

# UNDERSTANDING AND ADDRESSING THE SOCIAL INFLUENCERS OF HEALTH & EDUCATION

October 26, 2021



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## TODAY'S PRESENTERS



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National Center  
for School Mental Health



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Associate Director of Research  
and Evaluation  
Center for Health  
and Healthcare in Schools



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Senior Program Manager of Quality,  
Research & Evaluation  
School-Based Health Alliance



# School-Based Health Alliance

## Transforming Health Care for Students

### Our **Focus**

The School-Based Health Alliance Works to Support & Grow SBHCs

#### Policy



Establishes and advocates for national policy priorities

#### Standards



Promotes high-quality clinical practices and standards, including for telehealth

#### Data



Supports data collection and reporting, evaluation, and research

#### Training



Provides training, technical assistance, and consultation

We support the improvement of students' health via school-based health care by supporting and creating community and school partnerships [www.sbh4all.org](http://www.sbh4all.org)







A **school-based health center** is a shared commitment between a school, community, and health care organizations to support students' health, well-being, and academic success by providing preventative, early intervention, and treatment services where

# Center for Health and Health Care in Schools

*Advancing School-Connected Programs and Policies for Children's Health and School Success*

CHHCS is a national organization using a public health lens to provide program development, technical assistance, research translation, and evaluation.

Our mission is to build and sustain equitable environments for children to thrive.



The Center for  
Health and Health Care  
in Schools

Visit the CHHCS website at [www.healthinschools.org](http://www.healthinschools.org)

# National Center for School Mental Health (NCSMH)

Established in 1995 with funding from the Health Resources and Services Administration

The **NCSMH mission** is to strengthen policies and programs in school mental health to improve learning and promote success for America's youth.



UNIVERSITY *of* MARYLAND  
SCHOOL OF MEDICINE



Visit the NCSMH website at [www.schoolmentalhealth.org](http://www.schoolmentalhealth.org)



# Comprehensive School Mental Health Systems

- Provide a **full array of supports and services** that promote positive school climate, social emotional learning, mental health and well-being, while reducing the prevalence and severity of mental illness
- **Built on a strong foundation of district and school professionals**, including administrators and educators, specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses, other school health professionals) in **strategic partnership** with **students, families and community health and mental health partners**
- Assess and address the **social and environmental factors** that impact health and mental health





IMPROVING HEALTH AND  
MENTAL HEALTH IN SCHOOLS

National  
Quality  
Initiative



*We seek to unleash the potential of SBHCs and CSMHSs to catalyze school administrators, teachers, health care organizations, and youth development staff to join with students and families to create the systemic conditions – values, beliefs, policies, resources, practices, programs, services, and partnerships – **that enable ALL children to thrive in the classroom and in life.***



IMPROVING HEALTH AND  
MENTAL HEALTH IN SCHOOLS

**National  
Quality  
Initiative**



*Challenging comprehensive school-based health centers and school mental health systems to adopt, report, and improve standardized performance measures*

## **NQI Goals**

1. Improve quality of care and use of best business practices that promote sustainability among 50 percent SBHCs/CSMHSs
2. Increase the number of and utilization of SBHCs/CSMHSs by 15 percent
3. Increase state policies and programs that promote quality, sustainability, and growth of SBH services



IMPROVING HEALTH AND  
MENTAL HEALTH IN SCHOOLS

**National  
Quality  
Initiative**



**SBHCs and CSMHs are well-positioned to  
assess social influencers of health and  
education and act**

# Agenda

1. Introduction to the Social Influencers of Health and Education (SIHE)
2. Assessing SIHE through Screening and Surveillance
3. Providing Multi-Tiered Interventions to Address Unmet SIHE Needs



# Our Work

- Brief #1: *Understanding the Social Influencers of Health and Education* (August 2020)
- Brief #2: *Assessing Social Influencers of Health and Education* (February 2021)
- Brief #3: *Addressing Social Influencers of Health and Education Using a Multi-Tiered System of Supports Framework* (June 2021)



A child's health status and educational achievement are influenced by multiple factors, many of which are external and not easily controlled by the child or parents/guardians. These factors, such as the safety of the neighborhood, a family's socioeconomic status, access to needed services, the availability of healthy food, the quality of the physical environment, and experiences with racism or discrimination, profoundly impact well-being and can severely limit opportunities for growth. Despite

limitations on the extent to which these factors can be changed, staff from school-based health centers (SBHCs) and comprehensive school mental health systems (CSMHSs) are well-positioned to assess and take actions to help overcome these obstacles to student achievement, social-emotional development, and well-being. This brief defines key concepts and outlines how school health service systems can play a role in addressing factors that affect student academic and health outcomes.

**School-based health centers (SBHCs)**

(a partnership between schools and a local health care organization)

Provide array of services that may include primary care, mental health, social services, oral health, reproductive health, nutrition education, vision, and health promotion.

Care may be provided to students, as well as school staff, family members, and others in the community during and after school hours, and often during the summer.<sup>1</sup>

The CDC Community Preventive Services Task Force recommends SBHCs in low-income communities to improve educational and health outcomes.<sup>2</sup>

**Comprehensive school mental health systems (CSMHSs)**

Provide array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, and reduce the prevalence and severity of mental illness.

Built on a strong foundation of district and school professionals, including administrators, educators, and specialized school-based support personnel.

Builds a strategic partnership with students and families, as well as community health and mental health organizations.<sup>3</sup>

**What are the Social Influencers of Health and Education?**

The influencers of health and education are the social determinants of health.

Social determinants of health are the conditions in our lives that affect a wide range of health, learning, and quality-of-life outcomes. These include environmental or economic conditions, social conditions, and personal characteristics. Research shows that positive change when social and environmental conditions are addressed early on, the better the outcomes.<sup>4</sup> Research also shows that only having a positive or negative social influence on health and education can also drive student outcomes. The term Social Influencers of Health and Education (SIHE) refers to social and environmental factors that influence the health and well-being of school-aged children and youth.<sup>5</sup>

1 • Understanding Social Influencers of Health and Education



**Schools provide an ideal setting to deliver interventions that support student learning, health, and well-being.**

Many K-12 schools partner with community resources to provide wraparound services, expand health and mental health services, and offer a continuum of health and learning supports. Research confirms that implementing prevention and health promotion programs, as well as delivering services in schools, improves access and reduces barriers to services, increases utilization and follow-up, reduces stigma, and is associated with a host of positive health and education outcomes.<sup>1,2</sup>

Factors that impact health, well-being, and learning are also known as Social Influencers of Health and Education (SIHE). The SIHE are essential to understand because the social, environmental, or economic conditions in which individuals are born, live, learn, play, work, worship, and age, impact their health status and

educational achievement.<sup>3</sup> Screening and/or surveillance for SIHE can uncover the extent to which these may positively or negatively impact individuals, groups, or the whole school community.<sup>4</sup> With this information, schools with their integrated health and mental health professionals – and namely school-based health centers (SBHCs) and comprehensive school mental health systems (CSMHSs) – can provide interventions that mitigate the effects of SIHE associated with poor short- and long-term outcomes.

This brief describes how the use of a multi-tiered system of supports (MTSS) framework for SIHE-related interventions promotes alignment with and can increase the benefits of other academic, social-emotional, and behavioral interventions already offered in school.

**Recommended Citation:** Center for Health and Health Care in Schools, School-Based Health Alliance, National Center for School Mental Health. (2021). Addressing Social Influencers of Health and Education Using a Multi-Tiered System of Supports Framework. Washington, D.C.: School Health Services National Quality Initiative.

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For more information on SBHCs, CSMHSs, and how the education and health sectors can together address SIHE, visit:



February 2021

**Assessing Social Influencers of Health and Education**

**Overview of SIHE Assessment**

K-12 school-based staff and their community partners collect and use data to assess learning, social-emotional, and mental health. Familiar measures of student health and learning outcomes, and challenges experienced by students, but may not be captured by traditional measures of student health and educational outcomes. By assessing the social influencers of health and education (SIHE), schools and community partners providing social and emotional learning and mental health services can better understand the social and environmental factors that affect the health and well-being of students and their families.<sup>1</sup> Staff from school-based health centers and comprehensive school mental health systems (CSMHSs) are well-positioned to assess and address barriers to optimal health and learning.

**SIHE Assessment**

Understanding the role SIHE play in student well-being. This brief describes how to develop targeted strategies and actions for improving outcomes. The Organization Commission on Social Determinants of Health, and implementing programs and services that foster social and emotional learning, and implementing programs and services that foster social and emotional learning, and implementing programs and services that foster social and emotional learning, and implementing programs and services that foster social and emotional learning.<sup>2</sup> In schools, measurement of SIHE, and implementing programs and services that foster social and emotional learning, and implementing programs and services that foster social and emotional learning, and implementing programs and services that foster social and emotional learning, and implementing programs and services that foster social and emotional learning.<sup>3</sup>

SBHCs, CSMHSs, and how the education and health sectors can together address SIHE, visit:



**The Center for Health and Health Care in Schools**

# Understanding the Social Influencers of Health and Education

- Provides an overview of the SIHE
- Describes the role of schools, as well as SBHCs and CSMHSs
- Presents a call to action and next steps for the field



A child's health status and educational achievement are influenced by multiple factors, many of which are external and not easily controlled by the child or parents/guardians.

These factors, such as the safety of the neighborhood, a family's socioeconomic status, access to needed services, the availability of healthy food, the quality of the physical environment, and experiences with racism or discrimination, profoundly impact well-being and can severely limit opportunities for growth. Despite

limitations on the extent to which these factors can be changed, staff from school-based health centers (SBHCs) and comprehensive school mental health systems (CSMHSs) are well-positioned to assess and take actions to help overcome these obstacles to student achievement, social-emotional development, and well-being. This brief defines key concepts and outlines how school health service systems can play a role in addressing factors that affect student academic and health outcomes.

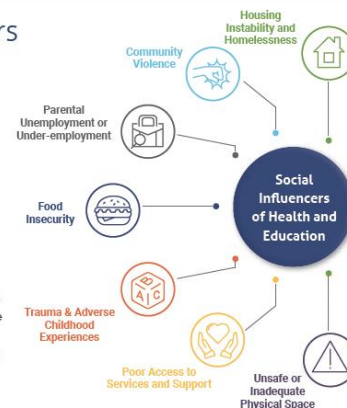
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Builds a strategic partnership with students and families, as well as community health and mental health organizations.<sup>2</sup>

## What are the Social Influencers of Health and Education?

The influencers of health and education are rooted in the social determinants of health.

Social determinants of health refer to the characteristics in a child's surroundings that affect a wide range of health, functioning, prevalence of risks, and quality-of-life outcomes—in other words, the social, environmental or economic conditions in which individuals are born, live, learn, play, work, worship, and age.<sup>3</sup> To highlight the potential for positive change when social and environmental factors are identified and addressed early on, the term *influencers* has been favored over determinants.<sup>4</sup> Research underscores that social influencers of health not only have a positive or negative impact on the health of an individual child, they can also drive student educational outcomes.<sup>5</sup> Therefore, we propose the term Social Influencers of Health and Education (SIHE) to reflect the social and environmental factors that affect the growth, development, and well-being of school-aged children, youth, and their families.



1 • Understanding Social Influencers of Health and Education



# Social & Environmental Conditions for Children in the U.S.

## The Good

- 96% received needed healthcare in the past year
- 96% have never been a victim of or a witness to violence
- 95% live in a safe neighborhood
- 93% have health insurance

## The Bad

- 29% live in neglected neighborhoods
- 19% live in poverty
- 15% live in households where it is hard to get by on the family income
- 5% of households with children cannot afford food



Source: NSCH 2019; NSCH 2019-2020



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# Conditions for Students During the COVID-19 Pandemic

**Local**  
**The pandemic intensified hunger in the D.C. region. Now, there's a push to end it for good.**

**1 in 5 Families Report Pandemic-Era Patient Care Access Hardship**  
Although telehealth has filled in some gaps, families still report challenges with patient care access and a preference for in-person care.

**DETROIT**  
**The world is going virtual but many in Detroit are still left behind**  
**Dana Afana** Detroit Free Press  
Published 6:01 a.m. ET Oct. 2, 2021

**COVID-19 pandemic has worsened food insecurity, especially in households with children**

3rd party ad content  
**"It's just hard to find somebody': Navigating childcare during the COVID pandemic**  
**Katelyn Waltemyer** Jackson Newspapers  
Published 9:29 a.m. ET Oct. 18, 2021 | Updated 10:02 a.m. ET Oct. 18, 2021

**Education**  
**NYC school attendance drops among homeless students amid coronavirus, report says**  
Updated: Oct. 20, 2021, 10:31 a.m. | Published: Oct. 20, 2021, 9:57 a.m.

**More than 140,000 U.S. children lost a primary or secondary caregiver due to the COVID-19 pandemic**  
*New study highlights stark disparities in caregiver deaths by race and ethnicity, calls for urgent public health response.*



Review Article | [Published: 27 September 2021](#)  
**Why lockdown and distance learning during the COVID-19 pandemic are likely to increase the social class achievement gap**  
[Sébastien Goudeau](#) [Camille Sanrey](#), [Arnaud Stanczak](#), [Antony Manstead](#) & [Céline Darnon](#)







# SCHOOL-BASED HEALTH ALLIANCE

The National Voice for School-Based Health Care



CENTER FOR SCHOOL, HEALTH AND EDUCATION



The Center for Health and Health Care in Schools

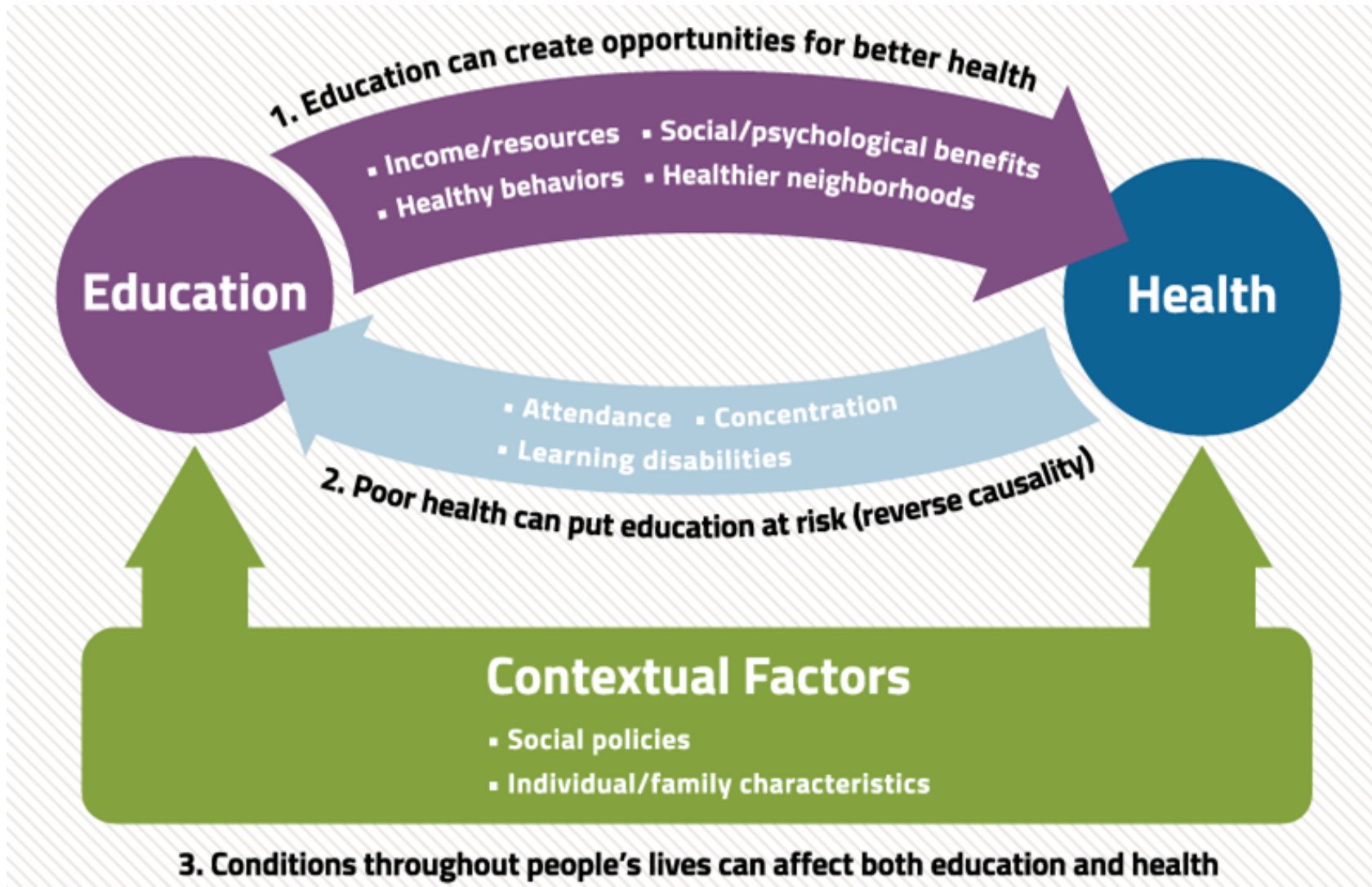
## Social and environmental stressors contribute to health and learning outcomes

- Asthma (exacerbated by poor indoor air quality in the home)
- Obesity (lack of nutritious food options; lack of parks and unsafe neighborhoods that contribute to sedentary behavior)
- Mental and behavioral health problems (including those caused by ACEs)
- Lower math scores
- Lower English language arts scores
- Chronic absenteeism
- Disengagement from school
- Discipline referrals
- School drop-out
- On-time high school graduation





# Reciprocal Effect of Health & Education



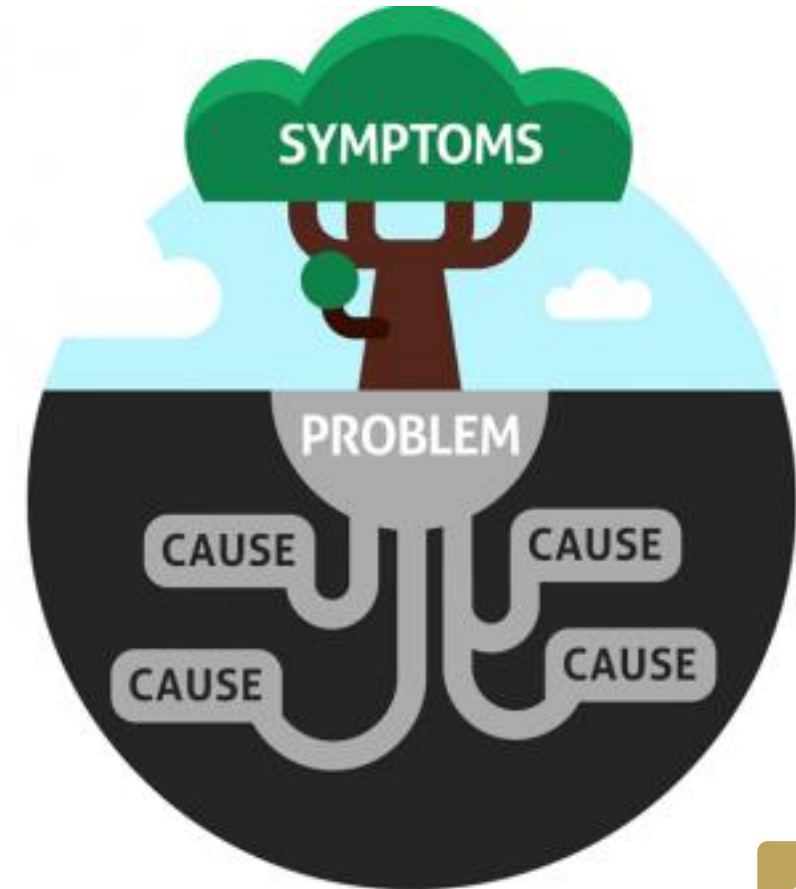
Source: VCU Center for Society & Health



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## Understanding the “Root Causes”

- Requires an understanding of the environments and conditions in which people are born, grow, live, learn, work, and age
- Are the fundamental drivers of health and mental health status, and long-term success





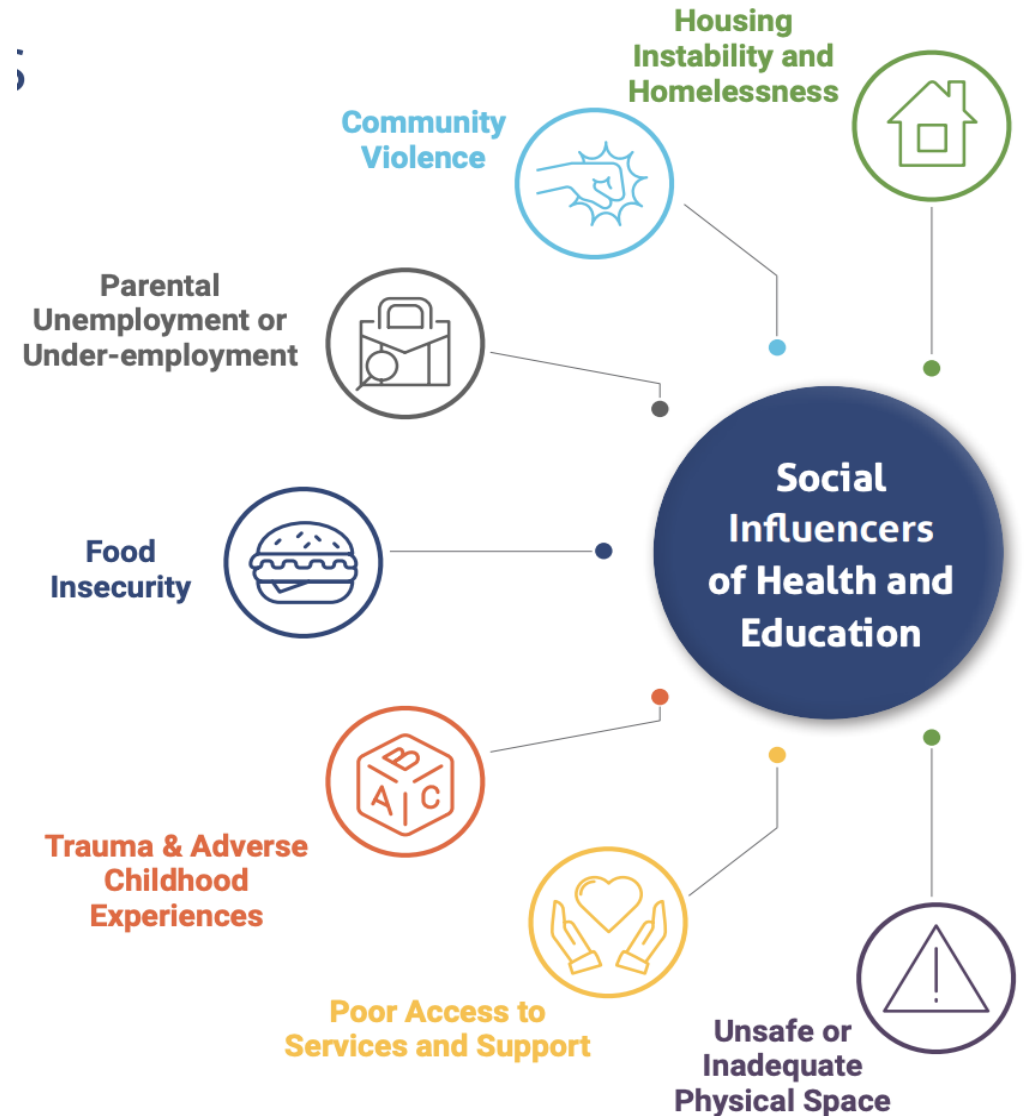
## Social Determinants of Health (SDOH/SDH)

- Medical care may be responsible for only 10–15% of health outcomes; SDOH contribute to the vast majority of individual outcomes



# Social Influencers of Health and Education

- *A child's health status and educational achievement are influenced by multiple factors, many of which are external to the individual*
- Often experienced disproportionately by race and ethnicity and contribute to health inequities, learning disruptions, and opportunity gaps



# Social Influencers are Both Positive and Negative

**When Protective Factors  
Outweigh Risk Factors**



**Child is likely to be resilient.**

**When Risk Factors Outweigh  
Protective Factors**



**Child is vulnerable.**

# Assessing Social Influencers of Health and Education

- Provides screening and surveillance considerations
- Lists examples of each
- Offers guiding questions to get started



February 2021

## Assessing Social Influencers of Health and Education

### Overview of SIHE Assessment

K-12 school-based staff and their community partners collect and use data to assess learning, social-emotional growth, health, and mental health. Familiar measures of student health and academic success flag both opportunities and challenges experienced by students, but may not identify the root causes of negative health and educational outcomes. By assessing the social influencers of health and education (SIHE), schools and community partners providing school health services can better understand the social and environmental factors that affect the development and well-being of youth and their families.<sup>1</sup> Staff from school-based health centers (SBHCs) and comprehensive school mental health systems (CSMHSs) are well-positioned to uncover the SIHE that serve as facilitators or barriers to optimal health and learning.

### Importance of SIHE Assessment

Measuring the SIHE is the first step to understanding the role SIHE play in student well-being. This knowledge can then be used to develop targeted strategies and actions for improving outcomes. A five-year study by the World Health Organization Commission on Social Determinants of Health concluded that measuring, understanding, and implementing programs and services that foster child health and development are critical to achieving health equity.<sup>2</sup> In schools, measurement of SIHE can help schools with needs assessments, program and partnership planning, referral pathway development, intervention and treatment planning. This brief highlights screening and surveillance as methods by which SBHCs and CSMHSs can assess SIHE, and outlines how assessing SIHE can inform school-, district-, and state-led activities to support student health and academic achievement.



For more information on SBHCs, CSMHSs, and how the education and health sectors can together address SIHE, visit:



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## Digging Deeper: SIHE Assessment

Schools collect and use data to assess learning, social-emotional growth and development, health, and mental health.

Schools can collect additional information around the SIHE to better understand the social and environmental factors that affect the development and well-being of students and families.



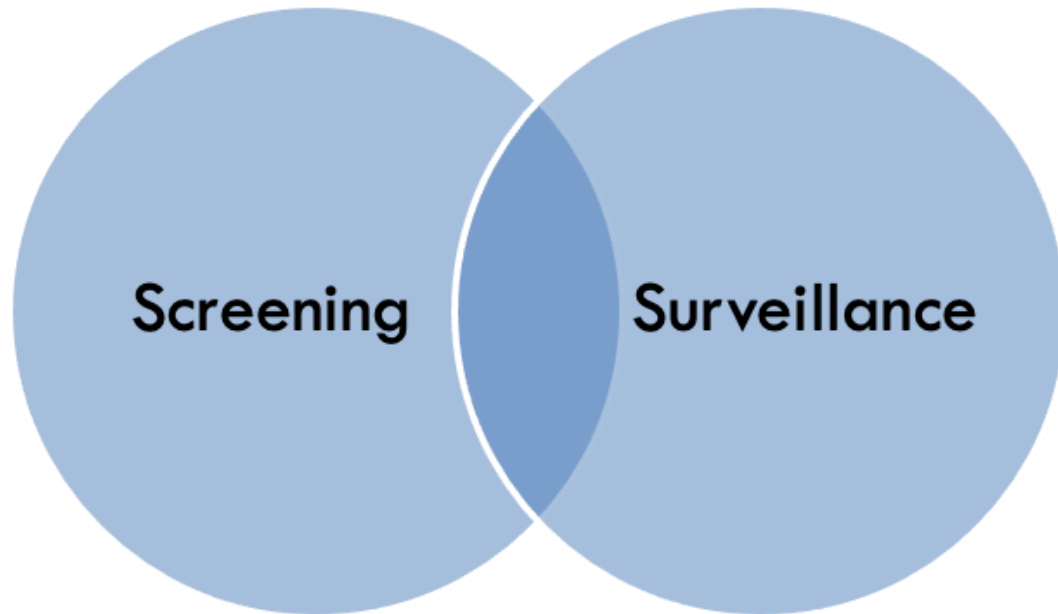
## SIHE Screening

- Use of a systematic tool or process to identify the strengths and needs of students
- Universal screening: all students, regardless of risk status
- Targeted screening: subgroup(s) of students identified at-risk

## SIHE Surveillance

- The systematic collection and reporting of data to monitor patterns and trends
- New versus existing measures
  - Publicly available surveillance data at national, state, local levels
  - School-wide surveys and questionnaires
    - Panorama for Distance & Hybrid Learning Survey
    - Community and Youth Collaborative Institute (CAYCI) School Experience Surveys

## Two Approaches to Learn More



**Use of both screening and surveillance to get a well-rounded perspective of student strengths and gaps**



**Use of surveillance data tells us that we need to screen for student strengths and gaps at the individual level**



# Questions to Ask Before Embarking on SIHE Assessment

1. What SIHE-related measurement activities already exist?
2. What is the scope of your SIHE measurement activities?
3. What are the desired actions and strategies you seek to implement to address SIHE?
4. What is feasible?
5. What are the ethical and regulatory considerations?

# SIHE Screening Considerations

- Existing versus new measures
- Many screening tools are developed for parent/guardian self-report of their child's experiences
- Mandatory reporting
- Assuring confidentiality



# Screening Examples

Accountable Health  
Communities Health-  
Related Social Needs (AHC  
HRSN) Screening Tool

Family Needs Screening  
Tool (FAMNEEDS)

Income, Housing,  
Education, Legal Status,  
Literacy, and Personal  
Safety (HELLP)

Just Health Mobile  
Application

Pediatric ACEs Screening  
and Related Life Events  
Screener (PEARLS)

Protocol for Responding to  
and Assessing Patients'  
Assets, Risks, and  
Experiences (PRAPARE)  
Assessment Tool

Rapid Assessment for  
Adolescent Preventative  
Services (RAAPS)

SEEK Parent Screening  
Questionnaire-R (SEEK PRQ-  
R)

Social Needs Screening  
Toolkit


Upstream Risk Screening  
Tool and Guide

Well Child Care, Evaluation,  
Community Resources,  
Advocacy, Referral,  
Education Survey  
Instrument (WE CARE)




# Screening Examples


## Rapid Assessment for Adolescent Preventative Services (RAAPS) *Possibilities for Change*

 Administered by a health provider or clinical staff; self-report by individual  
Often used in clinical settings  
Paper version available  
**Core screener:** 21 questions  
**Supplemental screener:** 11 questions  
Can be administered in 5 minutes

 Children, 9-12 years old  
Adolescents, 13-18 years old  
Young adults, 19-24 years old

 Cost for screening tool and training

 English  
Spanish


 Academics (e.g., grades, missed days of school)  
Basic needs (e.g., food)  
Housing instability





# Screening Examples

## Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE) Assessment Tool


*National Association of Community Health Centers*

 Administered by a health provider, clinical staff, or non-clinical staff around a clinical visit or for proxy-report before or after a visit by an individual on behalf of a child  
Often used in clinical settings  
Paper and online versions available  
**Core screener:** 17 questions  
**Supplemental screener:** 4 questions

 Adults (in this case, parents, guardians, and caregivers)

 Free screening tool and free training available

 Arabic  
Bengali  
Burmese  
Chinese (Simplified)  
Chinese (Traditional)  
Chuukese  
Farsi  
French  
German  
Hindi  
Karen  
Karenni  
Khmer  
Korean  
Lao  
Marshallese  
Nepali  
Portuguese  
Russian  
Somali  
Spanish  
Swahili  
Tagalog  
Tongan  
Uzbek  
Vietnamese

 Education  
Employment  
Housing instability  
Income  
Insurance status  
Languages spoken  
Migrant/seasonal farm work  
Social support  
Transportation  
  
*Optional measures:*  
incarceration history,  
refugee status, safety,  
and domestic violence

# Screening Examples

## Pediatric ACEs Screening and Related Life Events Screener (PEARLS) *Bay Area Research Consortium on Toxic Stress and Health*

### Children

Designed for proxy-report by an individual on behalf of a child or self-report by a child  
Often used in clinical settings  
Paper version available  
**Part 1:** 10 questions  
**Part 2:** 9 questions



Parents, guardians, or caregivers responding for their child, 0- 11 years old



Free screening tool and free training available



Arabic	Korean
Armenian	Laotian
Cambodian	Punjabi
Chinese	Spanish
English	Russian
Farsi	Tagalog
Hindi	Thai
Hmong	Vietnamese
Japanese	



Community violence  
Discrimination  
Food insecurity  
Housing instability  
Interaction with the criminal justice system  
Physical, mental, verbal, sexual and substance abuse in the home

### Teens

Administered by a health provider or clinical staff; self-report by individual  
Often used in clinical settings  
Paper version available  
11-24 questions



Parents, guardians, or caregivers responding for their adolescent child, 12-19 years old;  
Self-report for adolescents, 12-19 years old



Free screening tool and free training available

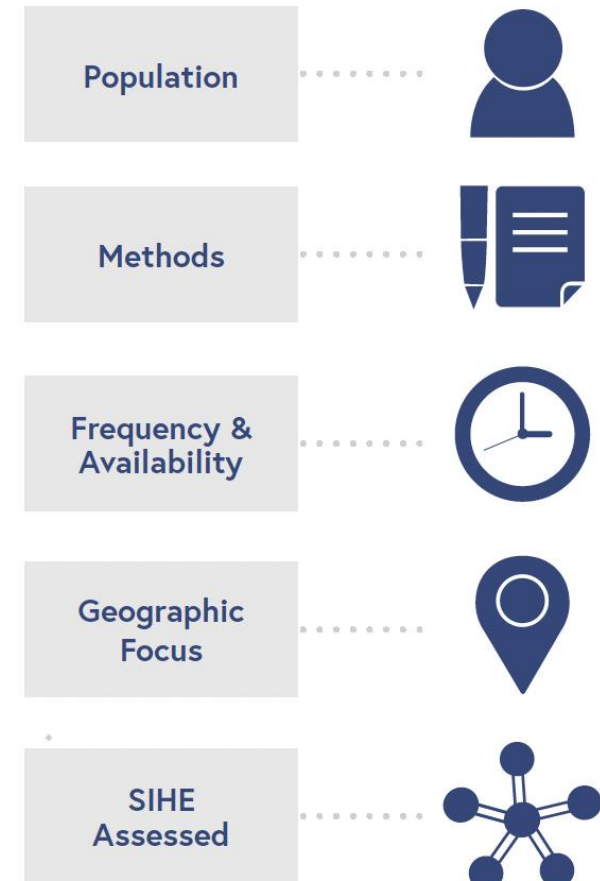
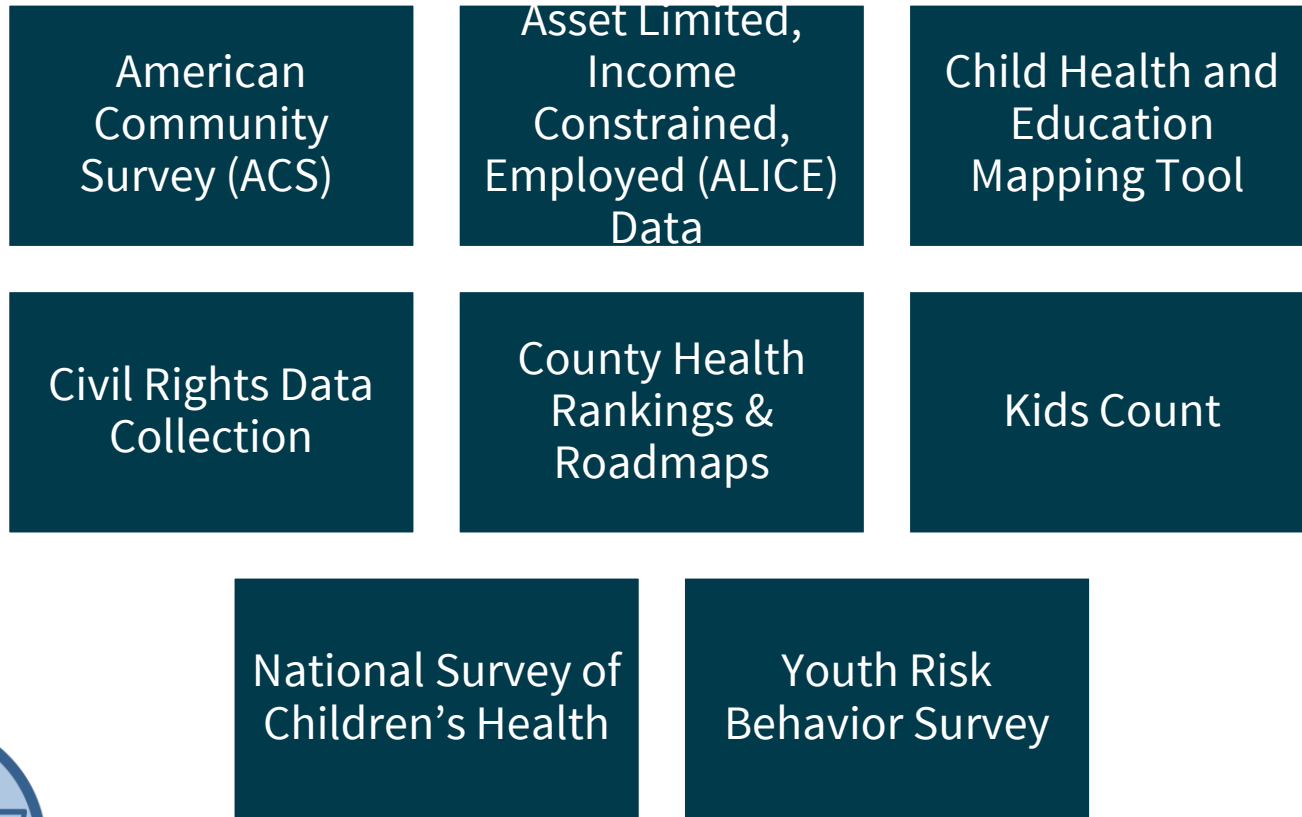


Arabic	Korean
Armenian	Laotian
Cambodian	Punjabi
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English	Russian
Farsi	Tagalog
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Hmong	Vietnamese
Japanese	



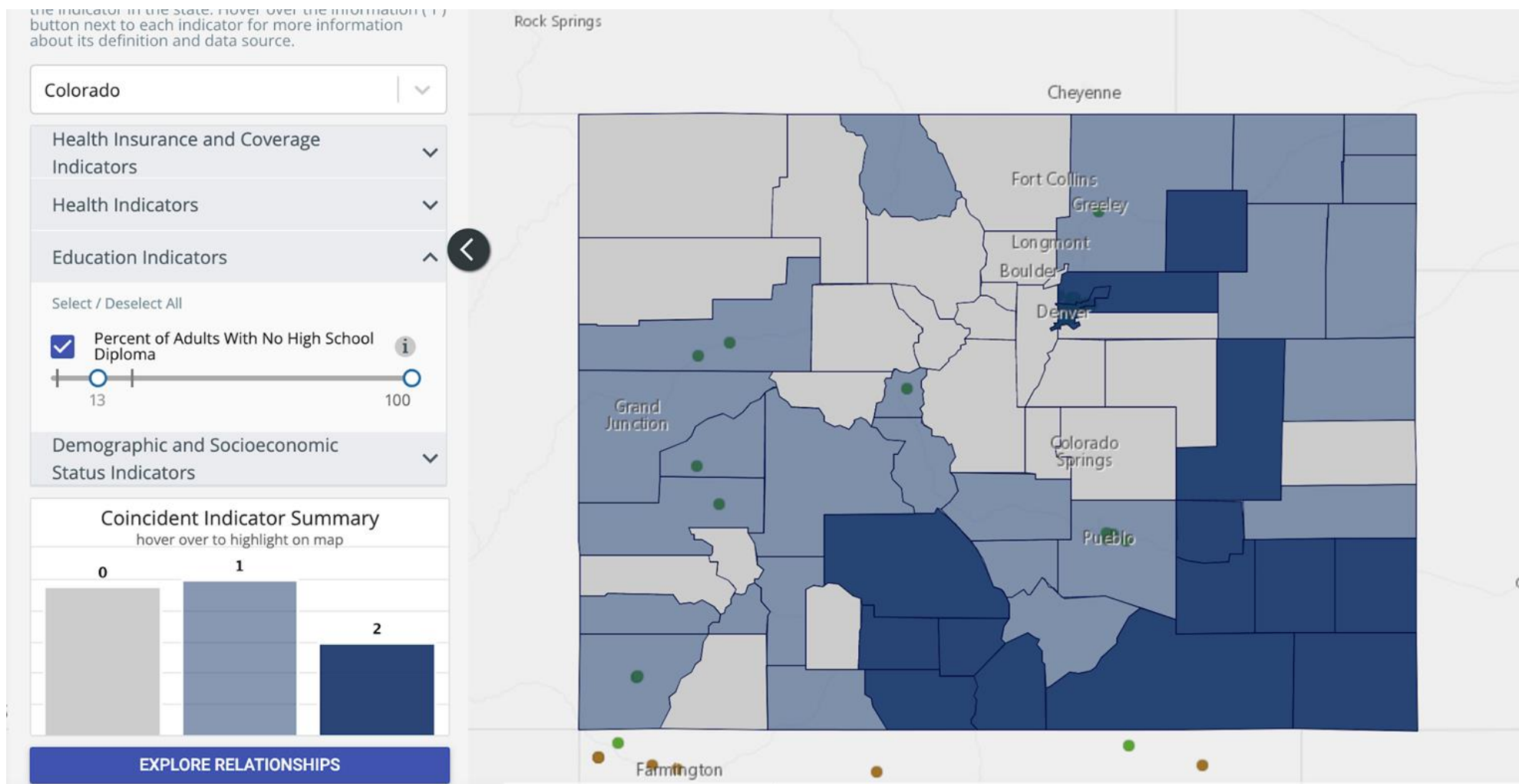
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Housing instability  
Interaction with the criminal justice system  
Physical, mental, verbal, sexual and substance abuse in the home

# Surveillance Examples





# Surveillance Example: Child Health and Education Mapping Tool





## After Assessment, What Next?

- Data about the SIHE can support school-, district- or state-level improvements through:
  - Coalition-Building
  - Needs Assessments & Resource Allocation
  - Care Coordination & Partnership Development
  - Intervention & Treatment Planning
  - Policy Development

# Addressing Social Influencers of Health and Education Using a Multi-Tiered System of Supports Framework

- Provides an overview of the use of an MTSS for SIHE interventions
- Lists examples at each tier



Schools provide an ideal setting to deliver interventions that support student learning, health, and well-being.

Many K-12 schools partner with community resources to provide wraparound services, expand health and mental health services, and offer a continuum of health and learning supports. Research confirms that implementing prevention and health promotion programs, as well as delivering services in schools, improves access and reduces barriers to services, increases utilization and follow-up, reduces stigma, and is associated with a host of positive health and education outcomes.<sup>12</sup>

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# Addressing SIHE Using a Multi-Tiered System of Supports (MTSS) Framework

Schools commonly use a three-tiered framework called a multi-tiered system of supports (MTSS) to deliver instructional or behavioral intervention to students.

Using an MTSS framework for SIHE facilitates the delivery of interventions to students dependent on their level of need



**SCHOOL-BASED  
HEALTH ALLIANCE**

The National Voice for School-Based Health Care



**Tier 3: Individual SIHE student interventions that address more serious concerns** and prevent the worsening of symptoms that can impact daily functioning.

This tier indicates more individualized services and supports

**Tier 2: Preventing risk factors or early-onset of problems** from progressing for a **targeted group of students** thought or assessed to have more intense needs due to their experience with SIHE.

This tier provides selective services and supports.

**Tier 1: Promoting health and preventing adverse outcomes** associated with SIHE **among all children** in the student population.

This tier provides universal services and supports.





**TIER  
1**

**Tier 1** focuses on promoting health and preventing adverse outcomes associated with SIHE among all children in the student population based on available school, community and population data. This tier provides universal services and supports through strategies such as:

- Universal health and mental health literacy interventions
- Prevention and health promotion programs and policies
- Health communications and resource dissemination
- School-community partnerships with health and human service agencies
- Health and wellness events
- Professional development for school and community staff to build knowledge and awareness
- School-wide surveys about student assets and needs
- School or district policies that advance equity

**TIER  
2**

**Tier 2** focuses on preventing risk factors or early-onset of problems from progressing for a targeted group of students thought or assessed to have more intense needs due to their experience with SIHE. This tier provides selective services and supports through strategies such as:

- Targeted screening
- Referral and follow-up activities<sup>7</sup>
- Small groups for students coping with specific challenges
- Support groups for at-risk families
- "Trainings and workshops to remediate limited knowledge or skills"






**TIER  
3**

**Tier 3** focuses on individual SIHE student interventions that address more serious concerns and prevent the worsening of symptoms that can impact daily functioning. This tier includes more individualized services and supports, such as:

- Individual screening
- Case management
- Care coordination
- Motivational interviewing
- Individual, group, or family counseling








SIHE	Example of Potential Health Impact of SIHE	 TIER 1 Intervention Example	 TIER 2 Intervention Example	 TIER 3 Intervention Example
<b>Unsafe housing</b>	Living in older homes that are in disrepair may cause exposure to lead-based paint and elevated blood levels.	Disseminate information and host meetings in partnership with the local health department to educate all families about the dangers of lead exposure.	Conduct virtual or in-person home visits with families living in areas with high rates of lead poisoning to assess their risk and inform them of signs and symptoms of lead exposure; refer students to the SBHC for an annual well-check visit to conduct age-appropriate lead screenings.	Refer families to local housing authority programs to resolve home lead exposure or assist in their relocation to safe housing.





SIHE	Example of Potential Health Impact of SIHE	 TIER 1 Intervention Example	 TIER 2 Intervention Example	 TIER 3 Intervention Example
<b>Food insecurity</b>	Insufficient food to eat at home causes children to request to go to the nurse's office complaining of stomachaches.	Offer universal school meals (breakfast and lunch).	Work with partners to implement a school-based food pantry or holiday food drives.	Assist with applications and refer families to the local Supplemental Nutrition Assistance Program (SNAP) office for families with chronic food insecurity.

# Example: Mary's Center School-Based Health Program Washington, DC

## Tier 1:

- Sharing resources for medical, dental and social services at back-to-school events, parent-teacher conferences, and other school forums
- Cash assistance for families and 250 laptops donated to families

## Tier 2:

- Family reunification workshops for recently-arrived immigrant students and their parents

## Tier 3:

- Linkages to wraparound services such as psychiatry, case management, housing, legal support and social services
- Connection to COVID-19 services include testing sites, food distributions, vaccine registration and DC CARES funds



# A Role for Leaders

## Local/School Leaders

- Implement policies and practices that have direct impact on students and families
- Partner with school health providers, SBHCs, and CSMHSs
- Connect with local partners
  - Healthcare & social service agencies
  - Nutrition assistance programs
  - Housing authorities
  - Community-based organizations

## State Leaders

- Develop policies, monitor programs, and regulate practices aimed at advancing positive SIHE
- Collect and monitor data around these factors
- Determine equitable distribution of resources
- Provide training and technical assistance on interventions



## Next Steps in Advancing the SIHE

1. Continue to promote the series of SIHE briefs
2. Develop new resources to assist schools in planning and implementing strategies to address the SIHE
3. Collect best practices and examples to share with the field
  - Please put your name and email in the chat if you have an example to share with us!



# Q&A and Thank you!

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