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## FY 2016 Budget Would Make Investments That Help Kids Enter School Healthy and Ready to Learn

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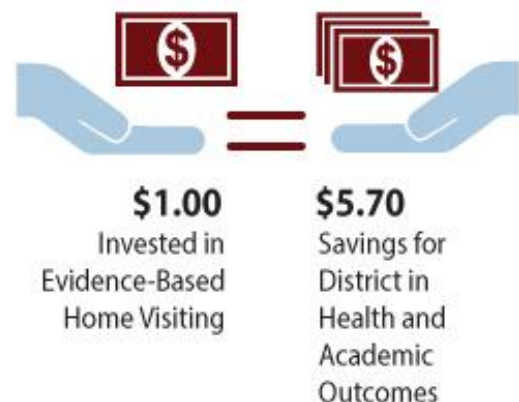
The proposed budget for fiscal year (FY) 2016 would help more District kids get services to help them have a healthy childhood and succeed in school. It maintains local investments for DC's Maternal and Child Health Home Visiting program – effective home-based instruction for parents of young children. The program has the potential to help thousands of at-risk families, and the FY 2016 budget is a good start, but more funding is needed to make the program readily available in all eight wards.

Altogether, DC will have \$6 million next year for proven programs that improve early childhood health and development. That includes \$2 million in local funding for the home visiting program, on top of \$2 million in federal grants. The federal grants cover services for 300 families primarily in Wards 5, 7, and 8, and the local funding would allow even more families participate. In addition, the Department of Health recently received \$1.8 million in federal Healthy Start funding, which will go towards other maternal and child health initiatives that are backed by research.

About 1,800 babies born every year are at risk for poor health and delays in developing skills related to speech, social interaction, or problem solving. Home visiting program connects residents with services that best meet the family's needs, using three [research-backed](#) models which:

- Target expecting parents and families with children under age five.
- Identify signs that children may be at risk for unhealthy development, such as a lack of prenatal care or a family history of substance abuse.
- Teach parents ways to overcome barriers to success, like activities to help their child be ready for school and ways to access community resources, health screenings, and immunizations.
- Improve cognitive development and learning.

### Home Visiting Could Have Huge Cost Savings for DC



Source: Data from RAND Corporation

The FY 2016 budget is a start, but DC will need to continue to explore ways to sustain and expand the program, including:

- Providing long-term funding for the program after our current federal grants expire at the end of FY 2016 (September of next year). More federal funds might be available, but DC must continue to make local investments.
- Collecting data on what works so that DC can use its performance to apply for additional federal support or so DC can show justification as to why the services should be covered under the Medicaid program.
- Ensuring that the administration of funds to home visiting providers is timely so that they can see as many families as possible in a given year.

Today, DC Fiscal Policy Institute will testify at the Department of Health's oversight hearing on these issues. To read the full testimony, [click here](#).