It is routinely staffed by an Advanced Practice Practitioner (nurse practitioner or physician assistant), medical assistant, clerical staff, and a mental health provider. The staff are employees of a federally qualified health center (FQHC) or hospital system that may or may not be located in the community. The main centers are not too far away and can provide after hours and summer coverage for the students and other community members.

The majority of medical sponsors for Georgia’s SBHCs are FQHCs scattered throughout the state. One of these centers, Community Health Care Systems, Inc. of Johnson County, is highlighted in the interview section of this newsletter. They sponsor 3 SBHCs in rural and semi-rural communities which provide healthcare for the entire community. By eliminating the major barriers to healthcare and providing comprehensive, quality health services in low resourced communities, further expansion of SBHCs can serve as a solution to the major problem of limited health access in rural Georgia.

It is a story that is repeated throughout the state, from Rabun County to Thomas County and all others in between.

In order to address this crisis, both private (Georgia Healthcare Foundation – The Two Georgias Initiative) and public (DCH – Rural Hospital Stabilization Program) entities have created programs to address health disparities and access through improving local health systems, building capacity, and cultivating leadership within their communities.

PARTNERS for Equity in Child and Adolescent Health at Emory University has also labored to increase access to healthcare through the expansion of school-based health centers (SBHCs) in the state. SBHCs increase access by reducing barriers to healthcare. The barriers of cost, transportation, and hours of operation along with the lack of knowledge around how to manage one’s health and when to access health care are readily addressed through SBHCs.

Since 2013, the number of SBHCs have grown from 2 to 52. Of the 52 centers, over 60 percent are located in rural communities where many of these centers are available not only to the students and their siblings but to adults as well. Even though a SBHC represents a ‘doctor’s office in the school’, it does not require a physician living in the community or a viable hospital system.
GASBHA Overview

GASBHA Objectives
- Increase access to healthcare for the uninsured, Medicaid, and CHIP eligible children and adolescents.
- Improve health outcomes for underserved children and adolescents.
- Improve academic achievement through reduced absenteeism.

GASBHA Mission
GASBHA advances the health and success of Georgia’s children through community partnerships to develop and support SBHCs

List of Operational SBHCs
- Albany Middle (Dental), Albany
- Alice Coachman Elementary, Albany
- Vision Center added in 2018
- Baldwin County Early Learning Center, Milledgeville
- Building Bridges Middle, Savannah
- Burnett/Eastside Elementary, Douglasville
- Chattahoochee Education Center, Cusseta
- Claxton Elementary School, Claxton
- Coffee Middle, Douglas
- College Park Elementary, College Park
- Cooper-Carver Elementary, Dawson
- Crisp County Elementary, Cordele
- Dobbs Elementary, Atlanta
- Dooly County Elementary, Pinehurst
- Dresden Elementary, Chamblee
- East Broad K-8, Savannah
- Fairington Elementary, Lithonia
- Fairmount Elementary, Fairmount*
- Flatrock Elementary, Lithonia
- Fox Elementary, Columbus
- Gilbert Elementary, LaFayette
- Hilsman Middle School, Athens
- Hollis Innovation Academy, Atlanta
- Ingram-Pye Elementary, Macon
- Johnson Elementary, Wrightsville
- King Middle, Atlanta
- L.P. Miles Elementary, Atlanta
- Lake Forest Elementary, Sandy Springs
- Live Oak Elementary, Albany
- Martin Luther King Middle, Atlanta
- Mountain Area Education Center, Blue Ridge
- North Clayton High, College Park
- Oakview Elementary, Decatur
- Panola Way Elementary, Lithonia
- Peachcrest Elementary, Decatur
- Robert Harvey Elementary, Albany
- Shuman Elementary, Savannah
- Snapfinger Elementary, Decatur
- SOWEGA STEM Charter School, Shellman
- Stone Mountain Elementary, Stone Mountain
- Stoneview Elementary, Lithonia
- Taliaferro County K-12, Crawfordville
- Taylor County Primary, Butler
- Taylor County Upper Elementary, Butler
- Thomas County Middle School, Thomasville
- Tiger Creek Elementary, Tunnel Hill
- Toomer Elementary, Atlanta
- Turner County Elementary, Ashburn
- Turner Elementary, Albany
- Westside Elementary, Rossville*
- Whitefoord Elementary, Atlanta
- Whitefoord Elementary, Atlanta
- Wings Alternative, Savannah

* - telehealth link to comprehensive SBHC

GASBHA Objectives
GASBHA Mission
List of Operational SBHCs
GASBHA Maps
Q: How long have you been doing rural health work?
A: I have been involved in rural health since 1998 when I came to work with Community Health Care Systems, Inc. (formerly Johnson County Center for Community Health). At that time, we were a single facility (FQHC) and have grown to become an 18-clinic organization in 14 counties.

Q: What are the unique needs in rural health?
A: That is a big question. Each rural community is unique in terms of its resources and needs. Many rural communities are more than 30 minutes from a hospital and even further away from a larger tertiary facility. Rural citizens frequently ‘go to larger areas for consumer needs’ but healthcare is a local commodity. People want to have a ‘relationship’ with their provider and have a sense that their provider knows and understands their environment- “the community they live in”.

Q: What are the challenges that rural communities face?
A: Oftentimes, people who live in rural communities do not work in the community where their children are attending school. In these communities, a school based health program can be a huge asset- providing access to healthcare right on the school campus without the parent being put into a position of leaving work, picking up their child from school and then taking their child possibly out of town for care.

Q: How have School-based health centers addressed the needs of rural communities?
A: School- based health centers have brought a resource ‘to the community’. As a school based health center, we are able to provide that relationship and sense of understanding. We can get to know and see the students while at the same time being a partner in the community and a resource for healthcare. With a school-based clinic, the child can be seen, the parent will know their child is getting quality care and medications they need may be provided at the school or available the next day. In addition, the school-based clinic can become the child’s medical home, well child visits can be completed at the school based clinic and the parent can be confident that their child is receiving routine care that will assess developmental milestones, etc. With the addition of telehealth resources, the school clinic can provide linkages to specialty care including behavioral health and therapy.
What is Covid-19?
The coronavirus is a virus that causes COVID-19 (Emory, 2020). COVID-19 is a respiratory disease that is transmitted person-to-person via droplet transmission (WHO, 2020). Disease symptoms include fever, dry cough, fatigue and difficulty breathing (Emory, WHO, 2020). Symptoms can appear 2-14 days after exposure (CDC, 2020). Emergency warning signs include trouble breathing, persistent chest pain or pressure, confusion, fever, persistent cough, fatigue, or bluish lips or face (CDC, 2020).

What does it do?
According to the WHO (2020), coronaviruses are a large family of viruses which causes the disease COVID-19. Coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS) (WHO, 2020). A majority of patients experience mild symptoms, while others experience more severe symptoms or even death (Emory, 2020).

Who does it affect?
Patients who are older and have pre-existing medical problems appear to be at the highest risk for complications (Emory, 2020). The disease has had the highest impact on rural and minority communities in Georgia. One example of this can be found in Dougherty County, Georgia. Albany is a rural community that has suffered the second largest number of deaths of all Georgia counties (GADPH, 2020). The demographic with the highest number of confirmed cases are African Americans (GADPH, 2020).

How do I prevent it?
Practicing hand and respiratory hygiene is the best way to protect others and yourself (WHO, 2020). When possible maintain at least a 1 meter distance between yourself and others and wear protective personal equipment (i.e. gloves and masks) when in public to prevent virus transmission or contraction (CDC, 2020). Maintaining a physical distance in public is important if you are in an area where COVID-19 is circulating (WHO, 2020). This is especially important since some infected persons may not yet be exhibiting symptoms or their symptoms may be mild (WHO, 2020).

What should I do if I have been exposed?
Self-isolation is an important measure that should taken by those who have COVID-19 symptoms, who have test positive for COVID-19 or who may have come in contact with someone who suspects they may have come in contact with the virus (WHO, 2020). Self-isolation is when a person who is experiencing COVID-19 symptoms stays at home and avoids going to public places (WHO, 2020).

What do I do if I feel sick?
If you feel sick, self-quarantine at home and monitor for symptoms (Emory, 2020). Self-quarantine means to separate yourself from others due to exposure to someone with COVID-19 even without symptoms (WHO, 2020). During self-quarantine you. The goal of the self-quarantine is to prevent transmission since people who become ill with COVID-19 can infect people immediately (WHO, 2020). Contact a medical professional (personal doctor, local hospital, primary care clinic, CDC or local health department) and discuss your symptoms (Emory, 2020). If you experience chest pain, serious difficulty breathing or any other type of medical emergency, call 911.

How will COVID-19 affect the upcoming school year?
The American Academy of Pediatrics has released a list of recommendations as well as resources that provide information on school re-entry and reopenings. Click here for more information.
The human papillomavirus (HPV) is the most common sexually transmitted infection in the United States (CDC, 2019). 80 million people are currently infected with HPV and almost 14 million new cases are reported annually (CDC, 2019). In most cases, HPV is a virus that goes away on its own and is mostly asymptomatic, however in some serious cases the virus can cause various cancers (CDC, 2019). The most reported complications associated with HPV are throat cancer in men, cervical cancer in women, and genital warts in both men and women (CDC, 2019).

Only 6 in 10 girls and 5 in 10 boys are vaccinated against HPV (Luria & Cardoza-Favarato, 2019). The FDA recommends a two-dose regimen of the HPV vaccine Gardasil 9 for boys and girls ages 9 to 14 years old (Luria & Cardoza-Favarato, 2019). For years there has been a large emphasis on providing HPV vaccinations to girls but not in boys, therefore cases of HPV in boys have begun to rise (NIH, 2020). Cancers of the head and neck are caused primarily by HPV and providers should be emphasizing cancer risk in both boys and girls (NIH, 2020).

According to the CDC, HPV infections (which cause most HPV cancers and genital warts cases) have dropped 86% amongst teens and 71% amongst young adult women due to an increase in vaccination rates (CDC, 2019). Among vaccinated women, the percentage of cervical precancers caused by the HPV has dropped 40% (CDC, 2019). Unfortunately, most vaccination data only pertains to women as there is less longitudinal HPV vaccine data on men. The following infographics show the current immunization rates in men and women and the impact HPV vaccines have had in the US:

Resources:
News: SBHC Update

After a year of planning, Clark county has opened a new SBHC at Hillsman Middle School. Thanks to the efforts of the Clark county school district and key community stakeholders including, Piedmont Athens Regional Foundation, the Athens Neighborhood Health Center and other community agencies and organizations. The clinic opened its doors in October of 2019. It features a comprehensive health clinic on-site with behavioral, dental, and physical health services. The clinic is open to both the school and local community from Monday to Friday.

Pictured left: A family at the Hillman Health Center. Pictured below: GASBHA and HHC staff at the center opening.