

CALIFORNIA LEGISLATURE

STATE CAPITOL
SACRAMENTO, CALIFORNIA
95814

June 15, 2017

Dear Senate and House Leaders:

We write to urge you to reauthorize funding for the broadly supported Maternal, Infant and Early Childhood Home Visiting (MIECHV) program for five years, with a graduated increase from \$400 million to \$800 million, before funding authorization for this critical program expires on September 30, 2017.

More than 60 percent of the 500,000 Californians born each year are born into a poor or low-income household, and the ways in which economic hardship negatively influences children's early health and learning are well-documented. However, decades of extensive research also shows that voluntary home visiting programs effectively support vulnerable families and positively influence both parent and child outcomes. In fact, the benefits of such programs far outweigh the costs. Evidence-based home visiting improves health, education, and family economic self-sufficiency, while reducing instances of child abuse, mental health, and criminal justice costs.

Since 2010, critical MIECHV formula funding has enabled the California Department of Public Health to establish the California Home Visiting Program (CHVP), targeting expanded voluntary evidence-based home visiting services in the 24 California counties where children and families are at greatest need. CHVP built upon existing local home visiting programs funded by other sources, including county First 5 commissions and local governments, and extended capacity of the nationally-recognized Nurse-Family Partnership and Healthy Families America models in California. Since program inception, CHVP-funded home visiting programs have provided 124,681 home visits to over 8,600 families, and established important connections between state and local efforts to serve vulnerable children and parents.

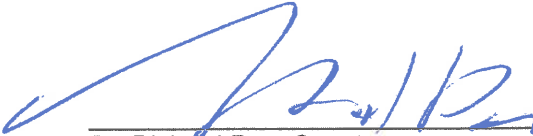
California, like many states, faces unacceptable rates of poor birth outcomes, child abuse and neglect, developmental delays, and impediments to maternal and child health. Need for home visiting programs in our state remains significant, and MIECHV resources are essential to meeting this need. We applaud the flexibility of the MIECHV program in allowing states to choose the home visiting programs and approaches that best fit their systems, while emphasizing accountability to ensure positive outcomes for children and families.

We urge you to include reauthorization of the MIECHV program for five years, with a graduated increase from \$400 million to \$800 million, among legislation that must pass in the 115th Congress before September 30, 2017.

Sincerely,



Dr. Joaquin Arambula, Assemblymember



Dr. Richard Pan, Senator

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