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Local Investment in Home Visiting Will Sustain Critical Supports for Early Childhood Development

By Wes Rivers

Sometimes new parents need a little guidance on how to help their kids develop healthy and enter school ready to learn. In fact, early instruction and intervention with vulnerable families has been shown to have <u>lasting positive health and developmental effects</u> in a child's life. That is why we applaud the mayor for making an important commitment to the sustainability of early childhood interventions in the FY 2015 proposed budget.

The mayor's proposal includes \$2.5 million in local funding for maternal and child health home visiting services —which educate parents on early physical and cognitive development, parenting practices, school-readiness and access to community resources and immunizations. Programs offer instruction in the most natural setting for parents and focus on families with children under age five. The budget also includes an increase in federal funds related to foster care, \$300,000 of which would be used to support home visiting efforts.

DC's home visiting programs currently are funded through private money and federal grants, but most of that money is tied to the Affordable Care Act and is set to expire in 2015. The mayor's local funding commitment means that home visiting programs will continue serving at-risk families, especially those in Ward's 5, 7, and 8.

The investment in home-visiting will likely result in better outcomes for at-risk youth <u>and</u> future cost-savings for the District. A recent study found that quality, early educational interventions for children under age three eliminated the achievement gap between rich and poor students. Home visiting also has been linked with <u>fewer emergency care visits</u> for infants. Moreover, every dollar invested in home visiting is <u>estimated</u> to save \$5.70 down the road in costs related to health and academic outcomes.

Sustainability for current efforts is important, but the needs outweigh the District's current capacity to serve. The DC Home Visiting Council estimates that 1,800 babies born in the District each year – one fifth of all city births – are at high health and developmental risk due to factors such as late or no prenatal care, preterm delivery, low parental education, and family history of substance abuse. However, home visiting providers currently have the capacity to serve about 935 families in a year.

Local funding gives DC an opportunity to expand Home Visiting services to more families throughout all eight wards. The District could explore supporting home visiting services through the Medicaid program, which could draw federal matching contributions. With those funds available, the program could have a much greater impact on District children and youth.

To read more about the DC home visiting program, visit www.dchomevisiting.org