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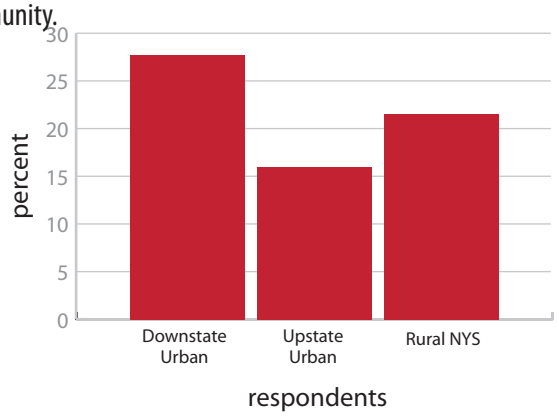
School-Based Health Centers in NYS

By **John W. Sipple** and **Hope Casto**, Cornell University.

What is the Issue?

A significant number of New Yorkers are dissatisfied with the health care available to children in their communities. According to the 2007 Empire State Poll, an annual opinion survey of New York State residents conducted by Cornell University, this opinion is felt most strongly among respondents living in downstate urban areas (28%), followed by respondents in rural areas (22%), and upstate urban areas (16%) (See Figure 1). Although this is not a majority opinion, it does represent a sizeable population who perceive that children's health-care needs are not being adequately met in New York State.

Figure 1: Levels of dissatisfaction with the primary health-care services/opportunities available to children in the community.

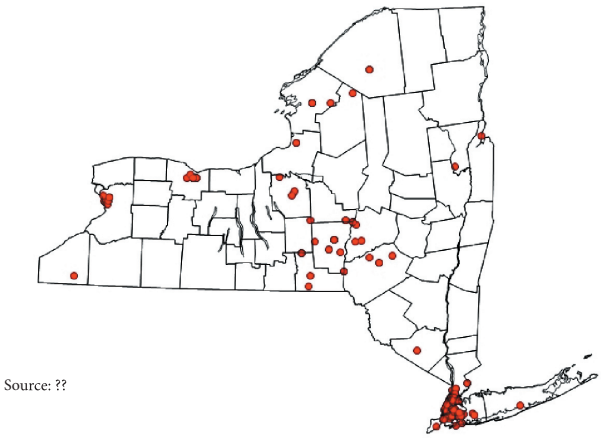


Source: John Sipple, 2007 Empire State Poll.

Nationally, issues of poverty and inadequate health insurance plague many rural children. According to the 2005 American Community Survey, 23% of rural children live in poverty. Furthermore, a recent study by the Carsey Institute (UNH) found that 1.3 million rural children are uninsured, with the highest percentage of uninsured in the most rural areas. School-base health centers are well situated to serve poor and uninsured children in rural areas. SBHCs may also be a more efficient way to serve rural children regardless of their poverty status.

What are SBHCs and how do they work in schools?

Map 1: School-Based Health Centers in New York State.



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Currently in New York State, there are 197 approved, operating SBHCs, the most of any state in the U.S. as of the 2004-2005 school year. The majority of these are in urban areas (New York City and upstate urban areas), while 27 are located in rural areas (see Map 1).

School-based health centers (SBHC), by definition and regulation, differ from state to state across the Unit-

ed States. In NYS, SBHCs are defined by the NYS Department of Health as "a licensed school-based health, dental, or mental health clinic [that] is located in a school facility of a school district or BOCES and [that] is operated by an entity other than the district or BOCES, and will provide health, dental, and mental health services during school hours and/or non-school hours to school-age and pre-school children." SBHCs in NYS offer services to children enrolled in the school, including age appropriate reproductive health care, and offer not only on-site access during the school day but also 24 hour on-call coverage.

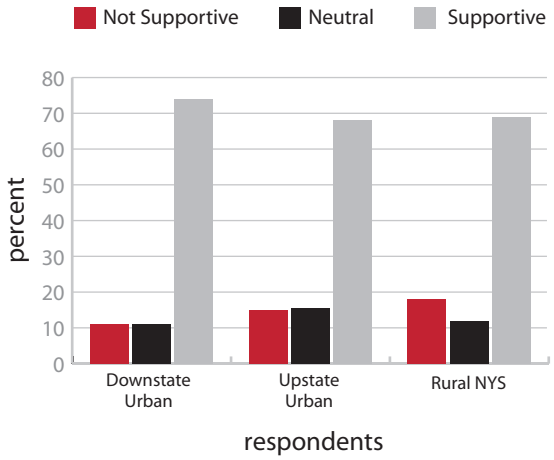
In order to house a SBHC, schools must collaborate with a sponsoring health care agency. The sponsoring agency bears the financial and legal liability, and hence motivates the efficient enrollment of all eligible children in health care benefit programs (i.e., Child Health Plus). The gains in efficiency may also be realized by not requiring students to leave the school building for routine health care, which in turn reduces time out of the classroom for students and travel obligations for parents. The existence of a SBHC may have added significance in rural settings where many communities do not have health clinics or physicians.

Do New Yorkers support SBHCs? Do they have concerns?

Respondents to the 2007 Empire State Poll were asked to indicate their level of support for school-based health clinics for the children in their community. Strong levels of support were shown across the state (downstate urban areas with 76% support, upstate urban areas with 68% support, and 69% of respondents in rural areas indicating support for SBHCs) (see Figure 2). In fact, what is striking about these numbers is the almost complete lack of variation in levels of support among respondents living in different areas of the state.

When rural survey respondents were asked about their primary concerns about school-based health centers, some respondents cited such issues as additional costs (even though, per NYS regulation, the cost of the centers is born by the sponsoring health care provider), privacy, and whether it was the job of the school to house a SBHC. However, a third of the rural population surveyed responded that they had no concerns, regardless of whether or not they support clinics.

Figure 2: If primary health-care services were available in a clinic inside your local public school, would you support the use of it for children in your community?



Source: John Sipple, 2007 Empire State Poll.

What is the future of school-based health centers in NYS?

The number of SBHCs in New York State continues to increase. Bassett Hospital opened three additional SBHCs in 2006/7, operating a total of nine centers in the state. Providing further support to SBHCs is the introduction in the U.S. Congress of the *School-Based Health Clinic Establishment Act of 2007*. This Act would authorize $50 million to create new SBHCs and fund existing centers across the country in 2008. Congress is now requesting an increase of $10 billion over the next five years to expand the State Children's Health Insurance Program (e.g. Child Health Plus in NYS). Such an increase would allow greater numbers of children of the working poor access to health insurance. This would lower costs for sponsoring health care agencies operating SBHCs by reducing the numbers of uninsured children being served. SBHCs offer yet another piece of the health care puzzle, a solution that can potentially serve more school-age children efficiently in their home communities.

Key Resources

NYS Department of Health:
www.nyhealth.gov/nysdoh/school/index.htm

National Assembly of School-Based Health Centers:
www.NASBHC.org

The Center for Health and Health Care in Schools:
www.HealthInSchools.org