



# Advocates for Justice and Education, Inc.

*The federally designated Parent Training and Information Center for Washington DC*

**Testimony of  
Rochanda Hiligh-Thomas, Esq.  
Executive Director  
Advocates for Justice and Education, Inc.**

Committee on Education and Committee of the Whole  
Joint Budget Oversight Hearing:  
June 4, 2020

Good afternoon Chairperson Grosso, Chairperson Mendelson, and members of the Committee on Education. I am Rochanda Hiligh-Thomas, a District resident, parent, and Executive Director of Advocates for Justice and Education, Inc. (AJE). Today I am testifying on behalf of AJE.

AJE is the federally designated Parent Training and Information Center (PTI) for the District of Columbia. It is our responsibility to provide free training, resources, individual assistance and supports to parents and youth in navigating the District's public education system, with a focus on students with disabilities. AJE responds to calls from nearly 800 DC families each year to support their advocacy in addressing a variety of educational issues (including special education and school discipline) to improve the educational outcomes of their children.

We commend the Mayor for the steps she has taken to avoid major cuts to the budget following the damaging impact and toll the coronavirus has taken on the District's residents and economy. We were particularly pleased to see that investments in education through the uniform per student funding formula (UPSFF) were spared cuts and increased by 3%. However, there are additional areas where the Council needs to ensure there is adequate funding for the District to safely reopen and for children to have equitable access to education and supports needed for them to succeed. My testimony today will focus on four areas – early child education (child care), school based mental health, digital access, and special education.

In the ReOpen DC Advisory Group's recommendation to the Mayor, the group noted that its recommendations are anchored on DC's core values of HOPE- Health, Opportunity, Prosperity and Equity.<sup>1</sup> There is no HOPE for the District without equity and the health and safety of our children and residents. Thus, as we work toward reopening the District and the Council considers the budget, equity and health must be the lens through which all funding decisions should be considered, especially for our most vulnerable residents.

---

<sup>1</sup> [ReOpen DC Recommendations to the Mayor](#), ReOpen DC Advisory Group, May 21, 2020, pg. 7.

## ***Early Child Education (Child Care)***

As the District has moved into phase one reopening, we believe it is imperative for there to be sufficient child care for parents to return to work. The proposed budget maintains funding for child care subsidies at the same level as last year, however, the Mayor's supplemental FY 20 budget is void of any stabilization funding for child care providers who need it the most right now. While OSSE continues to cover subsidy payments, this is not sufficient for providers who rely on tuition payments from families. Further, many child care providers have been unable to secure federal support leaving those child care business vulnerable to shutting down.<sup>2</sup> The Council should add additional funds to the FY20 supplement budget to help stabilize child care business that are in jeopardy of closure.

In addition, we agree with our Under 3 DC Coalition partners that childcare must be made a priority for a safe and inclusive recovery and urge the Council to hold the child care subsidy program harmless by rejecting budget cuts to an industry that is at the heart of a strong District economy. DC's childcare businesses who participate in the subsidy program will require at least \$90 million in the FY2021 OSSE budget to preserve their financial viability. This represents a \$10 million increase from last year to account for pandemic-related needs such as more staffing and reduced class sizes to meet recommended safety and social distancing guidelines.<sup>3</sup>

Last, we urge the Council to protect funding for the other Birth-to-Three for All DC health programs that serve young children and caregivers including Healthy Start, Healthy Futures, Help Me Grow, and Home Visiting programs.

## ***School Based Mental Health***

The proposed budget protects existing investments in school-based mental health supports, which the Council should preserve. However, additional funding is needed to expand school based mental health services, especially at this time when students, need greater support. COVID-19 has sent shockwaves through our city by unleashing chaos and stress on all families, inevitably impacting families with the fewest resources most intensely. Tragically, Black and brown families have been disproportionately affected by job loss and deaths due to COVID-19. Students have been cut off from the structure and security of school and connections with peers. We must guarantee there are no budget cuts to physical, mental, and behavioral health supports for our students and parents at a time when families, especially Black and brown families, are experiencing more health challenges and trauma than ever. Including additional trauma our communities are experiencing as a result of witnessing on TV and on social media the recent brutal killing of George Floyd, which has amplified the ongoing attack on black lives.

---

<sup>2</sup> [https://www.washingtonpost.com/local/education/dc-day-care-centers-shut-out-of-stimulus-money-struggle-to-hang-on-until-children-return/2020/04/30/3b84329c-867c-11ea-ae26-989cfce1c7c7\\_story.html](https://www.washingtonpost.com/local/education/dc-day-care-centers-shut-out-of-stimulus-money-struggle-to-hang-on-until-children-return/2020/04/30/3b84329c-867c-11ea-ae26-989cfce1c7c7_story.html)

<sup>3</sup> See attached document FY2021 U3DC Budget Ask Math.

Prior to the pandemic and student's physical disconnection from schools. Some of the families AJE supports relied on school based mental health services. Now more than ever, an expanded investment is necessary to support students' ability to be able to show up for learning. DCPS Chancellor Lewis D. Ferebee recognizes this and said in an interview with the Washington Post that the immediate focus this fall will be on students' mental health, addressing the trauma that many students have experienced during the health emergency: "It's traumatic. . . . Students have experienced trauma and stress. It is really important for us not to just dive into instruction without taking time to reconnect with our students."<sup>4</sup> Supporting the mental health of our students is urgent and critical to successful recovery and must remain a priority. Thus, the Council should ensure adequate funding to expand the school based mental health supports our students will need without any cuts to critical components of school based mental health services. We echo the urge of our fellow advocate partners for the members of this Committee to ensure that the school based mental health expansion is fully funded for FY21, by adding the approximately \$4 million needed for the planned expansion.

However, funding needed to expand essential school based mental health services for our students should not come at the expense of cutting community based mental health services. Our children cannot be considered in isolation but as members of a family and larger community unit to which they belong and who they rely on for their stability. As I previously noted, the traumatic impact of COVID-19 has impacted families, and Black and brown communities the hardest. Prioritizing the mental health and wellbeing of families and communities is critical to successful recovery. Thus, investments in mental health must reflect this commitment to the whole family and communities.

### ***Digital Access***

The proposed budget provides a combined \$10.2 million in funding – 6 million to expand information technology devices and support and \$4.2 million to OSSE to support expanded distance learning efforts such as Wi-Fi hotspots for students. It is apparent that students will continue to engage in distance learning beginning next school year. We remain concern that the current investments in student technology may not be adequate. While we recognize the efforts that DCPS and charter schools, along with the assistance of community funding partners, to provide all students with the technology needed to access distance learning, there unfortunately were students who remained without the technology they needed.

During the 2 ½ months of distance learning this school year, we inquired of our existing families about their distance learning experience. There was a range of experience, from families having devices and internet access, to no devices and no internet access or limited internet access. There were families with multiple children in the home who were required to share a single device to access online learning. There were

---

<sup>4</sup> [https://www.washingtonpost.com/local/education/in-dc-schools-spring-was-ravaged-by-covid-and-disconnection-fall-will-be-about-catching-up/2020/05/10/60ad1774-8b3f-11ea-8ac1-bfb250876b7a\\_story.html](https://www.washingtonpost.com/local/education/in-dc-schools-spring-was-ravaged-by-covid-and-disconnection-fall-will-be-about-catching-up/2020/05/10/60ad1774-8b3f-11ea-8ac1-bfb250876b7a_story.html)

families who ultimately received a device but nearly 2 months after distance learning began. Even then, some families required assistance in setting up devices for use, resulting in more days of lost learning. The ReOpen DC Advisory Group has recommended that all students have access to technology and the internet, including technical support.<sup>5</sup> To provide equitable access to education during continued distance learning we urge the Council to ensure there is adequate funding to support school's ability to implement the Advisory's Group recommendation.

### ***Special Education Services***

With the swift onslaught of the coronavirus outbreak, schools were required to close their doors and quickly shift to distance learning. This transition was not easy. While LEAs worked fast and hard to move all children over to remote learning, the reality is that this did not happen for all children. As I just shared, many children remained without the digital devices and internet connections required to access online learning. This shift particularly impacted children with disabilities who required special education services. For some of AJE families the new task of becoming their children's teacher, special education teacher, related service provider and more was daunting and overwhelming. Some parents even gave up on distance learning because of the overwhelming trauma they experienced due to the pandemic- job loss and illness in the family. Not to mention the families who were still required to work in and away from home. Some parents did not have or were not provided the tools and support needed to best support their children at home, particularly our English learner families who faced an additional barrier of language access.

Despite the efforts made, the reality is that this shift has resulted in student learning loss and access to the full range of special education and related services to which they are entitled, resulting in them falling further behind.<sup>6</sup> To compensate for this loss and to develop sustainable supports for students with disabilities to improve their educational outcomes, as distance learning continues, additional resources are required. Thus, we recommend the Council and OSSE consider the following:

***-Parent Training-*** Include in the Individualized Education Programs (IEPs) of students with disabilities parent training as a related service. Under the Individuals with Disabilities Education Act (IDEA) related services means "transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education. ...," and includes parent counseling and training.<sup>7</sup> While schools and not parents are required to provide students with a free appropriate public education (FAPE), the reality is that parents have been required to take on more of a teaching role with teachers. And, to help children with disabilities not fall further behind and through the cracks, parents need adequate support to work collaboratively with

---

<sup>5</sup> [ReOpen DC Recommendations to the Mayor](#), ReOpen DC Advisory Group, May 21, 2020, Appendix B, Pg. 36.

<sup>6</sup> Before the pandemic students with disabilities already significantly lagged their non-disabled peers. See, [Students with Disabilities in the District of Columbia. Landscape Analysis](#), OSSE, 2019.

<sup>7</sup> 34 C.F.R. §300.34 (a) & (c)(1)(8).

schools during this unprecedented time. Parent counseling and training would assist parents in understanding the special needs of their child; provide parents with information about child development; and help parents to acquire the necessary skills that will allow them to support the implementation of their child's IEP.<sup>8</sup> In our experience this has been an underutilized related service. However, now it should be considered for every student's IEP, and we urge OSSE to provide guidance to LEAs on this related service option and on good parent training models.

**-Technical Assistance-** OSSE should clarify and deepen its guidance to LEAs providing special education services. We recognize the steps OSSE has taken in providing guidance consistent with federal guidance on ensuring students with disabilities receive a FAPE during the pandemic and have updated its policies. However, based on our communication with families and some schools, OSSE should clarify guidance on how LEAs should provide modifications for students with disabilities both through virtual learning and take home materials, and provide additional technical resources on its webpage for LEAs that clearly frame legal requirements, expectation and best practices.

In conclusion, AJE urges the Council to prioritize the health and equity as the District works to recover from the pandemic and (1) Hold OSSE's child care subsidy program harmless by allocating at least \$90 million in local FY21 funds for the program and protect funding for the other Birth-to-Three health programs; (2) Ensure the school based mental health expansion is fully funded, without cutting cost to community based mental health services; (3) Ensure adequate funding to provide every student with equitable access to the digital devices and internet access they need for remote learning; 4) OSSE should enhance its technical assistance to LEAs on legal requirements and best practices to supporting students with disabilities, including guidance on the use of parent training as a related service in student's IEPs; and 5) Ensure adequate funding to support the additional cost that will be incurred to prepare schools (in accordance with recommended guidelines) to provide in-person student instruction.

Thank you for the opportunity to testify today. I welcome any questions you may have.

---

<sup>8</sup> *Id.* at (c)(1)(8).

Author: Marlana Wallace  
Last updated: June 4, 2020  
Last updated by: Joanna Blotner

## Messaging the Under 3 DC Budget Asks for FY2021

*The purpose of this document is to provide Under 3 DC Coalition members with some data and messaging on the rationale behind the coalitions' two main budget asks: \$10 million in emergency funds and \$10 million for a child care subsidy increase.*

### Topline Emergency Funds Calculation:

- 14,000 private pay slots (actually a slight round down from 14,269) at \$20/hr, with an average of 8 children per teacher for a full month= 5.6 million
- $14,000 \text{ (slots)} / 8 \text{ (students per teacher)} * 20 \text{ (\$ per hour)} * 40 \text{ (hrs per week)} * 4 \text{ (weeks per month)} = 5.6 \text{ million/month}$
- 5.6 million x two months (April & May) = 11.2 million, rounded down to \$10 million

### Why?

- According to recent national data, more than 30% of home and center based care settings do not have the resources to remain operational after just two weeks of closure. Despite the necessity and difficulty of this work, caring for young children has long been an underpaid and undervalued profession that, in the District, largely falls on Black women, leaving the business of childcare in precarious financial situations even in the best of times.
- **Child care has two major operating expenses: rent and staff.** Rent varies widely across different types of care settings, whereas staffing costs are more similar. Staffing dollars are therefore a good proxy to estimate what's needed for child care stabilization.

### Messaging for Councilmember Questions

*Councilmember Question: Why \$10 million in emergency funding?*

*Response:* Private pay *and* mixed-model child care providers (providers who serve families who participate in the child care subsidy program as well as families who pay full tuition) have lost at least two months of operating income from the pandemic-induced shutdown, and [they/we] were largely left out of COVID-19 relief

funding for small businesses or received insufficient amounts. Child care providers already operate on very thin margins. Without immediate public support, many private-pay child care providers will be forced to permanently close their doors, exacerbating the District's child care shortage. Ten million dollars is a *conservative* estimate of what's needed to pay educator salaries for an average classroom for two months of the shutdown.

*Councilmember Question: Why only two months?*

*Response:* For many providers, two months will be insufficient. The devastation of this pandemic is unpredictable, and further shutdowns are likely. Two months of funding is simply the minimum we need. DC leaders could and should go beyond \$10 million in their support of early childhood education. For the child care industry to survive, private investments must be coupled with government assistance. Every little bit helps.

*Councilmember Question: Why offer assistance when 85 providers have already received micro-grants from DC?*

*Response:* All together child care providers only received \$342,000. Per provider, that's only about \$4,000 on average. And those funds only served 18% of the 470 licensed child care providers. Child care providers need more support to keep the doors open.

*There are 268 providers that accept subsidy dollars but we don't know how many of these providers are mixed-model settings making it hard to approximate the percentage of micro-grant assistance provided to child care facilities that rely in whole or in part on private tuition. Some amount less than 42% of facilities that rely on private tuition facilities received assistance from DMPED's micro-grant program.*

*Councilmember Question: Why assist private-pay providers who are largely serving rich kids?*

*Response:* There are many child-care providers throughout the city who operate "mixed-models", offering both private and subsidized slots for young children. If those providers are forced to shut-down because they lack the funds to continue paying staff or rent, their subsidized slots disappear too. To ensure the District's child care shortage doesn't worsen, DC leaders must invest in all types of child care providers. As an industry, our fates are tied together.

## Topline Calculation for FY21 Budget to Increase Support for Subsidy Providers:

- Prior to COVID-19, the Under 3 DC Coalition planned to ask for a \$40 million enhancement to the child care subsidy system to raise educator pay, improve quality, expand subsidy participation by providers, and strengthen the financial viability of child care centers and homes. This investment would keep us on the path to realizing the Birth to Three for All DC legislation.
- In light of the pressures of COVID-19, child care providers will need at least \$10 million just to preserve their financial viability, as they implement pandemic-related public health measures, such as increased staffing and cleaning. Ten million is not sufficient but it will help subsidized providers to keep the doors open next year. *(See below for some estimations of what it could help cover).*
- The \$10 enhancement should be provided equitably to all facilities who participate in the subsidy program. One way to do this is by adjusting subsidy rates, though this can be a complicated and time consuming process. Another way to do this is by providing funding as direct assistance as a lump sum to providers to fund safety and social distancing enhancements to their facility. Regardless, assistance should be provided based on need of setting, and not be tied to quality rating. For example, a large child development facility will need more staffing capacity to make classroom sizes smaller whereas a home based setting may need funding assistance for a professional cleaning crew to come in each day.

## Messaging for Councilmember questions

*Councilmember Question: Why is \$10 million more necessary for the child care subsidy program?*

*Response:* The coronavirus continues to disproportionately harm families with low-incomes, particularly Black and Brown families. Working families receive critical support from child care providers who participate in the subsidy program. But subsidized providers will need more funding to implement pandemic-related public health measures. It's impossible to calculate exactly what each provider's needs will be. Some may need to hire assistants to check temperatures, reduce class sizes, or assist children with hand-washing, while others may need the funds to increase professional cleanings. Ten million isn't sufficient, but it's a start. DC leaders should enhance the FY2021 budget for child care subsidies by **at least** \$10 million to help providers who support low-income children continue to operate safely.



*Here are some examples of how providers could use that needed \$10 million:*

\$10 million could cover:

- **320 additional assistants** to help with safety protocols for a year (i.e. classroom assistants, temperature checkers, staffing for pickup/drop off staggering, etc.).  
OR
- **Cleaning crew for deep cleaning each day** for all subsidized child development facilities for a year (on top of cleaning personnel already on staff)  
OR
- **5 weeks of absences for all subsidized infants and toddlers**, absent because their parents are unable or unwilling to send them to care.
  - *(Once normal procedures resume, subsidized providers will likely be paid based on attendance again, not enrollment.)*

*(Supporting “Math”)*

- Assistants:  $10 \text{ million} / 52 \text{ weeks} / 40 \text{ hours per week} / \$15 \text{ an hour} = 320 \text{ assistants}$
- Additional cleaning:  $\$100 \text{ an hour} * 7.5 \text{ hours a week (1.5 hrs/day)} * 268 \text{ facilities} * 52 \text{ week} = \$10.45 \text{ million}$
- Absences:
  - FY19 infant/toddler daily rates: \$65.43; \$68.32; \$76.78. ([from FY19 proposed rate on OSSE PPT](#))
  - $\$10 \text{ million} / \$70.18 \text{ (average rate)} / 5,173 \text{ subsidized infants \& toddlers} = 27.55 \text{ days} / 5 \text{ days per week} = 5 \text{ weeks}$

## EMERGENCY FUNDS DATA SOURCES

### Figure Sources:

#### 14,000

- Subtracting subsidy slots from licensed slots gives us an estimate of private pay slots (within both private pay and mixed model centers and homes). We have pulled the data from OSSE's response to [Question 16 of the Education Committee's Performance Budget Questions for FY2019](#).

FY2019	Total Licensed Capacity	Subsidy Enrollment	Private Pay
Infants & Toddlers	11,257	5,173	6,084
Pre-School (Non-UPSFF)	12,314	4,151	8,163
			<b>14,247</b>

- At a recent stakeholder meeting, OSSE gave a presentation that listed the total private pay slots at 14,269. Either way both figures round down to 14,000.

### 8 students per teacher (rough average)

- [ReOpen DC guidelines](#) recommend **10** people total (teachers and students) for Phase2
- A Child Development Home is located in a private dwelling occupied by the operator of the facility with no more than **six** children in care. ([OSSE regulation](#))
- An Expanded Child Development Home may be licensed to provide care for more than six (6) children, up to a maximum of **twelve** (12) children based on square footage. ([OSSE FAQ](#))
- The number of children that you may be licensed for in a Child Development Center is based on square footage and floor level. ([OSSE FAQ](#))

The adult/child ratios for centers, out of school time and in expanded child development homes are:

AGE OF CHILDREN	ADULT/CHILD RATIO	MAXIMUM SIZE OF GROUP
0 – 12 months	1:3	9
0 – 12 months	1:4	8
12 – 24 months	1:3	9
12 – 24 months	1:4	8
24 – 30 months	1:4	12
30 months through 3 years	1:8	16
4 – 5 years	1:10	20

(b)For Centers providing out-of-school-time care to children of legal school age:

AGE OF CHILDREN	ADULT/CHILD RATIO	MAXIMUM SIZE OF GROUP
Under 6 years	1:12	24
6 years and older	1:15	30

### **\$20 per hour (rough average)**

- [Child Care Aware 2019 Factsheet](#): Average Annual Salary for DC child care workers is [\\$33,110](#) /52 weeks /40 hours = \$16.56 per hour
- However, directors often make more than the average. A \$20 average approximates pay across different positions within the child care field.

### **2 months**

- Coalition members & providers felt like they could maybe survive March, but not necessarily April and May, and certainly not if the closures persisted into summer.

**Budget Ask Summary:** \$10 million is a generally conservative estimate. It's based on an underestimation of private pay slots and the number of lockdown months, a rough average child/teacher ratio, and a rough average of hourly wages. It doesn't account for decreases in parent co-payments, increased cost of cleaning supplies, and the ongoing challenge of making rent.