." Participant 4 explained that the relationship between education and public health is weak and does not translate at the school level. She mentioned that schools are often stretched to capacity, lack resources, and have competing priorities. She expressed that most public health units have dedicated school health teams to go into these school communities and promote the health of staff, students, parents, teachers, and administrators but although schools may want to work in partnership with public health, the reality is that public health often do not have the time or resources to execute health promotion initiatives in the schools. Likewise, participant 6 expressed, "I believe lack of education has a direct impact on public health, this includes the ability to seek out medical advice promptly. It also might affect access to care as well as the ability to fully understand the importance of medication regimes for diseases, which can lead to early death."

The research process summarized would be as stated, the purpose of this qualitative phenomenological study was to explore (a) the perceptions of liaison (PHNs) in Toronto regarding high school dropout as a public health issue, and (b) the involvement of liaison PHNs as a key component to possible interventions. I explored their experiences with the education system and their perceptions of high school dropout as a public health issue. Data collection was done through open-ended interviews which allowed for descriptive analysis of their experiences. I interviewed a purposeful sample of 10 liaison PHNs who were all women between the ages of 25 and 64. Interview data were coded and analyzed using the

constructs of the ecological model to answer my research questions.

### **Interpretation of the Findings**

The ecological model underpinned the study and served to explore the individual interconnectedness to multiple environments and how these environments must be aligned to support the success of the students in their community. The findings of this study may have depicted consistency with the Miller et al., (2019) conclusion that the constructs of the ecological model facilitated exploration of the research questions by allowing for ease of organization of the data, identification of themes, and ease of analysis. An interpretation of the findings as it relates to the data collected and the ecological framework that was used as a guide for this study are described below:

### **Research Question**

The principal research question asked was: What are the perceptions of liaison PHNs regarding the connections between public health and high school completion rates? All participants believe that there are strong connections between public health and high school completion rates. My research findings reinforced Andersen et al. (2018) and Brown et al. (2019) who expressed that there were connections between education and public health. Participant 2 explained that lack of education can lead to poor health and therefore preventative health education is important for the community. Participant 3 explained that education and public health play a vital role in education for the public and although PHNs do not directly affect school completion rates, they are connected indirectly. Participant 4 agreed explaining that there is a connection but presently, their roles in the schools do not address completion rates. She explained, that there is a disconnect between the Ministry of Health and the Ministry of Education. Both ministries recognize the value and understand the link between health and education. However, the relationship is weak and does not translate effectively at the school level. Participant 7 echoed similar sentiments when she mentioned that education promotes wellbeing overall and that educated persons are more likely to make better health choices therefore there is a strong connection between health and education but admits school completion rate is not within their role. However, Garcia et al. (2018) expressed that the odds of dropping out of school increase when there are health and mental health challenges and that although there are various school health programs, there is not enough funding to study the impact of these programs on the school dropout rate. P9 agreed by explaining that she believes that lack of education has a direct impact on public health as it relates to the ability to seek out medical advice promptly. She believes that individuals who have not completed high school might not have the ability to fully understand the importance of medication regimes for certain diseases which could lead to adverse reactions.

### **Limitations of the Study**

One limitation of this study was that it involved a purposeful sampling of Liaison PHNs who were all females. I used the strategy of snowball sampling because the process was time-effective and cost-efficient for recruiting the desired pool of study participants. This method, however, limited my study to a small group of participants that might share similar traits and characteristics which could lead to potential sampling bias. There was potential bias to this study as I am also a nurse and familiar with the public health program. To address these personal and professional biases, participants were recruited outside of my school district and geographic

region, and a professional and unbiased relationship was established for the study. Thorough records were kept with clear, consistent, and transparent interpretations of data and followed all the guidelines from the university that helped to eliminate biases. Another limitation of this qualitative phenomenological approach is that the findings of this research study may not be generalizable to other PHN populations.

### **Recommendations**

From the findings of this study, it is recommended that future qualitative and quantitative research be undertaken by focusing on adults who have not completed high school. These studies should be designed to look at issues such as involvement in crimes, use of illicit drugs, and their health status. The research findings of this study revealed that PHNs believe that adults who have not completed high school are at higher risks for being involved in crimes, gun violence welfare, and poor health, therefore desire further research in this area. In addition to these studies, completing studies that address improving graduation rates could provide insights to health professionals and educators to improve the lives of young people.

Recommendation for further research into addressing school dropout as a public health issue in Canada may also be important and is necessary to develop a team approach to address the decrease in graduation rates in areas of lower socioeconomic status. Additionally, this research helped to educate the public and policymakers regarding the long-term benefits of education to the health of the community.

### **Potentially Vital Societal Implications from Study Findings**

The ecological model was conducive to the exploration and discussion of the failure to graduate from high school as a public health concern. Furthermore, the application of the lens of the ecological model simplified the discussion of how negative and positive influences shape the individual's future outcome. The implications for social change were thus viewed through the lens of the ecological model.

In this research study the high school student is the nucleus of the system moving through various levels of interactions with the broader society as a whole. The microsystems such as family, peers, schools, church, and health services are where the student has the most interactions which directly influence the development of the student. The participants in this research study have provided insights that determine those positive interactions between the student and the surroundings have direct influences on the student's development. One implication is that the results of this study provided insights and some understanding of the perceptions of liaison (PHNs) in Toronto regarding high school dropout as a public health issue, and the involvement of liaison PHNs as a key component to possible interventions. The study findings could contribute to positive societal and community values, notably if the findings are implemented and offer the PHNs a chance to share their experiences regarding the lack of resources in some areas where there is a disproportionate number of students who fail to graduate. The study findings and the rich data generated can inform public health and school principals regarding the connectedness between the lack of education and health.

The findings from this study could be disseminated to both schools and the public health departments to facilitate a dialogue between the two departments, specifically seeking to understand the perspectives of liaison PHNs regarding the interdependent process in which increases in high school

graduation rates are linked to improved health outcomes. I am proposing to disseminate the research findings to schools and the local public health department, by reaching out to community groups and parent-teacher meetings where educational, evidence-based materials will be shared. Lastly, I would disseminate the findings through platform presentations at conferences or published in peer-reviewed journals.

### Conclusion

This study served to explore (a) the perceptions of liaison public health nurses (PHNs) in Toronto regarding high school dropout as a public health issue, and (b) the involvement of liaison PHNs as a key component to possible interventions. The underlying precepts and postulations of Bronfenbrenner's ecological model aid in the formulation of the research questions and the interview data were coded to the constructs of the ecological model.

Several studies have shown a correlation between education and health. The studies have confirmed that students who do not complete high school are more likely to have higher rates of illnesses, have employment problems, die prematurely, engage in high-risk behaviors, and are more likely to depend on social assistance programs. The participants have concurred with several studies that improving high school graduation rates could indirectly improve the health of the community and reduce health disparities. Although Ontario has universal health care and home care, PHNs in schools work in multidisciplinary teams with other community partners, schools, and public health departments to address the health concerns of students, families, and community members. Liaison PHNs have also expressed interest in a more expanded role that would see PHNs in schools on a full-time basis consistently supporting mental, physical, social, and emotional health as well as addressing factors that prevent a student from completing high school.

Participants indicated that while social media can be a positive force in learning, the negative impact in the form of cyberbullying can adversely affect students' ability to learn which and eventually lead to failure to complete high school. The findings substantiate may also research previously conducted by Espelage and Hong (2017) that are increasingly exposed to other forms of bullying, specifically cyberbullying which is often associated with depression, anxiety, high-risk behavior, suicide, and other health issues. The findings of this study possibly validate previous findings that identified bullying as a barrier to learning which can lead to absenteeism which can be addressed by having public health nurses in schools.

Liaison PHNs have not only expressed concern regarding this trend but have expressed the need for liaison PHNs to take a more active role in addressing health issues associated with cyberbullying in schools. To be more effective, participants held that the Ministry of Health needs greater collaboration with the Ministry of Education to formulate and implement suitable policy changes that specifically address the above issues.

Liaison PHNs in Toronto have provided the school community with exceptional care, leadership, and service however, having PHNs assigned to every school in Toronto would ensure that counseling, assessment, and support of high-risk students would be addressed on time. Through expanded roles, PHNs in schools could help to build therapeutic relationships with students, build trust, and advocate for comprehensive action plans to improve health

and reduce disparities. The findings of this study revealed that liaison PHNs believe that collaboration between health and education professionals is necessary to address high school dropout as a public health issue. This concerted effort to improve graduation rate will not only benefit students directly but will have the ability to move beyond high schools and contribute to promoting population health which is a cost-effective means of reducing disparities and improving individuals' health.

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