

Testimony for Dr. Elizabeth Miller

Senate Democratic Policy Committee Hearing on Expanding School-Based Health Centers in Pennsylvania Tuesday April 26, 2022

Good afternoon, Senator Muth, Senator Haywood, esteemed members of the Senate Democratic Policy Committee, and guests. Thank you for providing me with the opportunity to speak today about the great benefits of school-based health centers and why we should expand the model in our Commonwealth.

My name is Liz Miller. I am a pediatrician and a researcher. I am on the board and serve as the treasurer for the Pennsylvania School Based Health Alliance. I am also employed by UPMC Children's Hospital of Pittsburgh and the University of Pittsburgh School of Medicine, where I am the director of adolescent and young adult health, medical director of community health, and professor of pediatrics, public health, and clinical and translational science. My research primarily focuses on interpersonal violence prevention and adolescent health promotion, including studies with schools and school-based health centers.

I have been asked to share some of the science and evidence-base behind school-based health centers. First, I want to share with you my personal experience with school-based health centers. In 2000, after finishing my training in both adult internal medicine and pediatrics, I worked in a community health center and served as the physician for the local school district in Revere Massachusetts. The school board, district, parents, and youth worked with us collaboratively to open a school-based health center in the local high school two years later, which is still in operation now two decades later. The school health center continues to be open to all students in the school (and now is open to the community after school). Services include immunizations, sick visits, sports physicals, mental health services (including substance use counseling), nutritional counseling, confidential reproductive and sexual health services, and connection to other subspecialty services including asthma care. The community I worked in experienced high levels of poverty, violence, substance use, and many other challenges associated with concentrated disadvantage. The school health center is a hub for connection to food, clothing, transportation, housing assistance, legal services, and many other supports that so many students and families need to survive. I know first-hand the vital importance of school based health centers as part of a child or young person's community health home. While working in California from 2006 to 2011, I also served on the board of the California School Based Health Alliance and conducted research on violence prevention programs with schools and school health centers.

As a pediatrician committed to health equity, I am acutely aware of the challenges we face in addressing the structural inequities that contribute to poor health and improving our health care delivery system to more effectively address health-related social needs (what are often called 'social determinants of health'). School based health centers are positioned to simultaneously

address urgent needs while working to improve the environment for children and youth by providing easy access to services so that students can stay in school and thrive. There have been several syntheses and reviews of the research literature to evaluate the benefits of school based health centers. Studies have found that school based health centers are associated with:

- Improved access to medical services including preventive care, especially for children and youth who are uninsured or under-insured
- Reduced hospitalizations for asthma – one of the most common chronic health conditions
- Improved access to a source of medical care, especially in rural areas (and reduce barriers such as transportation and time out of school/work)
- Reduced sexually transmitted infections and unintended pregnancies
- Reduced foregone care - knowing that one needed to see a health professional and didn't

With our current mental health crisis and significant need to address behavioral health concerns among children and adolescents in the pandemic, it is also critical to highlight the evidence of increased uptake of behavioral health services in schools that have school based health centers:

- More adolescents are engaged in behavioral health care, especially those who would otherwise not seek care
- Reductions are reported in depressive symptoms and suicidal ideation
- Improvements in school attendance and reductions in school suspensions have been documented, some of which appear to be related to increasing students' connectedness to school, the sense that the adults and peers in school care about them, their wellness and success.

In addition to these more general findings from school-based health centers, in the context of my own research as a violence prevention researcher, our team has demonstrated that a brief counseling intervention about healthy relationships implemented in school based health centers substantively reduced relationship abuse. And notably, across the country, school-based health centers were part of our massive national effort to vaccinate our children and youth as the COVID-19 vaccines were authorized for use. Thus, school-based health centers are not only critical for delivering high quality health care, they are a critical part of our public health infrastructure.

Thank you very much for your time and consideration.

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