



ENHANCING THE COMMUNITY IMPACT OF SCHOOL-BASED HEALTH CENTERS IN RURAL NEW YORK VIA PARENTING EDUCATION: A PILOT STUDY

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Parent Education In-Service
September 15th, 2016

Impetus

- Email request from Christopher Kjolhede, MD (Bassett Director of School Based Health) to Professor John Sipple that stimulated the formation of our research team and our proposal for creating these integrated Extension and research efforts to enjoin Cornell expertise with the Bassett network and their communities:
- *John, I am hoping that you could help me. I continue to see profound poverty in our school-based health centers. I often drive back to Cooperstown very depressed about my inability to have much impact on these kids given the environment from which they come. What can I do? (Easy question, right?) Who is doing any research work in this area? Who is advocating for these kids and their families? I rarely feel totally helpless but I'm close for some of these situations. Any suggestions?*

Actions

- Formation of diverse research team
- Submission of several grant proposals
 - *LOI currently under development for the RWJF*
- CaRDI Roundtable Discussion
- Involvement of Cornell Institute of Public Affairs (CIPA) students

Overview—Larger Project

- Decades of research and practice have shown that being part of a supportive, inclusive, and capable community promotes mental, physical, and social well-being more than any other factors known to the social and medical sciences...[R]esidents and institutions can collectively improve the conditions in which they learn, play, work, and age...[T]his is why building a community's capacity to engage and to take care of its members is essential.

Emerging Action Principles for Designing and Planning Community Change (2015).
Community science, 1(1). Gaithersburg, MD www.communityscience.com.

Overview—Larger Project

- Rural residents face growing health care challenges. The closure of many rural hospitals increases spatial distance between rural populations and their healthcare providers, reducing access to both primary and emergency care
- Rural residents also face unique health challenges in their social norms. Rural residents' attitudes about health create what's termed a 'rural culture' of risky behavior. These attitudes tend to condone high drug and alcohol use, unprotected sexual intercourse, high teen pregnancy rates, low medical treatment rates and poor diets

Lichter, Daniel; Johnson, Kenneth. (2007). The Changing Spatial Concentration of America's Rural Poor Population.

Burton, Linda M., Lichter, Daniel T., Baker, Regina S., Eason, John M. 2013. Inequality, Family Processes and Health in the "New" Rural America.

Ricketts, Thomas C. 2000. Health Care in Rural Communities.

Hartley, David. 2004, Rural Health Disparities, Population Health and Rural Culture.

Sherman, Jennifer. 2006. Coping with Rural Poverty: Economic Survival and Moral Capital in Rural America.

Chang, Cynthia H. Sandra W. Hwang, McCall-Hosenfeld, Jennifer S. Rosenwasser, Lara, Hillemeier, Marianne M. and Carol S. Weisman, 2012.

Primary Care Physicians' Perceptions of Barriers to Preventive Reproductive Health Care in Rural Communities.

Overview—Larger Project

- Taken together, these conditions often result in high school dropout rates, low health quality, and low economic prosperity.
- Efforts to address rural poverty and the impacts of economic stress, the sustainability and viability of rural communities are increasingly in question. In combination with recent economic and demographic trends, lack of sound policy and well integrated systems exacerbate the disadvantaged state of health, education, and economic opportunity in rural areas.

Parent Education Community Assessment Tool

- CAT being used for larger project
- CAT being used for a CIPA consulting project

Current Project

- *Enhancing the Community Impact of School-Based Health Centers in Rural New York via Parenting Education: A Pilot Study*
- Informed by SBHC Site Visit
- Narratives

Project Summary

- This integrated research-extension pilot project explores the feasibility and impact of expanding existing services provided by School Based Health Centers (SBHCs) in rural NY, to enhance sustainability of families and communities.
- The extension component involves a community-based intervention to provide parent education in SBHCs; the research component examines impact of SBHCs and parent education.

Background and Justification

- Many rural communities in the US – especially in the Appalachian Region - are facing severe challenges associated with both long-term economic re-structuring and the Great Recession of 2008. These include economic depression, aging populations, and out-migration to cities which in turn lead to increasing poverty rates and poor employment prospects. A decline in married-couple families and parental supervision, and attitudes that often condone risky health behaviors, are additional consequences.

Background and Justification

- Families' well-being and children's development and life opportunities have been negatively affected by these challenges. The proposed work will develop and evaluate a community-based intervention focused on parenting education and support services as a means to help counteract these forces.
- The project explores the impact of building on existing social service infrastructures provided by School Based Health Centers (SBHCs) in rural counties.

Background and Justification

- The pilot sites house SBHCs operated by Bassett Healthcare Network of Cooperstown NY. SBHCs are a proven, evidence-based intervention for improving access to health care and health outcomes for medically underserved youth.
- However, the beneficial impacts are often limited by the environment outside the school. Providing parent education and support services may improve youth outcomes, families' quality of life, and engagement in these communities; and SBHCs may be a natural hub for community-based parent education programming. This research-extension project explores the feasibility and impact of the intervention strategy.

Extension Objectives

1. Identify specific parenting needs of families whose children receive healthcare services through SBHCs in rural communities in upstate NY
2. Improve access to parent education programs for parents whose children receive healthcare services through SBHCs in rural communities in upstate NY.
3. Increase knowledge of optimal parenting and caregiving practices for parents through Cornell Cooperative Extension (CCE) parent education programs.
4. Increase opportunities for behavioral change for parents who participate in CCE parent education programs.
5. Develop a community-based approach to healthy families through coordinated efforts of CCE parent educators and SBHC staff in rural communities.

Research Objectives

1. Document the impact of SBHCs on medical access, attitudes, knowledge and behaviors from youth and families in rural communities.
2. Determine the initial and potential impact of adding parenting education as part of the services in the SBHCs in these rural communities.
3. Identify (to reduce) obstacles that limit the impact of SBHCs including factors that affect enrollment and medical encounters, factors that limit access to services, and factors that limit patient compliance with medical recommendations.
4. Document effects of community based approach on youth and parent communication with schools and SBHC.
5. Investigate promising ways to broaden the impact of SBHCs and community driven initiatives on the schools and these rural communities.

Who Will Benefit?

- Families, youth and children of the targeted SBHCs and counties
- SBHC staff, educators in the intervened schools and community members
- Schools, school districts and communities and state and local governments and agencies
- Service providers and researchers as the the initiative is developed to potentially be transferable and scalable for other settings