



TESTIMONY

**District of Columbia City Council
Committee on Government Operations and the Environment
Healthy Schools Act Hearing
March 26, 2010**

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Executive Director**

Good Morning, and thank you Chairman Gray and Chairman Cheh and honorable members of the DC Council for the opportunity to testify today. My name is Jennifer Leonard and I serve as the Executive Director of the DC Assembly on School Health Care. I am also a member of the DC Healthy Youth Coalition.

The Healthy Schools Act is a tremendous step in the right direction towards improving the health and well-being of our DC children and adolescents. The DC Assembly wholeheartedly applauds your efforts to make significant changes that will positively impact our youth through the schools.

I would like to bring particular attention to, and express support for, language in the Act that calls for a plan to expand the network of school health centers in our public senior high schools.

School health centers are an excellent means of providing access to quality and comprehensive pediatric health care. They address the most common health needs of children and adolescents by providing a broad range of primary, mental, oral, and preventive health services in the schools. They have been shown to increase seat time in the classroom, reduce absenteeism, decrease inappropriate emergency room utilization and avoidable hospitalizations, lower Medicaid costs, and increase use of mental health services, among many other important measures, including keeping children healthy and ready to learn.

We know from studies and reports that “the US health care service system is failing adolescents, many of whom, for various reasons are left to seek care, even sick care, on their own....Preventive and primary, reproductive and behavioral health care are not at all

well matched to the unique needs of adolescents...There are too few teen-friendly sites of care...care is available often only in scheduled week-day time slots; most health service are difficult for teens to access; privacy and confidentiality are not always respected; parents are an after-thought; physical, behavioral and reproductive services are seldom co-located; and providers are often more comfortable serving younger children or adults, and frequently cannot related in ways that are culturally and linguistically effective.¹”

School health centers address all of these inadequacies of the traditional health care service setting.

At a time when need for access to free or low-cost quality health care is on the rise, adolescent health indicators are calling out for different and better ways to reach our teens, and many of our public schools are being modernized, it seems an opportune time to develop the capacity in our schools to provide comprehensive health care services for the medically underserved.

While school health centers are engaged in health education for its students, we know that not all schools will have the capacity or need for a school health center. However, access to high quality health education is an important component of student well-being. Lessons taught in the classroom extend beyond care provided in a school health center. That is why we support the 100% solution. We believe that ALL schools should offer a curriculum that helps ALL students meet the goals of the DC Health Learning Standards. OSSE can play an important role in ensuring that health education is offered by evaluating schools' compliance with these standards, a responsibility noted by DC Appleseed in its most recent HIV/AIDS report card.

All children need great schools AND ready access to first class health care and education to succeed. We recognize we are in a very difficult budget climate - but let's not pass up the occasion to further and complete our investment in our schools and our students and provide long-term opportunities to provide ready access to the health services and health education that they need.

Thank you for your time and consideration.

¹ McManus, Margaret A. and Harriette B. Fox. "Making the Case for Addressing Adolescent Health Care." January 2007.