

School-based health centers play important role, report finds

EACH YEAR, close to 2 million children in the United States rely on school-based health centers for preventive and comprehensive medical, mental and social services. Under health reform, the centers can play an even bigger role in providing access to primary and other care for children and teens, according to a national survey released in May.

The survey, conducted by the National Assembly on School-Based Health Care, illustrates how the centers — if funded adequately — can increase access to health services for children, particularly in rural and under-served populations.

“School-based health centers are a critical component of our public health care safety net,” said Linda Jusczyk, executive director of the National Assembly on School-Based Health Care.

And school-based health centers are more needed than ever, Jusczyk said, noting that the centers are increasingly expanding their reach into communities as they open their doors beyond their school’s students to include faculty and family members, out-of-school youth and others in the community.

Affirming their importance, school-based health centers became an authorized federal program in the sweeping health care reform bill signed into law by President Barack Obama in March. Despite the victory, school-based health centers across the country are increasingly struggling due to a growing demand for services at the same time they are facing state budget cuts, Jusczyk said.

To meet the demand, the National Assembly on School-Based Health Care is asking Congress for a \$50 million appropriation to keep the existing clinics open and to provide critical resources to communi-

ties looking to open health clinics at their schools.

“School-based health centers are an important strategy for reaching under-served kids where they are, and the centers provide an opportunity to address a whole range of prevention needs for young people, including meeting their acute care needs,” said Terri Wright, MPH, director of APHA’s Center for School, Health and Education.

Funded by the W.K. Kellogg Foundation, APHA’s center serves as a catalyst for expanding school-based health centers to broaden their focus and include a public health agenda to improve the school environment.

“School-based health centers are beginning to open their doors to meet the health care needs of the broader community beyond students,

and that makes sense because the centers are so grounded in communities,” Wright said.

Most school-based health centers are situated in school buildings in urban communities. About 27 percent of centers are in rural areas. Students in schools with such centers tend to be under- or uninsured, lack access to care and belong to minority and ethnic groups.

According to the survey, most centers are open during normal school hours. Beyond the school day, 60 percent are open after school, 49 percent are open before school and 36 percent keep their doors open in the summer. The survey also revealed a wide range of staffing models, from a provider working on site two hours a week to up to seven staff members on site full time.

For more on the survey, visit www.nasbhc.org. For more on APHA’s center, e-mail terri.wright@apha.org. ■

— Teddi Dineley Johnson



Photo by Valerie Bloom

Rep. John Dingell, D-Mich., stands with attendees at a school-based health care rally in June in Washington, D.C.

NATION IN BRIEF

CDC: HIV still major public health threat

The number of people living with HIV in the United States is higher than ever before, but the annual number of new infections has remained relatively stable in recent years.

HIV surveillance data released by the Centers for Disease Control and Prevention in June showed there were more than 1.1 million adults and adolescents living with HIV in the United States in 2006, a number attributed not only to new infections but to people living longer thanks to antiretroviral treatments.

The report found that HIV continues to disproportionately affect men who have sex with men, blacks and Hispanics. For example, blacks represent 12 percent of the nation’s population but account for almost half of all new HIV infections.

“Within the overall epidemic, some groups and areas are more affected than others,” said Jonathan H. Mermin, MD, MPH, director of the Division of HIV/AIDS Prevention at the National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention. “Therefore, we must remain vigilant and focus our resources where they will make the biggest difference.”

The full “2008 HIV Surveillance Report” and related fact sheets are available at www.cdc.gov/hiv.

Air pollution an issue for American troops

The National Research Council has recommended strengthening the monitoring of U.S. troop exposure to air pollution in the Middle East.

The U.S. Department of Defense has an enhanced particulate matter exposure program that studies exposure of military personnel to airborne particulate matter — such as windblown dust and diesel emissions — in the Middle East. The new report said that program has documented that U.S. soldiers in the Middle East are exposed to high concentrations of particulate matter that can be linked to health problems

such as persistent respiratory symptoms. Thus, the program needs expansion, according to the report, especially considering the continued U.S. military presence in the Middle East.

The report recommended future monitoring studies that might include real-time, continuous

particulate matter monitoring equipment. And DOD should consider using additional medical data, such as the results of pulmonary function tests, when characterizing health outcomes

linked to military personnel’s exposure to air pollution, the report said.

The full report, “Review of the Department of Defense Enhanced Particulate Matter Surveillance Program Report,” is available at www.nas.edu.

U.S. homicide, suicide rates vary by group

Newly released statistics on U.S. violent deaths show the homicide rate is three times higher among males than females, and the rate of suicides is highest among American Indians and Alaska Natives as well as whites.

While people older than 80 have typically had the highest rates of suicide in the United States, the latest statistics released in May show that has shifted to the younger, 45- to 54-year-old age group. The findings were published in the May 13 issue of *Morbidity and Mortality Weekly Report*.

Overall, 30 percent of people who committed suicide had told someone about their intent to kill themselves, and about 20 percent had made a previous suicide attempt.

The report also found that about two-thirds of all homicides and half of all suicides in the United States are committed with a firearm. Blacks accounted for the majority of homicide deaths and had the highest murder rate of any racial and ethnic group.

Americans unclear on evidence-based care

Evidence-based care is a major component of health reform, yet most Americans are unclear about what it is, according to a study in the June issue of *Health Affairs*.

In the study, which was based on in-depth interviews and focus groups, participants generally did not understand that there

are variations in quality of care, and many assumed health providers make all care decisions based on existing medical evidence. The study also found

that health consumers often are reluctant to challenge their doctors about treatment options. Few consumers understood terms such as “medical evidence” or “quality guidelines.”

Health facilities lack policy for gay patients

The vast majority of health care facilities do not have inclusive policies for lesbian, gay, bisexual and transgender patients, according to a recent analysis by the Human Rights Campaign.

However, the analysis, released in June, said change is in the air. For example, Kaiser Permanente recently updated its patients’ bill of rights to fully protect lesbian, gay, bisexual and transgender patients from discrimination. The change came after President Barack Obama issued a memorandum in April directing the U.S. Department of Health and Human Services to make rules requiring hospitals that receive federal funding to protect the health care decision-making rights of lesbian, gay, bisexual and transgender patients.

Also in the private sector, the Joint Commission announced new patient non-discrimination standards as part of its accreditation process for health care organizations.

The full “Healthcare Equality Index 2010” is online at www.hrc.org. ■

— Donya Currie



Photo by Bryan Myhr, courtesy iStockphoto

New recommendations call for better air quality monitoring for U.S. troops in the Middle East.