**SCHOOL-BASED HEALTH CENTERS** provide many benefits to children and communities including better health, improved access to mental health, better chances for academic success, and reduced costs. This fact sheet is adapted from the National Assembly on School-Based Health Care and contains additional research findings.

**Limit and prevent disease**

- School-Based Health Centers have rates of immunization completion for nearly all recommended child and adolescent vaccines than similarly located Community Health Centers *(Federico, 2010).*

- School-Based Health Centers provide an important source of screening, information, and treatment for sexually transmitted infections (STIs) for adolescents. Among minority adolescents, research has shown that school-based screening services can identify and treat asymptomatic Chlamydia infections, decreasing both infections rates and potentially averting long-term health impacts such as Pelvic Inflammatory Disease and infertility *(Braun, 2010 and Joffe, 2008).*

**Improve health and mental health access and utilization for underserved kids**

- In West Virginia, student enrollment in school-based health centers rose more than 30% over the first three years of school-based health center availability; approximately two-thirds of school-based health center visits were made by uninsured students or those on Medicaid *(Crespo, 2000).*

- School-based health centers increase students’ access and utilization of complementary health care like mental health and substance abuse services. One study found that adolescents with access to an SBHC were 10 times more likely to make a mental health or substance abuse visit *(Kaplan, 1998).*

- Being on public assistance or without any type of health insurance has been demonstrated to be predictive of students seeking mental health services from school-based health centers *(Amaral, 2011).*

**Improve academic success**

- A 2007 study found that school-based health center users for mental health purposes increased their Grade Point Averages over time compared to non-users *(Walker, 2010 and National Assembly on School-Based Health Care, 2010).*

- High school aged school-based health center users in one 2000 study had a 50 percent decrease in absenteeism and 25 percent decrease in tardiness two months after receiving school-based mental health and counseling *(Gall, 2000).*
Reduce health costs

- Adolescents with commercial managed care insurance and school-based health center access in Denver, Colorado had an after-hours care visit rate of 38-55% less than those without school-based health center access (Kaplan, 1998, and National Assembly on School-Based Health Care, 2010).

- In South Carolina, prevention-oriented health care provided in school based health centers can decrease utilization of emergency departments (Key, 2002 and National Assembly on School-Based Health Care, 2010).

References


National Assembly on School-Based Health Care. Cost-Savings of School-Based Health Centers. September 2010.

National Assembly on School-Based Health Care. School-Based Health Centers and Academic Success. August 2010.