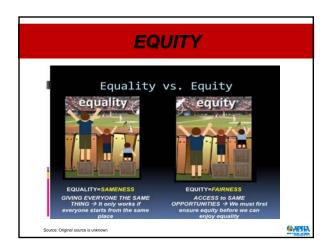


Guiding Questions

- Why are SBHC leaders instrumental in achieving health equity?
- What is the evidence for SBHCs to contribute to health equity?
- ☐ How can SBHCs uniquely improve health outcomes?



GARTIA



EQUITY

"Schools are the only institutions that can reach nearly all youth. They are in a unique position to improve both the education and health status of young people throughout the nation".

(Fisher 2003).

GAPRA

EQUITY

■HS Dropouts

- Die younger
- Suffer more chronic illnesses
- Earn less money
- Absent health promoting social conditions as adults
- Less healthy children
- Intergenerational
- Yields disparities and perpetuates inequities
- □ All members of society have the opportunity to attain their full health potential AND no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.
- ☐ High school graduation is an essential step towards equity
 - ☐ Healthy People 2020
 - □ APHA Policy Position # 20101

GARTIA.

School-Based Health Centers

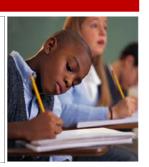
- Attract harder-to-reach populations
 - racial minorities
 - males
- ✓ Better job at services
 - mental health care
 - social conditions
- √ Risk assessments
 - early intervention



SAPPLA

School-Based Health Centers

- ✓ Users
 - decreased absenteeism
 - decreased tardiness
- ✓ Increased GPA
 - 3X more likely to stay in school
- ✓ Overall improvements
 - School climate
 - Learning environment



GAPTE

School-Based Health Centers Primary Care + Public Health

- ☐ Accountability for health outcomes
- Eliminate disparities
 - > Requires:

Identify, Recognize and Respond to SDOH





GARTIA

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Terri Wright is the Director of the Center for School, Health and Education (CSHE) and the Center for Public Health Policy at the American Public Health Association (APHA). For CSHE has provides leadership to the strategic development and integration of public health in school-based health care and education.

Prior to joining APHA in 2010, she served as a program director for health policy for the W. K. Kelogp Foundation in MI for 12 years. In that capacity Terri developed and reviewed the Foundation health programing priorities and initiatives, evaluated and recommended proposals for funding, and administered national initiatives. The also assisted in public policy analysis and related policy program development, as well as provided leadership to the Foundation's school-based health care policy program.

Previously, Terri was Maternal and Child Health Director and Bureau Chief for Child and Family Services at the Michigan Department of Community Health. In that role, she managed policy, programs and resources with the goal of reducing preventable maternal, infant, and child morbidity and mortality through policy and programming.

Terri has been a champion of the public's health for over 30 years. She receives the undergraduate degree in community and school health, as well as her New York State certification in secondary school education from the City University of New York. Terri tookined her master of public health in health policy and administration and doctor of philosophy in public health from the University of Michigan.

Terri takes an active leadership role in several professional associations including the Institute of Medicine's Roundtable on the Promotion of Health Equity and the Elimination of Health Disparities.



