Public/Private Partnerships in Community Efforts to Improve School Health Programs
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Research Objective
To determine the effectiveness of public/private partnerships in expanding access to care for low income and medically underserved school-aged children, and to identify best practices and lessons learned in 13 Georgia communities.

Study Design
Retrospective qualitative and quantitative analysis to evaluate a competitive grant program that encouraged communities to establish or enhance coordinated school health programs, using pooled funding from Georgia’s Department of Community Health and the Philanthropic Collaborative for a Healthy Georgia.

Population Studied
School-aged children in 13 Georgia communities. Ten communities participated in the post-implementation interviews and follow-ups. The program targeted low-income children, as indicated by communities with high free-and-reduced lunch populations (75% were low-income).

Background
Governor Barnes posed a challenge in 1999 which grew into an initiative to pool resources from public and private sources to support high priority health care issues. School health was the first priority selected. School health grantees received funding for 1, 2, or 3 years beginning in 2001 and ending in 2004. Funding was used primarily to provide staff, equipment, or training to support school health services. Grant awards ranged from $13,125 (one-year grant for equipment and materials) to $149,219 (three year grant for personnel, equipment, and materials).

Program Highlights
Funded 13 programs across the state with public and private funds from the Georgia Department of Community Health and 20 philanthropic organizations located in the Metropolitan Atlanta area:

» Sponsored technical assistance conference for all grantees.
» Prepared training video distributed to all school health programs in Georgia and broadcast on the statewide education network.
» Impacted local school health policies.
» Sustained some aspect of built capacity (equipment, policies, improved record systems, personnel, partnerships, etc.) in all programs.

Conclusion
Georgia has developed an innovative model for improving school health programs that may be replicable in other states. There are advantages to public/private partnerships that accrue to all elements of the program:

» Pooling resources allows foundations to have greater reach and impact.
» Local communities receive funding to improve access to care for low income children.
» Best practice information receives statewide and national dissemination.

Implications for Policy or Practice
The evaluation of this effort will:

» Provide best practice information that will impact state and local policies regarding the provision of health care in Georgia schools.
» Identify new methods of collaboration for providing access to care for low income children.
» Promote additional opportunities for public/private partnerships around shared health care priorities.

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For More Information Please Contact the Georgia Health Policy Center at (404) 651-3104