Sources

- 1. Adams EK, Johnson V., An elementary SBHC: can it reduce Medicaid costs? *Pediatrics 2000 Apr;105(4 Pt 1):780-8.*
- 2. Gall G, Pagano ME, Desmond MS, Perrin JM, Murphy JM. Utility of psychosocial screening at a SBHC. *J Sch Health*. 2000;70:292-298.
- 3. Juszczak L, Melinkovich P, Kaplan D, Use of health and mental health services by adolescents across multiple delivery sites. *J Adol Health* 2003;32S:108-118.
- 4. Kaplan DW, Calonge BN, Guernsey BP, Hanrahan, MB. Managed care and SBHCs. Use of health services. *Arch Pediatr Adolesc Med.* 1998 Jan;152(1):25-33.
- 5. Key JD, Washington EC, Hulsey TC, Reduced emergency department utilization associated with SBHC enrollment, *J Adol Health* 2002; 30:273-278.
- 6. Kisker EE, Brown RS, Do SBHCs improve adolescents' access to health care, health status, and risk-taking behavior? *J Adol Health* 1996;18:335-343.
- 7. Lurie N, Bauer EJ, Brady C. Asthma outcomes in an inner-city SBHC. Journal of School Health. 2001; 71(9):9-16
- 8. Riggs S, Cheng T. Adolescents' willingness to use a SBHC in view of expressed health concerns. *J Adol Health*. 1988 9: 208-213.
- 9. Santelli J, Kouzis A, et al. SBHCs and adolescent use of primary care and hospital care. *J Adol Health 1996; 19:* 267-275.
- 10. Webber MP, Carpiniello KE, Oruwariye T, Yungtai L, Burton WB, and Appel DK. Burden of asthma in elementary school children: Do SBHCs make a difference? Arch Pediatr Adolesc Med. 2003; 157: 125-129.
- 11. Dallas Youth and Family Centers Program: Hall, LS (2001). Final Report — Youth and Family Centers Program 2000–2001 (REIS01-172-2). Dallas Independent Schools District.

SBHC= school-based health center

Benefits of School-Based Health Centers

Research and evaluations have demonstrated that school-based health centers represent cost-effective investments of public resources.

- A study by Johns Hopkins Uniersity found that school-based health centers reduced inappropriate emergency room use among regular users of school-based health centers. (5,9)
- A study of school-based health center costs by Emory University School of Public Health attributed a reduction in Medicaid expenditures related to inpatient, drug and emergency department use to use of school-based health centers. (1)
- School-based health centers have demonstrated that they attract harder-to-reach populations, especially minorities and males, and that they do a better job at getting them crucial services such as mental health care and high-risk behavior screens. Two studies found adolescents were 10-21 times more likely to come to a SBHC for mental health services than the community health center network or HMO. (3,4)
- A national multi-site study of school-based health centers conducted by Mathmatica Policy Research found a significant increase in health care access by students who used school-based health centers: 71% of students reported having a health care visit in past year compared to 59% of students who did not have access to a SBHC. (6)
- A study of elementary school-based health centers conducted by Montefiore Medical Center found a reduction in hospitalization and an increase in school attendance among inner-city school children asthma (10). Another study on school-based health care's effects on asthma found decreases in hospitalization rates of 75-85% and improvements in the use peak flow meters and inhalers. (7)
- Adolescents who received counseling services in a school-based health center significantly decreased their absenteeism and tardiness, while those not receiving counseling slightly increased their absence and tardiness rates. (2)
- A study of student users of health centers found that students who reported depression and past suicide attempts were significantly more willing to use the clinic for counseling than student reporting no so. Those with perceived weight problems reported more willingness to use a school clinic for nutrition information than those who did not feel overweight. Sexually active students were willing to seek information on pregnancy prevention and to have general disease checks. (8)
- Dallas school-based health centers found that medical services helped decrease absences by 50% among students who had three or more absences in a six-week period; students who received mental health services had an 85% decline in school discipline referrals. (11)