## **Primary Care Comes to the Classroom**

By Barbara Ruben

The state of West Virginia has some of the highest poverty, smoking, infant mortality and teen pregnancy rates the United States. These problems are compounded by the fact that many residents live in isolated, mountainous areas and must drive 30 or more miles on narrow, winding roads to reach a doctor.

To combat these obstacles to health care, the state began setting up primary care health centers in schools in 1994. Today, 38 such centers serve 22,000 students, or about 7 percent of those in public schools. Physicians assistants and nurse practitioners are the primary staff at the centers, with doctors available when needed. Funding comes from a mix of state and federal money and insurance reimbursement.

"I would say we have a lot in common with Eastern Europe in terms of access to primary care and the health concerns we face," said George Shaler, evaluation specialist with the West Virginia School-Based Health Program. "Children weren't getting immunized, they weren't getting preventive care and certainly didn't have access to the mental health or dental services some of the centers now provide."

School-based health care is a growing concept in the United States. About 1,100 primary care clinics are now located in schools across the country, said John Schlitt, executive director of the National Assembly of School-Based Health Care. Ten years ago, there were only about 100 of these centers. Many of the centers are located in areas with little access to or ability to pay for primary care, such as inner cities, rural areas and communities with a large number of immigrants.

"We've found that these kinds of centers do a better job than other community providers, such as HMOs," Schlitt said. "The center is located right at the school, so students tend to utilize them."

The US federal government's Bureau of Primary Health Care, within the Health Resources and Services Administration, provides federal funding for 26 primary care centers in schools around the United States.

One of these centers is at Westwood Elementary School in California's sprawling San Bernardino County, the largest county in the United States. Residents, many of whom immigrated from Mexico, live in largely rural areas bordering the Mojave Desert. Some don't have running water.

Before the Westwood health clinic began in 1994, a nurse visited the school only four hours a week. Today, a public health nurse and a nurse practitioner provide daily clinical services, from immunizations to examinations of children with ear infections. The clinic serves children from pre-school through fifth grade, or about age 11.

But the San Bernardino Public Health Department, which runs the clinic, realized that students needed more than just primary health care, said Kay Fangerow, a supervising public health nurse. In an area with "bike-by" shootings, where students on bikes fired guns at other students exiting a school bus, and skyrocketing poverty, the health department stepped in with a variety of other programs. These include a program called Peace Builders, which helps with conflict resolution and offers peer mediation. A food and clothing bank is also run by the health center. Transportation assistance and on-site child care are provided to help ensure parents can take part in their children's health care. Hygiene classes have also been instituted.

And indicators at the school show that the health department's efforts are working. Although some gains may stem from factors beyond the health center, since the program began, the school has a far lower turnover rate (70 to 80 percent of students attending the school one year previously did not come back the next), a drop in absenteeism and a decrease in suspensions, Fangerow said. Students also report they are smoking less and using less alcohol and marijuana.

Examples of other school-based health centers include:

One school in Portland, Oregon offers anger management groups, parenting classes and weight management help in addition to a primary care clinic. A girls club meets after school to help girls raise their self-esteem in an effort to address the high teen pregnancy rate in the community. An outreach worker helps link Russian and Hispanic families with translators and culturally appropriate resources.

A program in an elementary and middle school in Grand Rapids, Michigan serves homeless children and those at risk of becoming homeless. The clinic provides services year round and operates a program for children of migrant workers during the summer.

And 900 seventh and eighth grade students at East Nashville Middle School in Tennessee have access to comprehensive primary care, including pregnancy testing and sexuality counseling. Birth control and perinatal care are offered on site as well as smoking cessation classes.

"No two centers are the same," according to Schlitt. "But across the board, the progress has been to open up access to health care where little existed before."