



**SCHOOL-BASED  
HEALTH ALLIANCE**  
The National Voice for School-Based Health Care

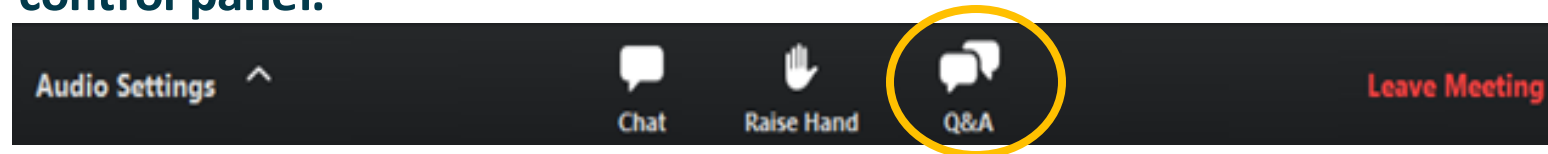
# Strengthening Partnerships to Support the Health of Homeless Families

**Date:** Wednesday, March 18, 2026

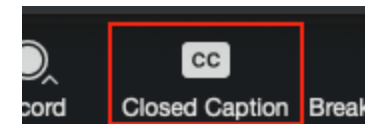
**Time:** 2:00 – 3:00 p.m. ET

# REMINDERS

- All attendees are in listen-only mode.
- To ask a question during the session, use the “Q&A” icon that appears on the bottom of your Zoom control panel.



- To turn on closed captioning, click on the “CC” button.



- Please complete evaluation poll questions at the end of the presentation.



# Learning Objectives

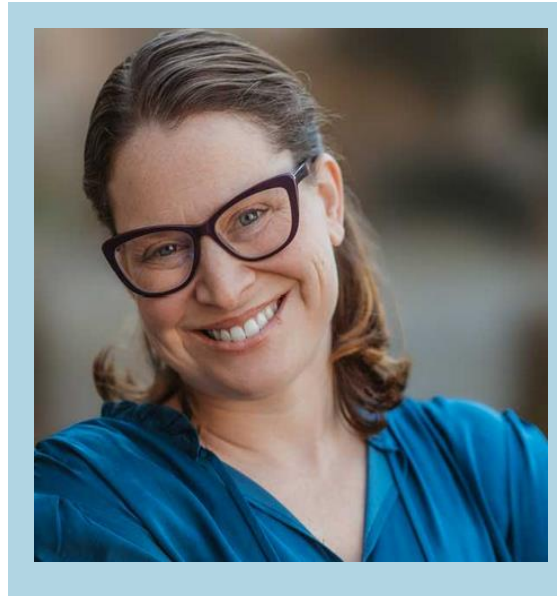
## At the end of this webinar...

1. Participants can understand how school-based health centers are uniquely positioned to support the health of homeless children and families.
2. Participants can describe strategies to better identify, engage, and support the health needs of homeless families and families at risk of becoming homeless.

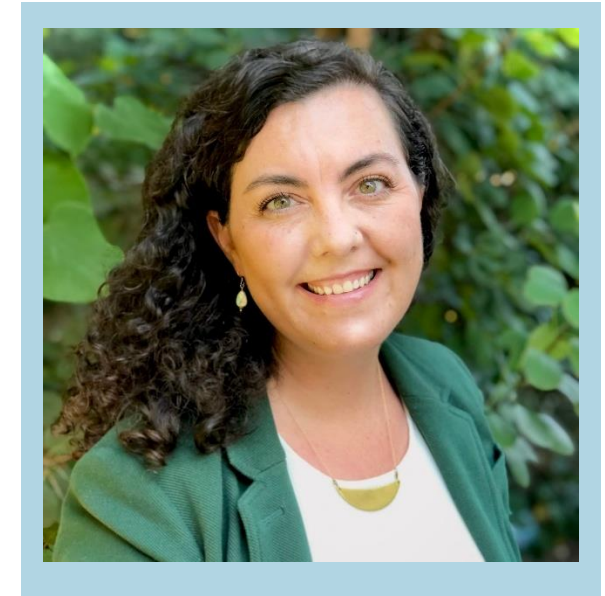
# Today's Presenters



**Lily Catalano, LMSW**  
Senior Clinical Manager



**Devora Keller, MD, MPH**  
Director of Clinical Quality Improvement



**Aura Obando, MD**  
Medical Director, Family Team

# Today's Presenters



**Dannielle Dobbins, MEd**  
Director



**Donnie Greco, BA**  
Associate



**David Godinez**  
Former Co-Chief Programs Officer



# National Health Care for the Homeless Council

## Who We Are

Since 1986, we have brought together thousands of **health care professionals, medical respite providers,** and **people with lived experience of homelessness.** Our Organizational Members include **Health Care for the Homeless** programs, respite programs, and housing and social service organizations across the country.

## What We Do

We work to improve homeless health care through **training and technical assistance,** **researching** and sharing best practices, **working** for real solutions to end homelessness, and **sharing voices** of individual leaders.

## Learn More

[nhchc.org](https://nhchc.org)

## Our Initiatives

For more than 20 years, the School-Based Health Alliance has been at the forefront of efforts to advance child and adolescent health. Our collaboration with national, state, and local partner organizations has yielded a multitude of resources, learning collaboratives, and initiatives that have helped to establish and enhance school-based health care as a critical component of community health.

### OUR WORK

## We are continually making An impact

Through our initiatives, we have been able to empower school-based health providers with the knowledge, tools, and resources necessary to respond effectively to the unique health needs of children and adolescents. By building their capacity and promoting best practices, we have not only improved the quality of care provided but also helped to establish a strong foundation for future generations.

Our work has had a profound impact on the development of school-based health care and the broader community. By investing in this critical area of healthcare, we have been able to help promote the well-being of children and adolescents and create a healthier, more prosperous future for all.

Learn More About Our Work at  
<https://www.sbh4all.org/>



# What Is School-Based Health Care?

School-based health care is health care provided to students at school by a community health care organization in collaboration with school administration and health services staff.

**This care includes but is not limited to**



**Primary care**



**Mental health**



**Oral health**



**Vision services**

**School-based health centers (SBHCs)** offer the most comprehensive type of school-based health care. An SBHC is a collaborative effort among school administration, school health service staff, community-based health care organizations, and community members to make health services (at a minimum, primary care) available to students at school in a consistent location on a consistent schedule.



**SBHCs are a  
collaboration and shared  
commitment among a  
school, health care  
organizations, and a  
community**

# SBHCs reduce barriers for students and their families



**Transportation**



**Time**



**Language**



**Financial**

SBHCs are planned and implemented via partnerships at the local level to meet the specific needs of the students, families, schools, and communities they serve.

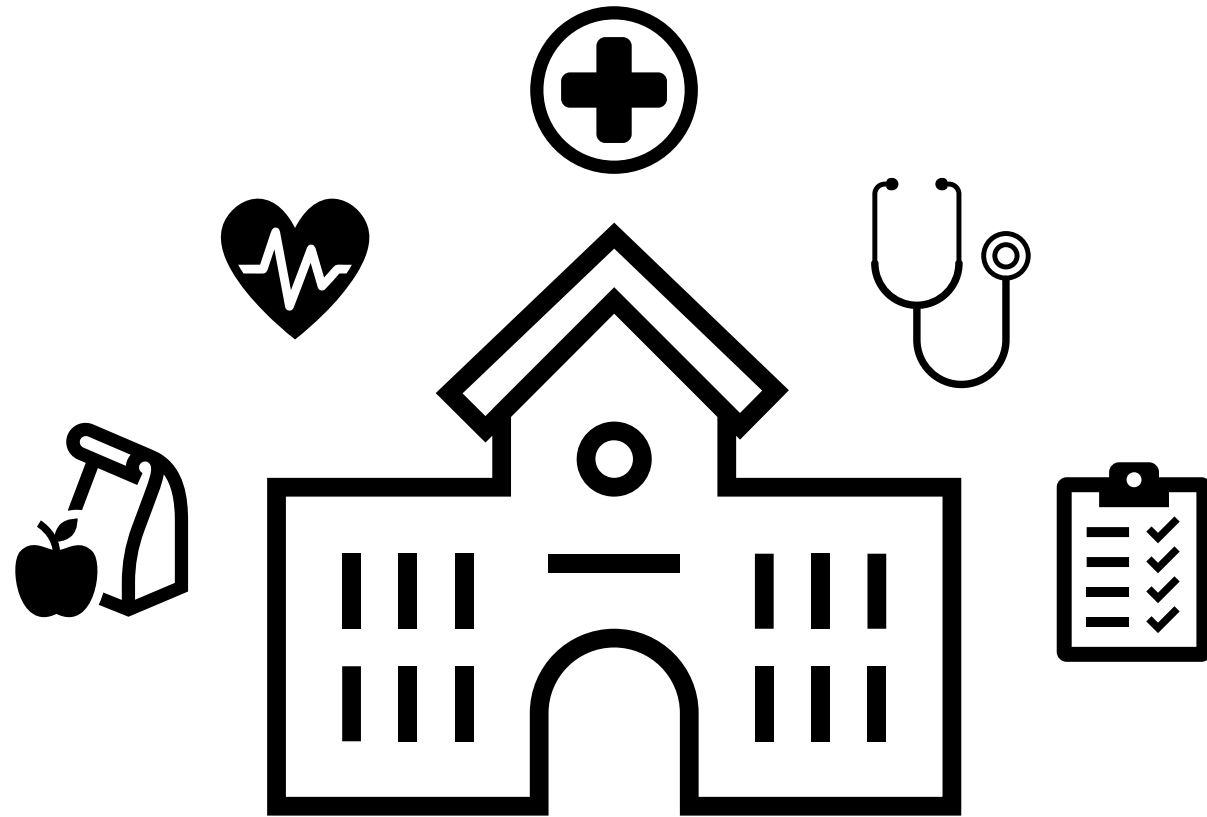
# How Do School-Based Health Centers Support Students?

**Includes, but is not limited to, medical care, mental, oral health, vision, etc.**

## **Provide care that is:**

- youth-centered
- coordinated with families
- coordinated with community providers
- supported by and coordinated with educational and community-based partners
- age-appropriate
- within applicable laws and provisions
- convenient and timely
- available to all students regardless of ability to pay

# How school-based health services can help address the health of homeless children and families.



# Program Overview

- School-based health program active across multiple districts
- Behavioral health, medical, and navigation services
- On-campus and telehealth service delivery

# Partnership Goals

- Campus Safety
- Increase in attendance rates
- Parental and community engagement
- Decreasing disciplinary referrals
- Develop a framework around personal and community wellness

# How the Model Works

- Onsite availability for student access
- Telehealth extends provider coverage
- Structured communication with school personnel
- Standardized referral and follow-up processes

# Program Development & Growth

- Initiated as a small pilot program in 2017
- Expanded to multiple campuses over several years
- Operational systems refined through implementation experience

# Behavioral Health (BH) Team Structure

- Operations Specialist: logistics and campus coordination
- Navigator: contact with families and scheduling
- Therapist: onsite or telehealth clinical services

# Referral Workflow

- Referrals from counselors, nurses, or other authorized school staff
- Clear criteria guide referral appropriateness
- Uses district crisis protocols for emergencies
- One assigned provider per 1-3 schools

# Medical Team Structure

- Operations Specialist: logistics and campus coordination
- Pediatric Care Coordinator: navigation and clinical support
- Medical Provider: Provides diagnosis and treatment to students and adults remotely

# Medical Services

- Remote digital exams with diagnostic tools
- Common symptoms: fever, sore throat, headaches, allergies
- Common diagnoses: URIs, flu, strep, asthma, ear infections

# Affordable & Accessible to All

- **Disclaimer:** Services are **NOT** free; the fee is determined by:
- Health insurance
  - All major insurances are accepted
  - Medicare
  - Medicaid
- Sliding-scale rate (based on household income)
- Payment plan
- **Accepts all insurances; income-based discounts are available for the uninsured. No one is denied services for inability to pay.**

# Service Volume

## Project Vida Health Center (PVHC)

- 2017–2025: 43,183 total encounters
- 5,919 unduplicated students served
- Integrated behavioral health and medical services

# Students Under Homeless Designation

- Coordination with district McKinney-Vento personnel
- District may assume service-related costs when guardians are unavailable
- Same service model applied for all students
- Allows uninterrupted service delivery



What can  
homelessness  
look like?

# On any given night...

## USA “PIT” count Jan. 2024

- Total = 771,480 countable persons
- 260k families with children, 38k youth

## Homeless Census

- Done each January
- Settings counted: street, shelters, programs
- Volunteer if you’d like!

## U.S. Dept. of Education

- 1.4 million public school students 2022-2023 (NCES)

# Youth and Young Adults

## Drivers of YYA

- Parental rejection
- Death of caregiver
- Systems involvement

## Numbers

- 1 in 10 young adults aged 18-25 (3.5 million)
- 1 in 30 minors age 13-17 (700,000)

## Where

- Rough sleeping
- Cars, campgrounds, hotels
- Running away/Thrown out
- Shelter
- Doubling up

-Morton et al. Chapin Hall at the University of Chicago, 2017

-Whitbeck L et al. USDHHS. 2016

# Screening

## Targeted social needs screening tools:

- WE CARE
- The EveryONE Project







The EveryONE Project, AAFP 2019  
Garg et al., Pediatrics 2015

WE CARE Survey

Place patient sticker here, or write in:  
 Name: \_\_\_\_\_  
 DOB: \_\_\_\_\_  
 Visit date: \_\_\_\_\_

DECLINED

**We want to make sure that you know about the community resources that are available to you and your family. Many of these resources are free of charge. Please answer each question and hand it to your child's doctor at the beginning of the visit. Thank you!**

	<b>Do you need childcare for your child?</b> YES <input type="checkbox"/> If YES, would you like help finding it? <span style="color: blue;">—————&gt;</span> NO <input type="checkbox"/>	Yes    No    Maybe Later <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<b>Do you have a full-time job?</b> YES <input type="checkbox"/> NO <input type="checkbox"/> If NO, would you like help finding employment? <span style="color: blue;">—————&gt;</span>	Yes    No    Maybe Later <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<b>Do you think you are at risk of becoming homeless?</b> YES <input type="checkbox"/> If YES, would you like help with this? <span style="color: blue;">—————&gt;</span> NO <input type="checkbox"/>	Yes    No    Maybe Later <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<b>Do you always have enough food for your family?</b> YES <input type="checkbox"/> NO <input type="checkbox"/> If NO, would you like help with this? <span style="color: blue;">—————&gt;</span>	Yes    No    Maybe Later <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<b>Do you have a high school degree?</b> YES <input type="checkbox"/> NO <input type="checkbox"/> If NO, would you like help to get a GED? <span style="color: blue;">—————&gt;</span>	Yes    No    Maybe Later <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<b>Do you have trouble paying your heating/cooling, water or electricity bill?</b> YES <input type="checkbox"/> If YES, would you like help with this? <span style="color: blue;">—————&gt;</span> NO <input type="checkbox"/>	Yes    No    Maybe Later <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

\*\*\*\*\*FOR PROVIDER/STAFF USE ONLY\*\*\*\*\*

If a parent has needs and wants help, please give the appropriate WE CARE information sheet(s) from your practice's *Family Resource Book*. 1 screener per family. Store copy in patient EMR or chart.

**Please check off below if you provided WE CARE information sheet(s) and/or referral(s) for the following needs:**

<input type="checkbox"/> Childcare	<input type="checkbox"/> Housing	<input type="checkbox"/> Education
<input type="checkbox"/> Employment	<input type="checkbox"/> Food	<input type="checkbox"/> Utilities

Referral provided by:  Provider    MA    Nurse    Other

Developed by Arvin Garg, MD, MPH

# Screening 2.0

## Running away:

- Have you ever seriously thought about running away from home?
- Have you ever run away?

## Financial strain:

- Have you ever worried about money, a place to live, food or clothing?
- During the last 12 months, was there a time when you or your family were not able to pay the mortgage or rent on time?

## Assessing exploitation:

- Have you ever traded sex for money, a place to live, food or clothing?
- Can you leave your job if you wanted to? What are your working conditions like?

**→ Facilitate referrals to community resources**

# Adapting Clinics to the Needs of Patients

- Food pantries
- Clothing closets
- Diaper banks
- Transportation vouchers
- Other safety needs (i.e., car seats)

→ **Associated with positive health**



-Natl Acad of Sci, Eng, and Med. *Guidebook and Research Plan to Help Communities Improve Transportation to Health Care Services*. 2021

-Smith et al, *Pediatrics*, 2013

-Persaud et al, *PLoS ONE Electron Resour*, 2019

# Impacts on Children

## Higher rates of developmental delays and learning disabilities

- Twice as likely to have learning disabilities and repeat grades

## Poor academic performance

- Twice the rate of school failure

## High rates inattention/hyperactivity

- Twice the rate of behavior problems

-Wood et al, Pediatrics 1990  
-Grant et al, Adv in Ped, 2007  
-Cutuli et al, Pediatrics, 2010

# Impacts on Children

Asthma rates 3x national average

Higher rates of acute otitis media

Higher rates of iron deficiency anemia

High rates of overweight and obesity

Twice rate of food insecurity/hunger

-Cutuli et al, Pediatrics, 2010

-Grant et al, Adv in Ped, 2007

-Schwarz et al, MedGenMed, 2007

# Considerations

## Basic needs

- Access to school (immunizations)
- Access to medical care
- Employment opportunities
- Material needs
- Transportation needs
- Food insecurity

## Housing

- Status can impact access to subsidies

## Legal



Roseline Ridore sleeps next to her family's belongings outside the the Wollaston MBT, just 27, 2024. Greg Derr/The Patriot Ledger

# Writing Letters to Support Families



Eviction prevention letters



Utility shut-off prevention letters (many templates out there!)



Removal of environmental triggers (i.e., asthma)



Housing/shelter accommodations

Gruber et al, *Ann Allergy Asthma Immunol*, 2016

Sandel et al, *Arch Dis Child*, 2006

Giraldo et al, *J Ambulatory Care Manage*, 2020

# Supporting Families

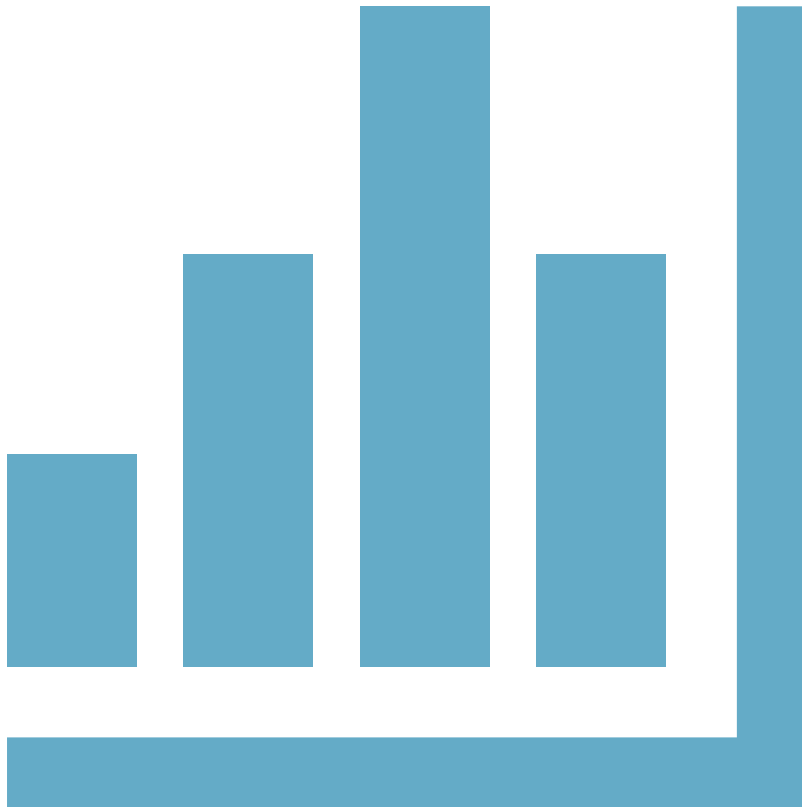
- Build mentorship relationships
- Safety and contingency planning
  - Vital documents
  - Family preparedness
- Foster family and social connections
- Referrals to behavioral health services
- Navigating health systems education (referrals, refills)
- Clear communication pathways to clinic staff
- Applaud successes!





# Questions & Answers





**Please complete our Zoom  
poll**



Registration  
OPEN  
[nhhc.org](https://nhhc.org)

NATIONAL  
HEALTH CARE  
*for the*  
HOMELESS  
COUNCIL



**2026**

# National School-Based Health Care Conference

June 23-25, 2026

American University Washington  
College of Law



**SCHOOL-BASED  
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**Thank you!**