

Congressman Mike Quigley

Fiscal Year 2014 programmatic for the Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies

Support President's funding request for the **Agency for Healthcare Research and Quality**

**Explanation:** AHRQ will play an integral role in reducing health care costs and improving health care outcomes for patients, providers, and payers. AHRQ needs robust funding in order to conduct and support essential research and provide scientific evidence of measures to improve outcomes and quality while reducing costs and medical efforts.

\$7.05 million for **Breastfeeding Promotion**

**Explanation:** Suboptimal breastfeeding rates are a significant contributor to our Nation's epidemic of obesity, increasing risks of several acute and chronic diseases and conditions, including diabetes and cardiovascular disease. These funds are essential to support hospitals that promote breastfeeding and non-governmental organizations that assist breastfeeding mothers.

Support President's request for the **Carl D. Perkins Career and Technical Education Act**

**Explanation:** Perkins provides the principal source of federal support for program improvement and helps to strengthen the integration of academic, career and technical education (CTE) at secondary and postsecondary institutions. Debt reduction is of the utmost importance; however, continued reductions to Perkins would affect millions of career and technical education students, the business community that relies on a qualified workforce, and the future competitiveness of this country.

\$79 million for the **Carol M. White Physical Education Program**

**Explanation:** This program provides much-needed resources for schools and community organizations to improve physical fitness and provide quality physical education for our nation's youth. As local budgets are challenged this program helps schools meet the demand for quality physical education.

\$966 million for **CDC HIV prevention and surveillance activities**

**Explanation:** Despite the 30 years of combating HIV in the U.S., still there are 50,000 new infections annually. The key to reducing new infections is early detection, linkage and retention to care, and adherence to treatment. Adequate resources are necessary to increase HIV testing, targeted interventions, and public education campaigns, and funding for surveillance is needed to track new infections and collect CD4 and viral load reporting.

\$35 million for **CDC's Division of Viral Hepatitis**

**Explanation:** CDC estimates that up to 5.3 million people are living with hepatitis B (HBV) and/or hepatitis C (HCV) in the US, and as many as 75 percent are not aware of their infection. Due to the lack of an adequate surveillance system, these numbers are expected to be severe underestimates. This funding request will allow for the continuation of currently funded testing programs, as well as begin to create

comprehensive education and surveillance systems in line with the HHS Viral Hepatitis Action Plan.

\$180 million for **CDC's Sexually Transmitted Disease prevention and surveillance activities**

**Explanation:** Given the strong link between HIV and other STDs, including high rates of co-infection among certain populations, an increased investment in STD programs is an essential component of HIV prevention. Investments in STD prevention and treatment further the National HIV/AIDS Strategy's goal of reducing new infections.

\$186 million for the **Center for Substance Abuse Prevention**

**Explanation:** This amount will ensure adequate funding for the Strategic Prevention Framework State Incentive Grants (SPF SIG)/Partnerships for Success program, which has helped states adopt an evidence based, public health approach to substance abuse prevention, a promising approach to preventing the onset and reducing the progression of substance abuse.

\$400 million for the **Center for Substance Abuse Treatment**

**Explanation:** CSAT is the lead federal agency responsible for substance abuse treatment and provides national leadership in the development of policies, programs, strategies and services to treat illegal drug abuse and alcohol abuse. CSAT provides grant funding to states for substance abuse treatment programs in addition to providing technical assistance and training.

\$317.5 million for **CHGME**

**Explanation:** CHGME is a critical investment in our country's medical future and helps to ensure that children will have continued access to the care they need across provider settings. Independent children's hospitals have an indispensable role in the children's health and the pediatric workforce, training 49 percent of all pediatric residents, including 45 percent of general pediatric residents and 51 percent of pediatric specialty fellows.

\$1 million for **Child Advocate Services with the Division of Children's Services**

**Explanation:** The Violence Against Women Act specifically authorizes the appropriation of \$1,000,000 for child advocate programs in FY 2014. Independent Child Advocates for trafficking victims and other unaccompanied immigrant children are vital to protecting the best interests of the most vulnerable children, including the very youngest, pregnant and parenting teens, children at risk of aging out, children with mental and physical disabilities, and children at risk of long-term or permanent separation from their parents.

\$5.25 billion **Child Care and Development Block Grant**

**Explanation:** The CCD Block Grant provides essential funds to enable low-income parents to work or participate in educational or training programs they need to work. The program also funds much-needed child care quality and availability.

Maintain funding for **Community Health Centers**

**Explanation:** Community health centers provide cost-effective, high-quality primary and preventive care to millions of low-income Americans who would otherwise not have access to primary care. These centers also generate \$24 billion in annual savings to the health care system, due in large part to their success in reducing the need for patients to seek care at costlier health care settings (like emergency rooms and hospitals). Today there are 60 million people without access to primary care, and continued funding for community health centers will help provide much-needed care to those patients, while saving our health care system billions.

\$712 million for **Community Services Block Grants**

**Explanation:** The Community Services Block Grants provide funding for Community Action Agencies (CAAs) and other programs that seek to address poverty at the community level. CSBG funds are given by the states and other jurisdictions to CAAs to be spent on employment, education, income management, housing, nutrition, emergency services, and health. In Chicago, Community Services Block Grants helps fund local support services from homelessness prevention to childcare and should be restored to \$712 million pre-sequester levels.

\$6 million for the **DELTA Prevention Program**

**Explanation:** DETLA is one of the only sources of funding for domestic violence prevention work. The program supports statewide projects that integrate primary prevention principles and practices into local coordinated community responses that address and reduce the incidence of domestic violence.

\$50 million for the **Division of Adolescent and School Health (DASH) HIV/STD Prevention Education**

**Explanation:** While young people aged 15–24 make up only one-quarter of the sexually active population, they contract about half of the 19 million STDs annually. Additional funding will allow the expansion of the program to a national program providing school-based technical assistance across the entire country for the development and implementation of innovative, cost effective, and evidence-based prevention programming for at risk youth.

\$140 million for the **Family Violence Prevention and Services Act (FVPSA)**

**Explanation:** The Family Violence Prevention and Services Act (FVPSA) program is the only federal funding source dedicated to domestic violence shelters and programs, and it supports lifesaving services including emergency shelters, crisis hotlines, counseling and programs for underserved communities throughout the United States and territories.

\$39.67 million for the three programs that comprise the **Garrett Lee Smith Memorial Youth Suicide Prevention Programs**: \$29.738 million for *Youth Suicide Early Intervention and Prevention Strategies*; \$4.957 million of *Campus Suicide Prevention*; and \$4.975 million for the *Suicide Prevention Resource Center*

**Explanation:** Suicide is the third leading cause of death among Americans between the ages of 15-24. The funds provided through these programs will help reduce suicide rates by providing technical assistance to awardees, helping states develop and implement

statewide youth suicide intervention and prevention strategies, and will help raise awareness and educate people about mental illness, the risk of suicide, and treatment options.

**\$1.5 billion for Grants to States/Youth Activities**

**Explanation:** Even as the economy recovers, unemployment figures for young people remain in the double digits. Investing \$1.5 billion in a strong, nation-wide summer jobs program with targeted support for cities with programs for economically disadvantaged young people will complement education and jobs investments.

**\$9 billion for Head Start**

**Explanation:** Created in 1965, Head Start is the most successful, longest-running, national school readiness program in the United States. It provides comprehensive education, health, nutrition, and parent involvement services to low-income children and their families. Head Start has sustained significant cuts in recent years, and without adequate funding the number of children and families unable to access the care they need will continue to increase.

**Support the President's request for the Healthy Start Program**

**Explanation:** Healthy Start provides essential aid to help low-income mothers get access to prenatal care they need. Research has shown that early entrance into prenatal care is the single most critical factor in improving birth outcomes and reducing costs. Increasing a baby's birth weight by half a pound saves an average of \$12,000 to \$16,000 in the first year of medical expenses.

**\$3.6 billion for HIV research within NIH**

**Explanation:** If the United States is to remain the global leader in HIV/AIDS research for better drug therapies, evidence-based behavioral and biomedical prevention interventions, and vaccines, we must invest adequate resources in the NIH. To date, AIDS research has contributed to research for effective treatments for other diseases, including cancers and Alzheimer's disease.

**\$462 million for IDEA, Part C**

**Explanation:** IDEA serves infants and toddlers through age 2 with developmental delays or who have diagnosed physical or mental conditions with high probabilities of resulting in developmental delays. Continued funding for IDEA is essential to ensure early interventions services for infants and toddlers with disabilities.

**\$74 million for International Education and Foreign Language Programs**

**Explanation:** The Department of Education funds important international and foreign language research and outreach through the Title VI international and foreign language education programs. These programs provide students with important international and foreign language skills and help to improve the academic teaching of the business curriculum and conduct outreach activities that expand the capacity of the business community to engage in international economic activities.

**\$1.85 billion for the Jobs Corps**

**Explanation:** Job Corps is the nation’s most successful federal intervention that provides academic remediation and career preparation services to high school dropouts, homeless and foster care youth and other young adults. For almost 50 years, Job Corps has been a high-performing program that routinely engages and partners with local elected leaders, nonprofit organizations, civic and faith-based groups, community colleges and businesses to create jobs, educate and train youth and invest dollars in the local community.

**\$5.1 billion for the Low-Income Home Energy Assistance Program (LIHEAP)**

**Explanation:** LIHEAP is the main federal program that helps low-income households, veterans, and seniors with their energy bills, providing vital and temporary assistance during both the cold winter and hot summer months. This funding remains a lifeline to millions of Americans and helps to ensure that people do not have to choose between paying their energy bills and paying for food or medicine.

**\$610 million for the Minority AIDS Initiative**

- \$190 million to HRSA – Health Resources and Services.
- \$155 million to Centers for Disease Control and Prevention.
- \$160 million to Substance Abuse and Mental Health Services Administration (SAMHSA)
- \$105 million to the Office of the Secretary – General Department of Management.

**Explanation:** Racial and ethnic minorities are severely and disproportionately impacted by the HIV/AIDS epidemic in the United States. The Minority AIDS Initiative aims to close these disparities by providing funds to community-based organizations and health care providers to enable them to improve their capacity to deliver culturally and linguistically appropriate care and services.

**\$4.5 million for the National Domestic Violence Hotline**

**Explanation:** For the past 15 years the Hotline has provided 24-hour, toll-free and confidential services – immediately connecting callers to local service providers. During this economic downturn, crisis calls to the Hotline have increased.

**Increase in funding for the National Institute on Disability and Rehabilitation Research (NIDRR) TBI Model System within the Department of Education**

**Explanation:** Funding for the TBI Model Systems funded by NIDRR in the Department of Education is urgently needed to ensure that the nation’s valuable TBI research capacity is not diminished, and to maintain and build upon the 16 TBI Model Systems research centers around the country. The TBI Model Systems are the only source of non-proprietary longitudinal data on what happens to people with brain injury. They are a key source of evidence-based medicine, and serve as a “proving ground” for future researchers.

**\$32 billion for the National Institutes of Health**

**Explanation:** NIH is the world’s preeminent medical research institution and our best hope for finding cures, improving treatments, and gaining a better understanding of the complex causes of diseases that affect millions of Americans. In addition to improving

health outcomes, NIH creates high-quality jobs and spurs economic growth. In order to remain the world's leader in scientific discovery, we must maintain robust funding for NIH.

**\$23.5 million for the National Violent Death Reporting System**

**Explanation:** NVDRS is a public health surveillance program that does not require the collection of new data. Rather, the program links together data from death certificates, medical examiner/coroner reports, and police records to provide a more detailed and richer understanding of the circumstances that lead to violent deaths. The information collected typically languishes in file folders or in computer systems that don't speak to one another. NVDRS solves this problem and allows state public health officials to develop targeted violent death prevention programs for the populations most at need. Due to limited funding, NVDRS is currently operating in just 18 states.

**\$20.3 million for NIH's Science Education Partnerships Awards (SEPA) Program**

**Explanation:** This program is designed to improve life science literacy throughout the U.S. SEPA grants bring together biomedical and bioengineering researchers, educators, community groups, and other interested organizations in partnerships to create and disseminate programs that give K-12 students and teachers and the public a better understanding of life sciences.

**\$1.4 million for the Office of National AIDS Policy (ONAP)**

**Explanation:** \$1.4 million is needed in order to continue to implement the National HIV/AIDS Strategy and better coordinate the many federal partners involved in domestic HIV programs.

**\$36.1 billion for Pell Grants**

**Explanation:** Pell Grants assist in making higher education more affordable for more than 9.7 million low and moderate income students. This critical funding serves as a pathway to college for those who might have thought a higher education was unattainable.

**Maintain current funding for the Prevention and Public Health Fund**

**Explanation:** Continued funding for the Prevention and Public Health Fund is essential to provide expanded and sustained national investments in prevention and public health, to improve health outcomes, and to enhance health care quality.

**\$100 million for the Preventive Health and Health Services Block Grant, with \$7 million rape set-aside protected**

**Explanation:** The Preventive Health and Health Services Block Grant (PHHSBG) administered by the CDC allows states, territories and tribes to address their own unique public health needs and challenges with innovative and community driven methods. The Public Health Service Act of 2010 included a guaranteed \$7 million minimum set-aside to support direct services to victims of sexual assault and to prevent rape. Rape crisis centers depend on this flexible source of funding to provide direct services, operate hotlines and offer prevention programs.

**\$800 million Race to the Top**

**Explanation:** Race to the Top funds have spurred ground-breaking innovations in schools around the country leading to significant improvements in test scores, teaching training, and overall educational outcomes. Continued funding is essential to continue to encourage reform and improvements in schools around the nation.

**\$40 million for the Rape Prevention and Education formula grants**

**Explanation:** RPE formula grants, administered by the CDC, provide essential funding to states and territories to support rape prevention and education programs conducted by rape crisis centers, state sexual assault coalitions, and other public and private nonprofit entities.

**\$2.67 billion for Ryan White HIV/AIDS Program**

- Part A: \$67 million
- Part B (Care): \$42 million
- Part B (ADAP): \$133 million
- Part C: \$22 million
- Part D: \$8 million
- Part F/AETC: \$4 million
- Part F/Dental: \$1 million

**Explanation:** The Ryan White HIV/AIDS Program provides medical care, drug treatment, and support services to approximately 546,000 low-income, uninsured, and underinsured individuals with HIV/AIDS. Continued Ryan White funding is essential, because even with these critical services, only 37 percent of people living with HIV in the US are retained in HIV care, and only 25 percent are virally suppressed, meaning the need for testing and treatment are far from being met.

**\$1.8 billion for Substance Abuse Prevention and Treatment Block Grant**

**Explanation:** The Substance Abuse Prevention and Treatment Block grant provides formula-based funding to states to support the provision of substance abuse treatment services. The 20 percent set-aside in the SAPT Block Grant is the largest funding source dedicated exclusively to addressing substance abuse prevention in every state and territory in the nation. These funds constitute the bulk of the publicly funded substance abuse treatment and prevention system in the country.

**\$130 million for the Teen Pregnancy Prevention Initiative**

**Explanation:** We need to strategically fund programs that provide all youth with the information and skills they need to make responsible decisions, delay sex, and prevent HIV, STDs, and unintended pregnancy when they do become sexually active.

**\$142 million for Title II i3 Grants**

**Explanation:** This program provides competitive grants to applicants with a record of improving student achievement and attainment in order to expand the implementation of, and investment in, innovative practices that are demonstrated to have an impact on

improving student achievement or student growth, closing achievement gaps, decreasing dropout rates, increasing high school graduation rates, or increasing college enrollment and completion rates.

**\$534 million for Title II School Improvement Grants**

**Explanation:** School Improvement Grants provide much-needed funds to State education agencies which make competitive subgrants to local educational agencies that demonstrate the greatest need for the funds and the strongest commitment to use the funds to raise substantially the achievement of students in their lowest-performing schools.

**\$2.5 billion for Title II Teacher Quality Grants**

**Explanation:** Teacher Quality Grants provide essential funds to recruit, prepare, license, train, and provide on-going education to our nation's educators in order to ensure we have the highest-quality teaching workforce.

**\$327 million for Title X Family Planning Program**

**Explanation:** Title X is the only federal program dedicated to providing family planning services to millions of patients. For millions of men and women, safety net health providers are their only source of access to care including preventive care, cancer screenings, testing for infectious diseases, and domestic violence counseling. Since FY2011, Title X has been cut by more than \$23 million resulting in thousands of patients being cut off from care. Finally, services provided at Title X-supported centers saved federal and state governments \$3.4 billion in just one year, with every dollar invested in publicly funded family planning programs saving nearly \$4 in Medicaid costs.

**\$2 billion for Trade Adjustment Assistance Community College and Career Training Programs**

**Explanation:** The \$2 billion invested over four years through the TAACCCT program has helped transform Community Colleges, ensuring that skills training and workforce development classes are directly relevant to industry needs and job openings. Funding of \$500 million should continue for TAACCCT in 2014.

**Increase in funding for programs authorized by the Traumatic Brain Injury (TBI) Act**

**Explanation:** Known as the "silent epidemic," TBI was dubbed the signature injury of the wars in Iraq and Afghanistan, meanwhile incidences continue to increase here at home among our nation's civilian population. Increased funding of the program will provide resources necessary to sustain and expand state service delivery; and to expand the use of the grant funds to pay for such services as Information & Referral (I&R), systems coordination and other necessary services and supports identified by the state.

**\$2.3 million for the Violence Against Women Health Initiative**

**Explanation:** This program provides funding to eight states to develop a public health response to abuse by strengthening the health care system's identification, assessment, and response to victims and by educating health care providers.

**\$769 million for WIA's Adult Employment and Training**

**Explanation:** Some populations, including veterans, at-risk youth, individuals with disabilities, homeless individuals, TANF recipients, ex-offenders, refugees, and immigrants, face increased barriers and challenges to employment. These populations require additional resources from the workforce system, including supportive services and case management, in order to connect to permanent employment.

**\$1 billion for WIA's Dislocated Worker Employment and Training Activities**

**Explanation:** Some populations, including veterans, at-risk youth, individuals with disabilities, homeless individuals, TANF recipients, ex-offenders, refugees, and immigrants, face increased barriers and challenges to employment. These populations require additional resources from the workforce system, including supportive services and case management, in order to connect to permanent employment.

**\$4,894,660,000 for the Workforce Investment Act, Title I**

**Explanation:** Through education and job training, WIA helps Americans learn the skills they need to find employment or achieve greater education levels. Title I of WIA funds employment and training programs, pilot programs, and six nationwide programs and is administered by the Department of Labor's Employment and Training Administration. WIA funds programs important to bringing citizens into the work force, including programs like Job Corps and others geared toward preparing disadvantaged youth, Native Americans and migrant and seasonal farm workers for employment.

**\$824 million for WIA's Youth Activities**

**Explanation:** Some populations, including veterans, at-risk youth, individuals with disabilities, homeless individuals, TANF recipients, ex-offenders, refugees, and immigrants, face increased barriers and challenges to employment. These populations require additional resources from the workforce system, including supportive services and case management, in order to connect to permanent employment.