

School-based health clinics found to benefit rural New York state communities

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In a rural region of upstate New York, students attending schools embedded with nonprofit-run health clinics received more medical care, relied less on urgent care and missed less school, according to an analysis

led by Cornell researchers.

The [case study](#) adds to evidence that school-based [health](#) centers, which have been studied more extensively in urban contexts, can improve children's health care and provide broader benefits to [rural communities](#), the researchers said.

"You get better provision of health care service in those schools with a school-based clinic," said John Sipple, professor of global development in the College of Agriculture and Life Sciences (CALS). "Basic access to care is up, in terms of the number of times children are seen, attendance is higher and absenteeism is reduced."

Sharon Tennyson, professor in the Cornell Jeb E. Brooks School of Public Policy and in the multicollge Department of Economics, is the first author of "School-Based Health Centers and Rural Community Health," published in the journal *Community Development* in a special issue focused on schools. Cornell co-authors include Sipple, Peter Fiduccia, MPA '17, Ph.D. '22, and Elisabeth Lembo, MPA '20.

Mildred Warner, M.S. '85, Ph.D. '97, professor of global development in CALS and of city and [regional planning](#) in the College of Architecture, Art and Planning, is a guest editor of the special issue and co-author of two of its research papers. Including contributions from several other Cornell graduates, the issue explores how schools can enhance not only a community's education but its health care, nutrition and [economic development](#), often by sharing services and facilities—from administrative functions to gyms, libraries and computer labs.

"This research shows there's a lot of interest and potential in these approaches, including in rural settings—but we have to figure out how to get schools and communities to work together," Warner said. "It requires shared power, rather than trying to enforce partnerships."

School-based health centers offer a prototype for how effective such partnerships can be, Sipple said, delivering valuable community benefits even if they don't directly save schools money.

In New York, more than 250 school-based health centers have been established to improve the primary and preventive health care of children in low-income, high-risk communities, according to the state health department. The majority are in New York City, with 18% in [rural areas](#), where research has shown [economic challenges](#), greater travel distances and hospital closures have reduced [health care](#) access and contributed to health disparities in children.

The team led by Tennyson and Sipple analyzed a rural region of four adjacent counties—Chenango, Delaware, Otsego and Schoharie—where Bassett Healthcare Network ran clinics in schools in more than a dozen districts, providing comprehensive care with no out-of-pocket costs to more than 9,000 K-12 students. Using de-identified 2017 data from Bassett, they compared those students to more than 7,000 peers in neighboring districts that did not have school-based clinics. More than half the students across both groups were low-income.

"We have the ability to look at similar students attending similar schools across these communities to assess the effect of school-based clinics," Sipple said.

The results showed that students with access to clinics at school made two additional office visits per year; were significantly less likely to seek emergency care; and were about 10 percentage points more likely to receive a routine checkup and an immunization. They also missed less school, particularly in kindergarten and early elementary grades when caregivers might need to miss work to stay home with sick children.

The data suggests school-based health centers improved access to

preventive care by locating it where children are each day and removing cost barriers, the researchers said. They said the collaborative process for establishing and expanding the clinics—the first of which Bassett opened more than 30 years ago—helped foster community trust that could be leveraged further.

School-based health centers "may benefit both schools and communities by addressing an important set of rural challenges," the authors concluded, and "have potential to serve a key role in local rural community development."

More information: Sharon Tennyson et al, School-based health centers and rural community health, *Community Development* (2023). DOI: [10.1080/15575330.2022.2163409](https://doi.org/10.1080/15575330.2022.2163409)

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