



The District's Dime

Going Beyond the Budget Book

The DC Fiscal Policy Institute blog
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May 1, 2014

Mayor's Funding for Health Initiatives Will Improve Kids' Ability to Learn

By Wes Rivers

Mayor Gray's FY 2015 budget proposal would make some important investments in early childhood development and school health. DCFPI explained why two funding increases are especially helpful – in DC's home visiting program and school-based health services – when we testified this week on the Department of Health budget. Here's our assessment:

DC'S HOME VISITING PROGRAM

The ask: The mayor proposes \$2.5 million for maternal and child health home visiting services. This program offers in-the-home education to parents of infants and toddlers on early physical and cognitive development, parenting practices, school-readiness and access to community resources and immunizations. Offering instruction in a convenient and natural setting for parents has been shown to have [lasting positive health and developmental effects](#) on a child's life.

The need: Federal and private funding for DC's home visiting programs will largely expire this year. Moreover, current funding is enough to serve 935 families – far short of the estimated 3,500 families at high health and developmental risk.

Why we support the budget proposal: The mayor's budget would provide local funding to replace federal funds, which means that home visiting programs will continue serving at-risk families, especially in Wards 5, 7, and 8. The local dollars could allow the District to craft a strategy for expanding services, such as by drawing federal matching funds through the Medicaid program. We hope the Department of Health will explore this.

SCHOOL-BASED HEALTH SERVICES

The ask: The mayor's budget includes a \$5 million increase for a contract with Children's Hospital to provide more school nurses in public charter schools. The budget also includes \$375,000 for school-based health centers at traditional public high schools that provide services such as physical exams, STI and HIV testing, immunizations, and oral health screenings and cleanings.

The need: Low-income students often have high barriers to health supports, especially oral and mental health services. The District has seen upward trends in [sexually transmitted infections among youth](#), preventable and treatable conditions given proper access to screenings and prevention.

Why we support the budget proposal: School is a natural setting for youth and can often be a critical point of health care access. Increased nurses in DC's public charter schools will allow greater number of campuses to address growing public health concerns. However, it is unclear how many new nurses the contract increase will support and how many schools will benefit. The Department of Health and the Council should clarify the nurse staffing levels at traditional public and public charter schools, so parents and stakeholders can assess where needs are the greatest.

To read DCFPI's testimony on the DC Department of Health budget for FY 2015, click [here](#).