

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 University found that school-based health centers **reduced inappropriate emergency room** use among regular users of school-based health centers.^{1,2}
- 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.³
- 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.^{4,5}
- A national multi-site study of school-based health centers conducted by Mathematica 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 for asthma.⁷ 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.⁸
- 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.⁹
- 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 services. 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.¹⁰
- 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

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