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Testimony Before the District of Columbia Council  
Committee on Health  
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District of Columbia Department of Health

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## **Introduction**

Good morning Chairman Gray and members of the Committee. My name is Tami Weerasingha-Cote. I am a Policy Attorney at Children's Law Center<sup>1</sup> and a resident of the District. I am testifying this morning on behalf of Children's Law Center, which fights so every DC child can grow up with a loving family, good health and a quality education. With nearly 100 staff and hundreds of pro bono lawyers, Children's Law Center reaches 1 out of every 9 children in DC's poorest neighborhoods – more than 5,000 children and families each year. We are members of the Early Childhood Innovation Network (ECIN),<sup>2</sup> the Under 3 DC Coalition,<sup>3</sup> and the Home Visiting Council.<sup>4</sup>

I appreciate this opportunity to testify regarding the performance of DC's Department of Health (DC Health) over this past year. My testimony will focus on DC Health's support for the implementation of HealthySteps in DC and home visiting.

## **HealthySteps DC**

HealthySteps is an evidence-based national model pediatric primary care program that provides infants and toddlers with social-emotional and development support by integrating child development specialists into primary care and strengthening family engagement. Here in the District, an enhanced version of HealthySteps (HealthySteps DC) is currently being implemented at two sites in Ward 8: Children's Health Center – Anacostia and Children's Health Center at THEARC.

HealthySteps DC has improved upon the national model in several ways. First, HealthySteps DC includes dedicated case management and care coordination for families through the support of DC residents with lived experience of navigating systems who serve as the Family Services Coordinators or Family Services Associates. Second, HealthySteps DC has hired mental health clinicians (psychologists) as HealthySteps Specialists in order to integrate parental behavioral health support into primary care. These HealthySteps Specialists have the option to deliver clinic-based mental health visits with families to address critical needs in areas such as maternal depression, grief and loss, and child behavior management.

DC's HealthySteps program involves the following core components: (1) team-based well-child visits conducted jointly between pediatricians and the HealthySteps Specialist involving child development guidance, parent coaching and the dissemination of early learning resources; (2) screening that includes assessment of child development, social-emotional skills, and behavioral functioning in addition to family protective/risk factors and social determinants of health; (3) access to community resources through targeted referrals (e. g., to early intervention, community-based behavioral health agencies) and system navigation/care coordination provided by Family Services Coordinators or Family Services Associates; and (4) access to mental health support between well-child visits for families with greater need of support.

We believe HealthySteps DC is an important, innovative, and cost-effective program that reaches DC's most vulnerable families and promotes the health and well-being of their children. The program has served over 1,700 children and families since it was launched in 2017, and in 2019 alone the HealthySteps team administered over 350 brief parenting/parental mental health interventions and supported over 2,000 screens to assess child development and emotional well-being, and parental depression.<sup>5</sup> In FY2019, over 80 percent of parents with a positive depression screen received a referral for intervention or a therapeutic session within the clinic. We commend DC Health and the Committee for its investment in the HealthySteps program, and we urge the Committee and the agency to ensure the program is fully funded and able to open additional sites as envisioned by the *Birth to Three for All Act of 2018*.<sup>6</sup>

### **Home Visiting**

Home visiting programs work in coordination with other family supports and interventions to help pregnant women, mothers and fathers, young children aged zero to five years, and their families, achieve the best possible outcomes in maternal and child health, child development, and more. Home visitors do many things, including ensure parents know how to obtain prenatal care and medical care for their children, educate parents about child development so they can recognize delays, work with parents on building strong parent-child attachments, provide a supportive relationship

during a time of family transition or distrust of other systems, and help parents access other needed services for their children.

We believe home visiting programs are vital to an innovative and effective early childhood system of care—evidence shows that home visiting leads to improved health care utilization by families, earlier identification of developmental delays in children, fewer subsequent pregnancies, increased rates of return to (or continuation in) school, and decreased criminal behavior and parental impairment due to substance abuse.<sup>7</sup>

We appreciate DC Health’s participation in the Home Visiting Council over the past year. In particular, we value the agency’s efforts to build a coordinated, centralized intake system for home visiting through Help Me Grow and to develop a District-wide definition of home visiting.<sup>8</sup> We also recognize and applaud DC Health’s continued investment in home visiting programs – both by obtaining federal dollars where possible and dedicating local dollars to fund additional programs.<sup>9</sup> We hope to see this support for home visiting continue and grow in the coming year.

## **Conclusion**

Thank you for the opportunity to testify. I look forward to answering any questions you may have.

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<sup>1</sup> Children’s Law Center fights so every child in DC can grow up with a loving family, good health and a quality education. Judges, pediatricians and families turn to us to advocate for children who are abused or neglected, who aren’t learning in school, or who have health problems that can’t be solved by medicine alone. With nearly 100 staff and hundreds of pro bono lawyers, we reach 1 out of every 9 children in DC’s poorest neighborhoods – more than 5,000 children and families each year. And, we multiply this impact by advocating for city-wide solutions that benefit all children.

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<sup>2</sup> “The Early Childhood Innovation Network (ECIN) is a local collaborative of health and education providers, community-based organizations, researchers, and advocates promoting resilience in families and children from pregnancy through age 5 in Washington, DC. During this critical period of brain development, children are deeply affected by their experiences and environment. ECIN’s approach affirms the tremendous opportunity to promote and ensure healthy development of young children.” See <https://www.ecin.org/>.

<sup>3</sup> The Under 3 DC Coalition aims to increase access to quality, comprehensive early childhood services and other supports for infants and toddlers and their families in DC, and ensuring that health, education, early learning and human services systems work in a coordinated fashion to improve outcomes for young children. See <https://www.under3dc.org/>.

<sup>4</sup> The DC Home Visiting Council includes advocates, community-based providers, and agency leaders, including DC Health leadership. The Council works to strengthen home visiting in the District by building a cross-sector network of support for programs, advocating for resources and funding for programs’ stability and growth, and collaborating to address systemic challenges to implementation of home visiting services. See <https://www.dchomevisiting.org/>.

<sup>5</sup> Data provided by Children’s National Hospital.

<sup>6</sup> Birth to Three for All Act of 2018, D.C. Law 22-179.

<sup>7</sup> See Zero to Three. Libby Dogget. (January 2013). New Research Strengthens Home Visiting Field. p. 7-8. See also Status Report on home Visiting in the District of Columbia Literature Review, prepared by DC Action for Children (Sept. 2016),

[https://www.dcactionforchildren.org/sites/default/files/HVSR\\_lit\\_review\\_FINAL\\_web.pdf](https://www.dcactionforchildren.org/sites/default/files/HVSR_lit_review_FINAL_web.pdf).

<sup>8</sup> See Dept. of Health FY2019 Performance Oversight Responses, Q37.

<sup>9</sup> See Dept. of Health FY2019 Performance Oversight Responses, Q23.